

### Background

Currently Swaziland has the highest rate of HIV prevalence in the world, approximately 42%. Data from three recently published randomized controlled trials show that male circumcision (MC) can reduce the risk of HIV acquisition among men by as much as 60% compared to men who are not circumcised. PSI is currently working as a key implementing partner to scale up male circumcision services throughout Swaziland by supporting the development and integration of services in the public, private and NGO sectors.

### Key Challenges to consider

There are several key creative issues and challenges to consider when designing a campaign for MC.

1. *Risk Compensation*, the idea that once men are circumcised they will consider themselves to be 100% protective and will not take additional measures to ensure HIV prevention. This represents a major challenge - we need to ensure that any message driving demand for MC, comes with the caveat that MC is not the 'final solution' but must be used in conjunction with other contraceptive methods. Therefore we believe the communication must simultaneously address the positioning and the risk compensation. Note, whilst we believe that risk compensation is best addressed during the 'after sales service' i.e. post-operation, we must still ensure that when the consumer chooses to be circumcised he is aware that it is not the 'final-solution'.
2. *Male Circumcision is the only HIV prevention method that protects only one partner*; although MC is a promising intervention, there are many groups who oppose bringing such a program to scale. Women's groups, for example, express the above concern in that it protects only one partner – the male partner. They also worry that as programs roll out, circumcised men will be perceived as lower risk partners, and women, who are already at a power disadvantage when it comes to negotiating condom use will have even more difficulty advocating for safe sex. As such, women as sexual partners have been identified as a key target group for male circumcision communication. It is important to ensure that women know that circumcised men can still have HIV, that men who don't wait the 6 week abstinence period after the procedure could put their sexual partners at higher risk for HIV transmission, and that because MC is not 100% protective,
3. *Perception that circumcised men are better lovers*, for example it is perceived that men can last longer during sex and please their girlfriends, their penises look larger, etc. This perception exists despite the fact that research indicates no difference in sexual satisfaction between uncircumcised men and men who have undergone circumcision as adults. While at this point, we certainly don't want a campaign that promotes this as the sole reason to go for circumcision, it would still be nice to be able to use this pre-existing perception to our marketing advantage.
4. *Informed Demand*, a subset of our communication materials should be focused on not just creating demand, but creating "informed demand" - whereby clients are driven to seek services at specific sites that meet/adhere to certain quality standards and are united through a seal of quality.

### Deliverables

*It is important that these have a unified look and feel that is appropriate to the target groups.*

	Target	Item	Due date
<i>Mass-media materials</i>			
1	Men	3 different creative routes for a campaign to position male circumcision; each route should contain a key visual & selling line (for print ads, billboards etc.), radio executions, & viral ideas.	25 May
<i>Clinic-based materials</i>			
2	Women	1 x women's brochure on male circumcision	25 May
3	Men	1 x post-operative brochure	25 May
4	Men	1 x counselling job aid	25 May
5	Public & Service Providers	1 x logo for male circumcision clinic	25 May
6	Public & Service Providers	1 x seal of quality for Male Circumcision	25 May
7	Women	1 x women's poster addressing positioning & risk compensation	8 June
8	Men	1 x men's poster addressing positioning & risk compensation	8 June
9	Men	1 x interactive computer programme explaining MC	8 June
10	Men	Variety of promotional materials e.g. discount coupons, scratch n' win etc.	8 June

## Target

### Primary Target Men

Ndoda is a 21 year-old struggling form 2 drop out trying to make ends meet. He was born in Shiselweni but recently moved to Msuidzo in search of work. His days are characterized by waking up early to go look for “piece” work or to hang out at busy spots, trying his luck on the ladies. Ndoda dreams of bigger things for himself – like becoming a football player with the army. But the situation he finds himself in doesn’t allow him to make any progress towards this goal. At the moment, he satisfies himself with playing for a local team and listening to music on the radio. He has a steady girlfriend, but has one or more Makhwapheni (colloquially known as a ‘roll-on / roll-off girlfriend). He has heard about circumcision but doesn’t know where or how it is done.

### Key drivers to get circumcised

1. Peer pressure: men are most likely to get circumcised if they are convinced /or persuaded /or forced by their partner, or influenced by their peers. *“.....Yes because maybe for me I wouldn’t have gone for MC but because I had a lot of people here at work that were behind me and I eventually went there...”* [Male, aged 20-24, circumcised]
2. Health & Hygiene: consumers understand that circumcision prevents STIs & HIV, and improves overall cleanliness/hygiene. *“.....I think what can make a person to go for MC... looking at the time we are living in is a time for diseases from sexual intercourse. They are saying that when you are circumcised the chances of getting diseases are slim..”* [Male, aged 15-19, not intending to be circumcised]
3. Sexual pleasure & prowess: perception that circumcised men are better lovers, for example can last longer during sex and please their girlfriends, their penises look larger etc. *“.....Another thing that can make me get circumcised is that now there are girls that are convinced about circumcision. They tell themselves that when you are not circumcised you are not good in bed..”* [Male, aged 20-24, not intending to be circumcised]

### Key barriers to circumcision

1. Recovery period limiting sex life & work/ fun: for the majority, the thought of going without sex for more than a month after the procedure is daunting.
2. Fear of pain: consumers are concerned with the issue of pain both during & after the operation.
3. Don’t want to get HIV tested: taking a HIV test is a mandatory for the procedure, note those who test positive will not be denied circumcision. However, consumers fear testing for multiple reasons, the primary being if they test positive they can be stigmatised by the community.
4. Lack of knowledge - in areas such as pain, recovery etc – but also because MC is really only available in the urban areas at this point in time and those in the rural areas (about 70% of the population in Swaziland is rural) haven’t received much, if any, information about MC.

### Other points

1. There is already base demand for MC driven by other service providers, positive word of mouth, and basic information on MC that may be conveyed in the media.
2. Ritual circumcision is not practiced in Swaziland, although because of the proximity to and movement between Swaziland and South Africa and Mozambique, there are some perceptions that MC is associated with culture and religion.

### Secondary Target Women

Thembi is 20 years of age. She was born in the Northern Hhohho region where she finished high school, and after spending 2 years jobless moved to Manzini to find employment. Thembi’s day consists of waking early, preparing breakfast and clothes for her live-in boyfriend, and boarding public transportation to her job at the garment factory where she works an 8-hour day, 6 days a

week. Thembi dreams of getting married to her boyfriend and going to university and being a successful business woman or model, but she simply can not afford this. She has a son who lives with her mother to whom she must regularly send money. In her free time, she visits her son, goes to church on Sundays, watches soapies, listens to the radio and reads newspapers occasionally when they're brought by her boyfriend.

### Communications Objectives by Deliverable

#### 1. Campaign Routes

- Objective: the key objective of the campaign is to drive demand for circumcision services.
- Insights: building from barriers and drivers as listed above.
- Positioning / benefit to be communicated: For Ndoda, male circumcision is the HIV prevention method that makes men want to be like him and women want to be with him.
  - People look up to Ndoda and find him more appealing (both women & men).
  - When Ndoda talks about his experience with MC it inspires others to seek services.

#### 2. Women's Brochure

- Objective: to create a brochure with key info on circumcision, orientated to the female audience
- Insight: I think that because my man is circumcised he's not a risk to me.
- Overarching Benefit / Message: Strong, savvy women know that just because he's circumcised doesn't mean that he's HIV-negative and HIV prevention measures are still necessary.
- Specific points to be communicated in the brochure;
  - a) Male circumcision is the complete surgical removal of the foreskin from the head of the penis.
  - b) Male circumcision is a simple procedure done with a local anaesthetic (pain killer) by trained medical providers
  - c) MC reduces the risk to men of getting HIV, but it does not provide 100% protection. Men who have had MC are still able to infect their partners with HIV and other sexually transmitted infections such as herpes, syphilis and genital warts.
  - d) Over time, as more men become circumcised women's risk for HIV may reduce as the prevalence within the population decreases. Female partners of circumcised men have reduced risk of cervical cancer.
  - e) You can play an important role for your partner at every stage of the MC process by discussing the benefits of MC, encouraging him to seek the service from a trained provider, accompanying him to the procedure, joining him for MC and HIV counselling, and by supporting him during the recovery period by helping him to abstain from sex for 6 weeks.
  - f) Sex should be avoided for 6-weeks after MC surgery to give the wound a chance to heal.
  - g) HIV-positive men are more likely to transmit HIV during the healing period, and HIV-negative men may be more likely to get HIV if they have sex before the healing is complete.
  - h) Men who have had MC are still able to infect their partners with HIV and other STIs. After MC it is important to protect yourself by using condoms, abstaining from sex, being faithful and reducing multiple concurrent partnerships.

#### 3. Post Operative Brochure

- Objective: to create a brochure with key post-operative instructions, orientated to the male audience
- Insight: As soon as the pain from the procedure decreases/goes away, I am healed and can resume standard sexual activity and hygiene practices.
- Overarching Benefit / Message: It's necessary to follow post-operative guidelines to ensure safe healing.
- Specific points to be communicated in the brochure:
 

**Proper care can help you heal faster**

- a) After the anesthesia has worn off, you will feel some pain due to cutting of the skin. Take any pain medication provided by the clinic.
- b) After the operation, you should rest for one or two days. This will help the wound heal.
- c) The bandage should remain in place for 48 hours. If it comes off earlier, the penis is safe inside clean, tight underwear.
- d) Make sure the penis is held in place upward. It should not hang down. This will make the swelling increase.
- e) You can bathe on the day after your procedure, but do not let the dressing get wet.
- f) After the dressing has been removed, you should wash the penis gently with water and soap on a soft cloth two times daily.
- g) Resuming sexual intercourse must wait for six weeks until the wound is completely healed.
- h) Erections may cause some pain. Passing urine can help, but specific medicine for this purpose is not advised. Any pain from erections will go away after the first few days.

**Signs to look for**

- i) Some bloodstain in the dressing or in the underwear is normal.
- j) Severe pain
- k) Inability to urinate
- l) Pus or other discharge from the wound
- m) Increased swelling
- n) Fever within one week of surgery
- o) Severe lower abdominal pain
- p) If you have any of these conditions, return to the clinic or the casualty department of your nearest hospital or clinic.

**Returning to the clinic or reviews will help ensure you are healing properly.**

- q) Please return to the clinic to have the bandage removed 2 days after the procedure and for a follow-up visit 7 days after the procedure.

**Sex after circumcision.**

- r) It takes 6 weeks for the wound to heal. Engaging in sexual intercourse prior to this time will delay healing and may increase the risk of HIV transmission to you and/or your partner.
- s) Circumcision does not provide 100% protection. It is still possible for a circumcised man to get HIV and to pass HIV onto his partner.
- t) Now that you are circumcised, continue to protect yourself by using condoms, abstaining from sex, being faithful to one partner and reducing concurrent sexual partnerships.

**4. Counselling / Job Aid**

- Objective: to create a job aid to be used by MC counselors to describe the MC process, encourage HIV testing, and to answer and address specific questions the client may have prior to the procedure.
- Insight: Men are decision-makers and are reluctant to appear ignorant.
- Overarching Benefit / Message:
- Creative considerations: Rather than structuring the job aid in a chronological order, messages should first address men's biggest concerns. Images should help spark conversation rather than demonstrate the client moving through the clinic.
- Creative Mandatories: the job aid should have images on one side and text on the back. The text aims to provide cues to the counsellors on topics to cover. The specific points outlined below are to be used as the text on the back of each image.
- Specific points to be communicated in the job aid:
  - a. **How much will it hurt?**
    - i. When MC is conducted by a trained provider, risks are limited, pain is reduced and follow-up care is provided.
    - ii. Your provider will work to minimize risks and discomfort.

- iii. A local anesthesia (pain killer) is given through an injection so you won't be able to feel the surgery.
- b. **When can I have sex again?**
  - i. Healing takes at least 6 weeks, so it is important to refrain from sex and masturbation for 6 weeks.
  - ii. Having sex too early can damage the wound and extend the healing period.
  - iii. Having sex too early can also increase the risk of transmission for you and your partner.
  - iv. Because MC is not 100% protective, once you do resume sexual activity, it is important to take other HIV prevention measures, such as condom use to reduce transmission risk.
- c. **When can I play soccer again?**
  - i. During the first 7 days, it is important to rest and keep the penis clean and dry.
  - ii. Wear clean underwear and return for scheduled reviews
  - iii. You may experience some pain and should not engage in physical activity if you are in pain.
- d. **What actually happens during the MC process?**
  - i. This graphic should outline the steps in the process:
    1. Registration
    2. MC counselling/HIV testing
    3. Clinical exam
    4. Surgical procedure
    5. Recovery Room
    6. Departure from clinic
    7. Follow-up visits
- e. **What happens during the procedure?**
  - i. This graphic should outline the steps in the procedure
    1. Enter the surgical room & lie down on table
    2. Surgeon will clean the genital area
    3. Local anesthesia will be given
    4. Foreskin will be removed
    5. Skin will be stitched in place
    6. Penis will be bandaged
    7. Post-operative instructions given
    8. Client directed to recovery room
- f. **MC risks and benefits**
  - i. Risks:
    1. Pain during recovery period
    2. Bleeding, infection
    3. Reaction to anesthesia during procedure
  - ii. Benefits:
    1. Easier to keep penis clean (maintain hygiene)
    2. Reduced risk of HIV
    3. Reduced risk of other STIs: syphilis, genital warts, herpes
    4. Reduced risk of penile cancer
    5. Reduced risk of cervical cancer to female sexual partners
- g. **How does MC prevent HIV?**
  - i. Inner surface of foreskin provides easy entry for HIV into the body
  - ii. MC is the complete removal of the foreskin
  - iii. After MC HIV has to work harder to get into the body
  - iv. Even after MC you can still get HIV through sex without a condom
- h. **The importance of HIV testing**

- i. HIV testing is part of the MC process
      - ii. To benefit fully from MC, you need to know your HIV status
      - iii. HIV can complicate recovery after MC, and knowing your status can help you plan for your recovery needs
      - iv. Testing can also help you plan your future and make the best decisions to prevent transmission.
    - i. **Life after MC**
      - i. Emphasize partial protection, risk compensation, other HIV prevention methods
5. Clinic Logo
- Background: PSI Swaziland will be opening a circumcision Clinic in July 2009. Through consumer testing we selected “Litsemba Letfu” (Our Hope), as the clinic name – which resonated strongly with the target. A draft logo was created; we are not bound to the current execution, but would rather have a logo that works in the context of the bigger campaign / positioning work.
  - Objective: design a logo for the “Litsemba Letfu” Male Circumcision Clinic, including a style guide containing (for example) guide on how to use it across various formats, colour schemes etc.
  - Communication objectives: the logo should convey the following 3 messages;
    - a) Hope: consumers perceived MC as giving them ‘hope’ in minimising the chances of contracting HIV.
    - b) Quality: PSI currently has good equity of providing quality services vs. government / other NGO partners. Building on this, it’s imperative that the consumers receive the reassurance of quality circumcision, given the sensitivity of the procedure and the risks involved.
    - c) Masculinity: qualitatively we found that an exclusive male orientated clinic would be a key driver in creating demand / word of mouth; we also wish to capitalise on this through the logo design.
  - Creative Challenges
    - a) Ease of reproducibility: the logo must work in black & white /or colour, and be adaptable for various formats letter heads through to advertising
    - b) Differentiation vs. the existing New Start clinic: some consumers viewed ‘Hope’ as building on ‘New Start’, talking of a new day, or a new beginning. Whilst this good, as it haloes on HIV testing, we also wish that the clinic will be clearly differentiated vs. the New Start logo & branding.
6. Seal of Quality
- Objective: create a seal that will connote quality of service to the target consumer, and become the gold standard of accreditation for the circumcision providers. The seal will be used across the PSI & partner networks, in the clinic itself, and across all marketing / information based materials.
  - Communication objectives: the logo should convey the following messages;
    - a) Quality: the seal must give that the consumer is purchasing the best possible service, and be aspirational to service provides to attain the high standards required for accreditation.
    - b) Value: quality, safety, affordability
  - Creative Challenges
    - a) Ease of reproducibility – as above.
7. Women’s poster – this should be derived based on the campaign direction, but should specifically convey the key message conveyed in the women’s brochure that just because he’s circumcised doesn’t mean that he’s HIV-negative and HIV prevention measures are still necessary.
8. Men’s poster – this should be derived based on the campaign direction, but should be specifically directed towards minimizing risk compensation (see the football poster from Zambia).

9. Interactive computer programme

- Objective: create an interactive computer program/game that conveys information about MC and allows the client to get comfortable with the procedure.
- Channel: in the clinic, there will be an internet resource center. In order to use the computers, clients would be directed to home page that would require them to go through this program before accessing the internet. In addition, we could also try to get this program/game as the home page in various internet cafes around Swaziland.
- Potential ideas:
  - An interactive 3-D layout of the clinic where the client can move through the clinic learning about the different steps in the process. The client could virtually move through the center and click on different doors to learn/see what happens inside;
  - A flash game that quizzes the client on facts of male circumcision;
  - A flash game that doesn't convey facts or the clinic, but merely gets men more comfortable with the idea of circumcision. (There was a flash game where you played a person on a bicycle delivering mosquito nets to people in rural villages).

10. Promotional materials

- a. In order to encourage our clients to serve as advocates for MC, 1-2 unique promotional materials should be developed to be given away to MC clients. This promotional material should be something desirable to serve as a conversation starter.
- b. Additional promotional materials (t-shirts, hats, etc.) to be given away at promotions events.

**Executional Mandatories**

All print materials must include logos of MC Partners (PSI, MSI, Jhpiego, Pop Council), FLAS, Ministry of Health

**Budget**

\$15,000, printing costs on top.

**Success Criteria**

1. Awareness & recall – awareness levels (target to be set) & recall of strategic messaging will be sampled on a monthly basis.
2. Demand for circumcision – the campaign should exceed circumcision targets.

**Approvals**

<i>Signature</i>	<i>Signature</i>	<i>Signature</i>
Jessica Greene (Technical Services Director)	Dominic McNeill (Marketing Advisor)	(Creative/Account Director)

**Attachments**

1. Ndoda in pictures
2. Existing Male Circumcision Brochure
3. Draft Clinic logo
4. Draft Seal of quality
5. Zambia creative materials

Appendix 1

## AUDIENCE PROFILE - Ndoda's Life in Pictures



His beer



Ndoda



His Girlfriend



His Shoes - ALL STAR



His Shirt - Dickies



His Football Star - Teko Modise



His 'Room'



His Music Star



His first ideal car



His Friends



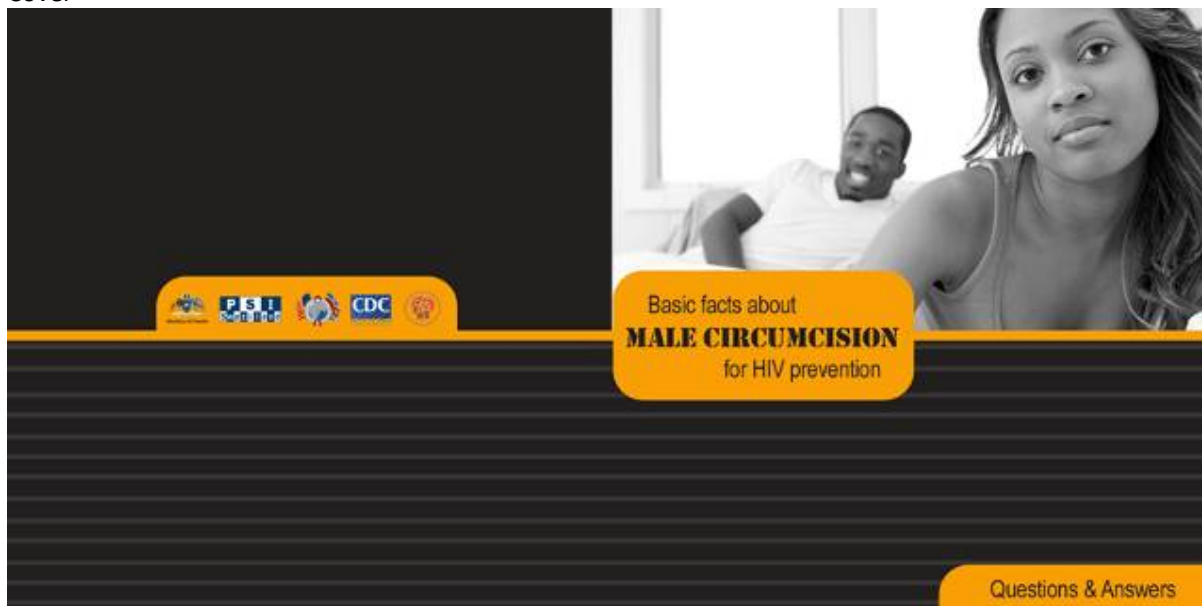
His cellphone



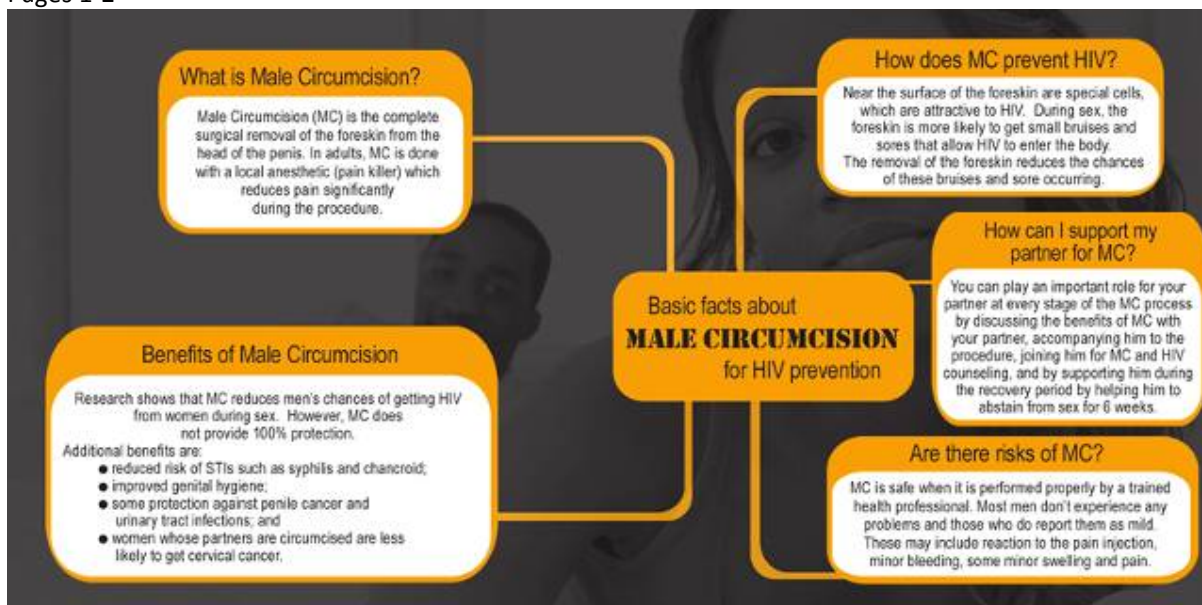
His Football Team - Orlando Pirates

## Appendix 2 – Existing Male Circumcision Brochure

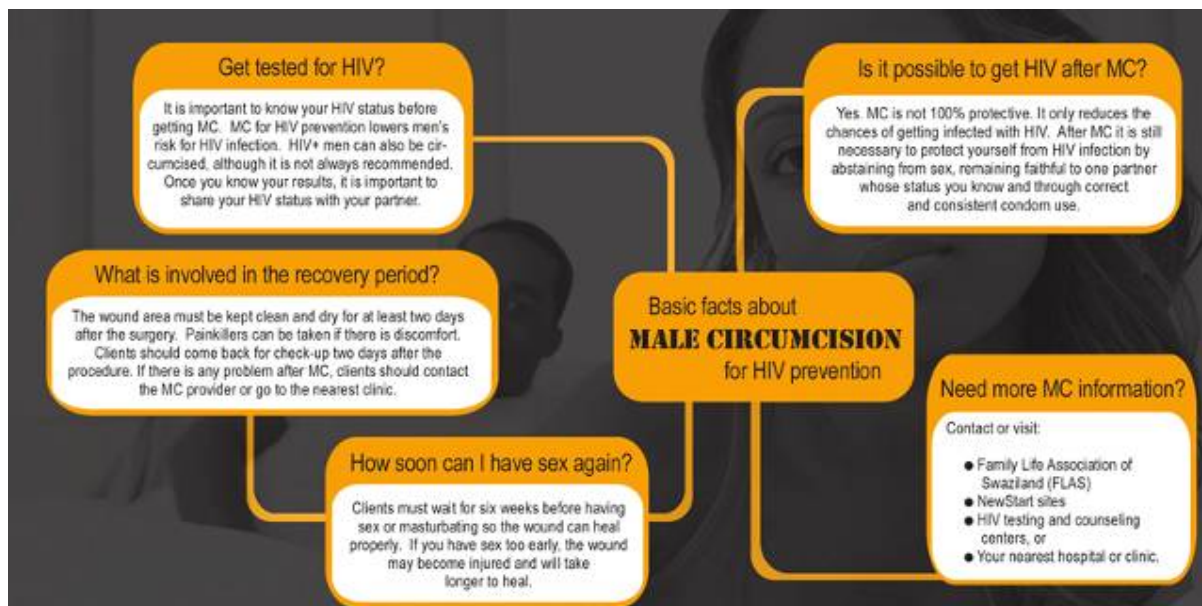
### Cover



### Pages 1-2



Pages 3-4



Appendix 3 – Draft Clinic Logo



Appendix 4 – Draft Seal of Quality



Appendix 5 – Zambia Creative

**I'M A WINNER  
BECAUSE I  
HAVE BEEN  
CIRCUMCISED**

Male circumcision (MC) is the surgical removal of the foreskin in men. MC protects you against HIV and improves your sexual hygiene. After MC, the skin on the head of the penis becomes harder, making it difficult for HIV and STIs to penetrate.

MC does not provide 100% protection against HIV. It should be used together with other proven HIV prevention methods including:

- Abstinence
- Reduced number of overlapping sexual partners
- Correct and consistent condom use
- Knowledge of status

**DEFEND YOURSELF FROM HIV. GET CIRCUMCISED**

MC is currently available at **Harare** Spillhaus ZNFP Clinic, **Bulawayo** Eye Clinic, **Mutare** Provincial Hospital, **Mt Darwin** Karanda Mission Hospital

Materials

“I ENCOURAGED MY  
PARTNER TO GET  
CIRCUMCISED  
BECAUSE IT'S THE  
RIGHT THING  
TO DO”



Male circumcision is the surgical removal of the foreskin in men. MC protects men against HIV, improves sexual hygiene and protects women from the virus that causes cervical cancer. After MC, the skin on the head of the penis becomes harder, making it difficult for HIV and STIs to penetrate.

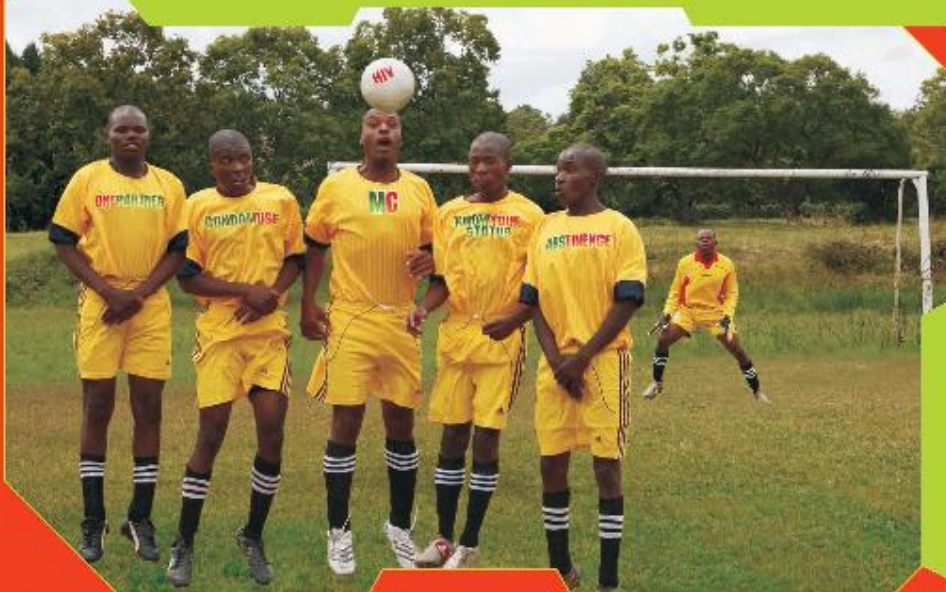
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**DEFEND YOURSELF FROM HIV. SUPPORT YOUR PARTNER ON MC**

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**DEFEND YOURSELF FROM  
HIV. GET CIRCUMCISED**

# FREE

## MALE CIRCUMCISION

Do it for you. Do it for Zambia.

Benefits include partial prevention of  
- HIV  
- Ulcerative STIs  
- Cervical cancer in female partners

This coupon is valid for a  
**FREE Male Circumcision**  
for 30 days after \_\_\_\_\_.

Free MC?!  
Is it  
really true?!



It is!!! Take this coupon to  
Kudu Rd. or the YWCA New Start clinics  
and you get your  
circumcision  
for free!!!



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These men face the challenges of chasing a successful career, of finding the right partner, and certainly the dangers of HIV and AIDS. But these men are confronting life and loving every last moment of it. In fact, each of them have been circumcised, and as you can see, they couldn't be happier about it. All of these men are facing life's challenges head on, when will you?

## Male Circumcision Will you be next?

**Benefits include partial prevention of:**

- HIV

- Ulcerative STIs

- Cervical cancer in female partners

**For bookings go to \_\_\_\_\_**  
**Come for FREE Male Circumcision at \_\_\_\_\_**  
**On \_\_\_\_\_**

Male circumcision services are available at YWCA New Start Centre,  
 Nationalist Road, opposite UTH and Kudu Road, Plot 121 after Mother Theresa Hospice.  
 For more information on MC, send a free sms to 3948.

