**Media, messaging**

**PROMISING PRACTICE: Tanzania JHU·CCP: Printed Materials and Radio Spots**

**INTRODUCTION**

**Key Promising Practices:**

- Close collaboration with implementers to improve and test campaign materials
- Production of radio spots and print materials tailored to the different regions
- Radio spots making use of satisfied clients and local health experts

**Introduction**

The John Hopkins University Center for Communication Programs (JHU·CCP) runs the USAID funded Tanzania Capacity and Communications Project (TCCP). The project is supported by the American people through the United States Agency for International Development (USAID) as part of the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR). This five year project works in partnership with the Ministry of Health and Social Welfare and a range of other stakeholders to deliver communications support for HIV prevention, reproductive health and maternal and child health projects. In regard to VMMC, TCCP is the main vehicle for overarching “above and below the line” demand creation activities in Tanzania. TCCP provides a wide spectrum of communications materials (print and radio) to Jhpiego in Iringa, Njombe and Tabora. Recently JHU·CCP has partnered with several other VMMC implementers funded by the US Government, including Intrahealth, ICAP, Bugando Medical Center, HJFMRI and Pharmaccess to begin providing communications support to them in their designated regions. This will also include materials for the Early Infant Male Circumcision campaigns.

**Target Groups**

- Primary audience: Youth and men aged 10 – 49, but recognition within that of the difficulties in reaching older, married men*. Youth and unmarried men below the age of 24 are the group who appear most receptive to their messages.
• Secondary audience: Female partners are a key secondary audience, as they can act as motivators for men, and in the case of married couples, give support to their husbands.

*As a result, both radio and print materials are consciously designed with the intention of making VMMC appear more attractive to older men (aged 24+). The radio spots include the message that men aged 24 and above will be given priority at clinics. This supports Jhpiego’s strategy of dedicating some services exclusively to older men, and making clinics more attractive to older men by giving them priority and separate spaces to come for services without needing to wait with younger boys.

Scale and scope

• Radio and print materials for VMMC are currently being produced for use the Iringa, Njombe and Tabora regions of Tanzania.
• New partnerships have recently been formed which will see TCCP expand output to Mwanza, Rukwa, Shinyanga, Simiyu, Geita and Kagera.

Organisations Involved

Lead
• JHU·CCP

Funding
• PEPFAR through USAID

Other Partners
• Jhpiego, Media for Development International (production partner)
• In 2012 JHU·CCP also began producing materials for Intrahealth, ICAP, Buganda Medical Center, HJFMRI and Pharmaccess.

Who is carrying out demand generation activities?

• JHU·CCP oversees production, and employs an in-house graphic designer to work up the designs of the print materials, liaising with Jhpiego and other implementers to
fine-tune the text and factual content of the materials, and to refresh materials as campaigns progress.

- JHU·CCP also works with its production partner Media for Development International to produce the radio spots, again with close collaboration with partners and local health authorities to make sure the style, tone and factual content of the spots tally with the campaign’s aims and key messages.

Management of demand generation activities

- JHU·CCP

APPROACH TO DEMAND CREATION

The approach to Demand Creation

Rationale

TCCP states that it has adopted a marketing-based approach to demand creation and is not guided by a particular theory of change. However, based on feedback from pre-testing groups, TCCP’s messaging focuses mainly on the health benefits other than partial HIV prevention, since TCCP believes that understanding of the HIV benefit of VMMC is now well known and that a focus on HIV could complicate efforts to attract older men, who don’t feel the HIV risk applies to them.

Key message

“It’s clean, it’s safe, it’s free.”

The key messages vary depending on the primary purpose of the campaign material, but based on the focus group feedback, messaging in radio spots has tended to centre on the other benefits of VMMC aside from partial HIV prevention, with the ad in Iringa currently saying, “It’s clean, it’s safe, it’s free”.

Print materials such as posters and flyers have also focused prominently on the fact that the procedure is free and in their local area.

DEMAND CREATION ACTIVITIES

Demand creation
TCCP design and deliver a wide range of IEC materials, including posters, brochures, flyers, banners and radio spots (ads) and magazine platforms, all produced in Swahili. TCCP works very closely on these with Jhpiego, who pre-tests TCCP outputs and provides formative research and input on messaging strategies. All types of content are tailored as far as possible for the region they are being designed for.

TCCP also produce a TV drama which has included some VMMC references and story lines.

**Intervention components**

1. Broadcast media
   a. *Radio spots*: In 2012/2013, TCCP produced a total of 16 radio spots. Three of these spots were produced for use in the Iringa Region and three identical spots (with some minor regional variations) were produced for the Tabora Region. Radio spots for Njombe are in the process of being developed (CHECK). The spots consist of testimonials about the positive benefits of VMMC and call out to the people of that region. One spot is addressed to men and features a “satisfied customer” testimonial from an older man, a second spot is directed at women to encourage them to support their husbands to seek VMMC, and the third spot features a medical service provider, stating the benefits of VMMC. The other 10 spots are point of service spots which provide detailed information about the specific sites were the service is available. The radio spots are broadcast up to 12 times daily in prime-time slots on 11 local radio stations in Iringa and Tabora. The total number of broadcasts in 2012 was nearly 9,000. TCCP does not broadcast the spots continuously but rather for two weeks ahead of and during clinical campaigns, and in sporadic bursts throughout the year for the benefit of static sites. Each spot is 1 minute long, and on average each station will broadcast 8 of these spots per day. These spots have been on air for about a year, and plans to refresh them with new output are in the pipeline.
   b. *Pre-testing and message content*: The radio spots have been developed in close collaboration with Jhpiego and Tanzania’s regional health authorities in order to capture the right message for each area. All spots were pre-tested by Jhpiego in Iringa and Tabora and approved by the health authority prior to broadcast. As the health authorities were heavily involved in the
scripting process from the beginning, no major changes were needed to obtain sign-off. Jhpiego carry out the pre-testing of the spots and TCCP modify and refine the audio based on comments and feedback from both the pre-testing exercise and general feedback from the field. For example, during the process of developing the first radio spots, there were some words used which the script writers thought were clear, but the test group didn’t respond positively to. These were changed, and the team also took on feedback to remove the “fear” element of VMMC and focus on the health benefits. It was also highlighted by the group that that in the past, men had to pay for a VMMC procedure. Therefore the fact that it was now “free” became a key issue to include in the messaging. The tag-line, “It’s clean, it’s safe, it’s free” was a culmination of this process. Testimonials also form a key part of the messaging within the spots. Men who have been circumcised and their wives were brought on board to talk about their positive experiences. They were selected during a series of field trips when TCCP was able to record audio and take photos of clients, which are also used in printed materials. TCCP feel the testimonials are adaptable to be used across the regions as they are in Swahili and fairly generic. However TCCP does try to make the spot appeal to the local audience, as a call to action. For example the adverts in Iringa currently all start with the phrase “Hey people of Iringa...” TCCP recently started working with new implementing partners to produce radio spots, and have used the radio content developed with Jhpiego as a template, but in the new financial year TCCP will begin to develop the content according to the new regions more specifically.

c. Production: JHU•CCP’s production partner Media for Development International works in the same building – thus creating a strong advantage to the production process, as everything is produced on site. Media for Development International supply a well equipped recording studio and an experienced radio production team. When scripting and recording for the radio spots began, it was actually quite a lengthy process, as various stakeholders were required to consult on the content, and it took a while to sign off the final product. But since then, the process of modifying and producing new spots has become much more speedy and efficient – efficiencies TCCP hope to pass onto the new implementation partners.

d. Local radio magazine programs: VMMC has also been integrated into an existing radio platform, which is managed by TCCP in order to facilitate airtime for a spectrum health projects. TCCP have partnered with 12 radio stations in total. In Iringa for example, two stations broadcast these programs on a weekly basis. VMMC implementers such as Jhpiego are
asked to nominate regional health representatives to attend the magazine, where they will be given a slot of a few minutes to talk about VMMC, followed by an opportunity to take calls, answer any questions, and if a campaign is on-going, talk more about the how outreach services can be accessed. Most magazines programs are between 45 minutes to two hours long on air all year round, and rotate between topics and partners. TCCP does not supply scripts but encourages producers to record ‘vox-pops’ with the public on the given health topic, and to link up with health providers to seek more information, especially if a technical representative is not able to attend. Satisfied clients have not been nominated to take part in the magazines shows as yet – this is an opportunity TCCP would like to follow up.

e. **TV and radio drama:** The TV drama “Siri ya Mntungi” – meaning “Secrets in the pot” is a project commissioned by JHU-CCP and produced by their partner Media for Development International. The team are currently incorporating a VMMC storyline into the 26 part series, which focuses on the challenges that everyday Tanzanian families face, included HIV related issues. See [http://www.siriyamtungi.com/en/](http://www.siriyamtungi.com/en/)

TCCP is also incorporating a storyline on circumcision into a radio drama focused on distance learning for community volunteers. Themes include malaria, safe motherhood and HIV. One episode out of 39 is devoted to VMMC. In a similar process to the radio spots, JHU review the scripts and take them to partners to make sure the messages are correctly articulated. They also supply listening guides and cue cards for community volunteers to use during discussions. The 39 episodes will finish their run in August 2013, and an impact evaluation is planned for 2014.

2. Print materials

a. **Print materials:** TCCP produces a range of VMMC branded, printed materials, such as brochures posters, flyers, banners, bumper stickers, tyre covers, t-shirts and wristbands. The wristbands have proven popular with Peer Promoters and clients – and these will often be given to clients to wear after they’ve had the procedure. Some of the materials, such as the brochures, are given out at clinics and during outreach activities to provide prospective patients with more information, and other materials, such as the posters, flyers and banners provide information about the time and place where the service is available. Referral cards are also produced with directions to local VMMC facilities and distributed by implementers during community outreach activities. All IEC materials are to be reviewed in new fiscal year (October 2013). TCCP
will invite existing and new partners to look through all the current materials and suggest amendments and how to refresh them.

b. *Ambient media:* TCCP have also set up billboard agreements in 6 sites across Iringa, Njombe and Tabora.

c. *Brochures:* The VMMC brochures contain detailed information about the benefits of VMMC and the popular questions people ask. Three individual brochures have been tailored for older / adult men, young men and women. The brochure for adult men focuses on practical advice about what to do after they’ve had their circumcision, including care of the wound, follow up visits and abstinence for 6 weeks. The brochure for women focuses on health benefits for them as partners, and cleanliness and advises how to find out about the VMMC sites through listening to the radio, and texting Jhpiego’s free SMS number or calling their toll free number.

d. *Leaflets/flyers:* Leaflets are region specific and contain both generic information about VMMC and specific information about where static sites are located. During campaigns, they are modified to list all the sites in the area where outreach will be done. Having looked at the figures of how many leaflets are printed, compared to attendance at sites, TCCP estimate that for every five flyers given out, the sites get one client in.

e. *Posters and banners:* Posters and banners are deliberately kept quite simple, as their main purpose is to let the prospective client know when and where the VMMC clinic is taking place. The posters therefore invite the man to attend in his area: “Vijana na Wanaume wa Tabora” and space is left blank for implementers to fill in exact dates and locations, which may not be known at the time of going to print.

f. *Production and supply:* TCCP employs a graphic designer who takes his draft designs to Jhpiego and other implementers for collaboration and feedback. Materials have proved popular with prospective clients – evidenced by the fact that Peer Promoters on the ground are constantly asking for more materials to hand out. TCCP prints in bulk and will produce thousands of leaflets for each campaign. The team liaises with Jhpiego to plan ahead for campaigns, and will ideally start the process a few months ahead to avoid backlogs and stock-outs. However quantifying how much of each material to send to print for is not an exact science, and there is some anecdotal evidence of Peer Promoters running out of materials, or borrowing materials which have branding for a different region, in order to meet the immediate need on the ground, while waiting for re-prints. To counter this teams try to check and track numbers of materials given out
over campaign materials for future print runs – but the amount of materials used can vary greatly between areas and client groups.

EVALUATION OF DEMAND CREATION ACTIVITIES

Evaluation of demand creation activities:

TCCP has not conducted a formal evaluation of its demand creation activities around VMMC. The team has anecdotal evidence of impact; for example, whenever there has been a problem with broadcasting the radio spots, they have heard from Jhpiego that attendance drops off. Along with Jhpiego they closely monitor demand at the service sites, including the ages of the clients and the reasons they give for attending VMMC.

TCCP hopes to be able to quantify the impact of radio spots more accurately when the new partners begin broadcasting their campaign broadcasts. As the implementers haven’t previously used radio TCCP are keen to see how the new spots affect attendance at both fixed and outreach sites.

LEARNING AND SCALE UP

Successes/Challenges

Successes

*Tailoring messaging to local contexts:* TCCP’s success has been to incorporate audience feedback and regional references into its radio and print content, in order to reach out to people with tailored and appropriate messaging.
Challenges

*Matching supply and demand:* The main challenge appears to be a logistical one – how to ensure enough of the right materials reach corresponding social mobilisation activities in each region. The fact that materials are tailored to local contexts exacerbates this, since materials from elsewhere cannot be used to plug gaps.

*Engaging older and/or married men:* Young men have proven much more receptive to the radio spots and print materials, so JHU•CCP is keen to explore how the materials can be revised to more effectively appeal to older men.