

these to guide strategies. Thus, monitoring and evaluation or approaches need to be developed to deal with some high-risk groups such as the adolescents and men who have sex with fellow men.

CHAPTER FIVE

FINDINGS AND INTERPRETATION OF RESULTS

5.1 INTRODUCTION

This chapter presents the findings and interpretation of the results from the field data on YAZ behavioural change communication strategies. The data was collected through questionnaires, in-depth interviews, direct observations and document analysis.

5.2 QUESTIONNAIRE

A total of 72 questionnaires were administered to the Youth groups who were working with YAZ. The groups were drawn from Kaunda Square, Northmead/Rhodes Park, Matero and Mtendere. These included the youths who are currently in school and those who are not in school. Initially a sample size of 100 was proposed but it was discovered that some groups working with Youth Alive Zambia were on recess at the time of the survey, hence the modification of the sample size 72.

5.2.1 Composition of samples by gender

Out of the 72 respondents 42% were male and 53% were female. The finding generally shows the participation of more females in HIV/AIDS activities than males. In Matero, out of the 17 respondents

only six (6) were male. Whereas in M'tendere there was more participation of males as shown in the table below:

Table 1: Residential Area and Sex of respondent

| Residential Area | Sex of respondent | | Total |
|------------------|-------------------|--------|-------|
| | Male | Female | |
| Kaunda square | 10 | 11 | 21 |
| Matero | 6 | 11 | 17 |
| M'tendere | 10 | 8 | 18 |
| Northmead | 8 | 8 | 16 |
| total | 34 | 38 | 72 |

Source: Field Data

5.2.2 Composition of samples by age

Among the respondents, 40 % were aged 20 to 24 years. Majority of the members fell in this age group 20 to 24. 35% of the respondents fell in the age group 15 to 19 years whereas 25% were aged between 25 to 29 years of age as shown in table 2. The explanation to this finding could be a possibility that majority of this age group could have completed their studies and are not yet working.

Table 2: Age of Respondents

| Age | Number | Percentage |
|----------|--------|------------|
| 15 to 19 | 25 | 34.7 |
| 20 to 24 | 29 | 40.3 |
| 25 to 29 | 18 | 25 |

Source: field data

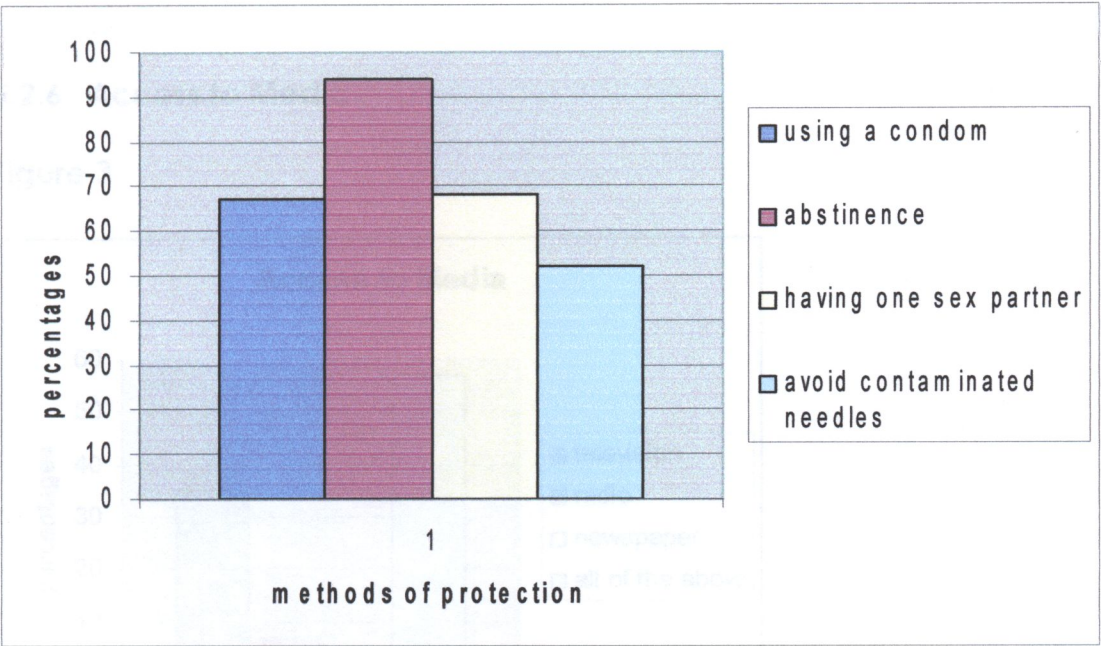
5.2.3 Knowledge of Transmission

From the responses, 100% of the respondents acknowledged that HIV/AIDS is transmitted through unprotected sex. On the transmission of HIV/AIDS through mother to child and use of contaminated needles 8.3% and 19.4% said HIV cannot be transmitted from mother to child and contaminated needles respectively. A small percentage of 4.2% said HIV can be transmitted through witchcraft whilst 57% said the virus can be transmitted if STDs are left untreated. 11% of the respondents said the virus can be transmitted by having sex with unhygienic person. From the responses it can be deduced that there is still a number of people who have no idea of how the HIV the virus is transmitted.

5.2.4 Knowledge of Prevention

The following were the findings on the knowledge people have about preventive measures to HIV infection: 68% said by using a condom a person can be protected from the HIV, whilst 53% said HIV can be prevented by avoiding the use of contaminated needles. 94% said abstinence was the best way of prevention. From this it can be observed that the youths have appreciated the values of YAZ on abstinence.

Figure 2: Protection from HIV



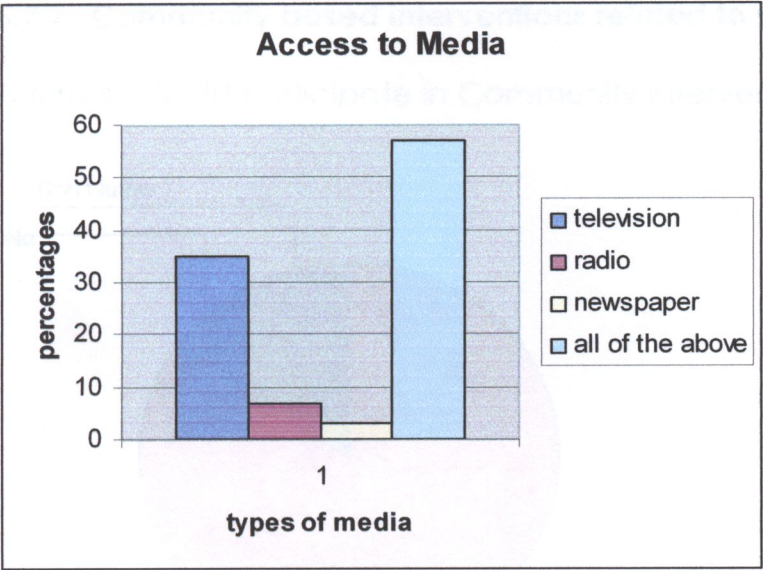
Source: Field data

5.2.5 Sources of messages

The respondents have heard the HIV messages, 56% of the respondents have been approached by peer educators on HIV whilst 54% have heard the messages from family members and friends. 28% of the respondents have heard the HIV messages from their school teachers while 83% of the respondents have heard messages of HIV on Television. 60% of the respondents get information from the newspapers/magazine. This information shows that there is more information on HIV outside the school curriculum than in the schools.

5.2.6 Access to Media

Figure 3

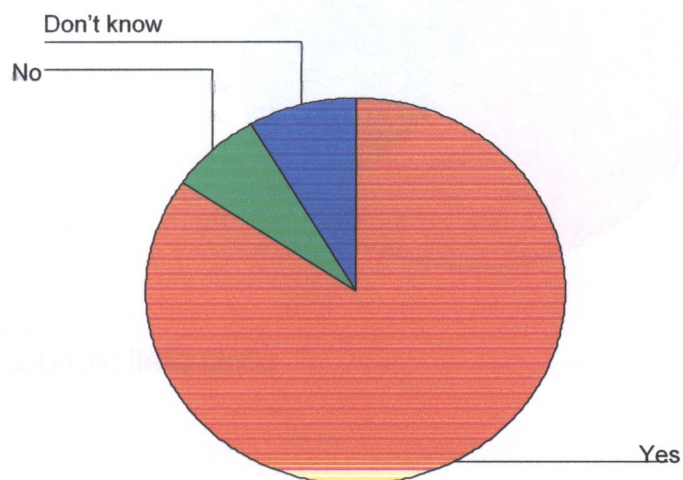


Source: field data

Figure 3 show that 57% of the respondents have access to the three types of media. But only 2.8% have access to the newspapers and 7% have access to the radio. Majority of the respondents, that is 35%, have access to television. This shows that messages done through television will be heard faster than the other two forms of media. The findings also revealed that the respondents who read the newspaper, 71% read the Post newspapers. Of those who listen to the radio, 58% listen to it everyday and usually very early in the morning. The media is one best way in which HIV messages can be communicated to the people, especially the electronic media since most people have access to them.

5.2.7 Community based interventions related to HIV/AIDS

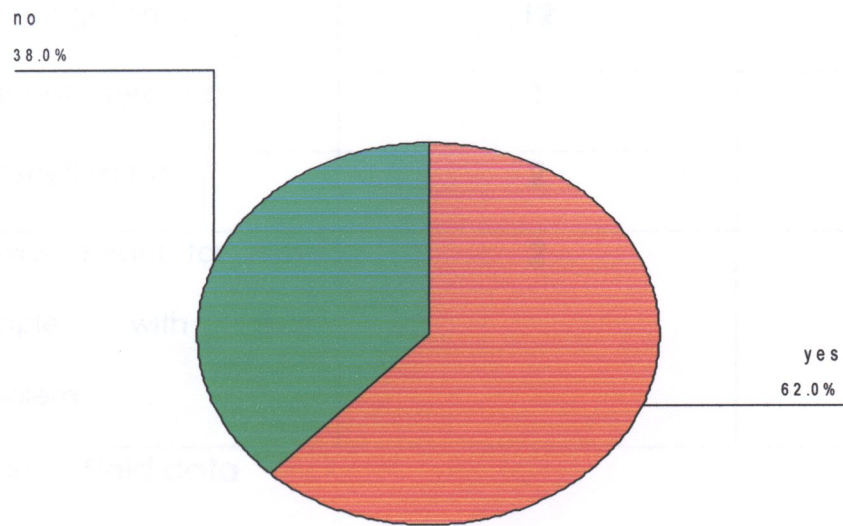
Figure 4: Would Participate in Community interventions if organised.



Source: Field data

A number of people have come to appreciate Community based interventions on HIV/AIDS. This is one way of ensuring that every one in the community participates in HIV/AIDS related activities. 83% of the respondents said they would participate in community interventions. Of the 83% who would participate in these interventions, 61% have participated in Community interventions as shown to figure 4. From figure 3, 7% of the respondents said they would not participate while 8% said that they did not know.

Figure 5: Participation in Campaign/meeting on HIV/AIDS



Source: field data

Figure 5 shows that 38% of the respondents have not participated in any campaign/meeting on HIV/AIDS. Table 4 shows the reasons why people have not participated in meetings or campaigns on HIV/AIDS.

Table 3: Reasons for not participating

| Response | Frequency | Percent |
|---|-----------|---------|
| No such campaign/meeting was ever organised | 10 | 13.9 |
| Did not get time | 12 | 16.7 |
| Was not interested | 1 | 1.4 |
| Felt shy/hesitant | 2 | 2.8 |
| It was meant for those people with such problem | 2 | 2.8 |

Source: Field data

From table 3, 14% of the respondents have never seen such meetings/campaigns organised, while 17% did not get the time.

Only 1.4 said that they were not interested. 3% felt that the meetings were for those people who had HIV/AIDS problems.

5.3 IN DEPTH INTERVIEWS

A total of four (4) in depth interviews were conducted with Youth leaders who have attended workshops and are carrying out YAZ programmes in the communities. The communities included Kaunda Square, Mtendere, Northmead and Matero. Three (3) interviews were conducted with the members of secretariat which is responsible for the day-to-day running of the organization and three in-depths interviews with key partners of YAZ namely Catholic Commission for Justice and Development (CCJDP), Christian Churches Association and Churches Health Association of Zambia(CHAZ) who support the YAZ programmes. The responses given by the informants were analysed qualitatively according to the following areas: Behavioural Change Process programme, Abstinence and Advocacy. Following are the observations:

5.3.1 Behavioural Change Process (BCP)

The BCP programme is the main thrust of YAZ activities in that it promotes good behaviour but not overlooking the fact that behaviour is not easy to change and that not everyone will

change. The in-depth interviews revealed that most of these programmes are concentrated in schools because they are easy to organize. Of those who are participating there are very few females. After the workshops, those who are trained find it very difficult to organize the activities due to financial constraints especially for the activities organized outside schools. However, for school organised activities, there is a feedback from the headmasters of the schools where the programmes have been organised, in terms of the moral behaviour of the children who have participated. The parents and the members of the public are appreciating the programmes as they support good morals. It was mentioned that to deal with attitudes is not easy to change or build. It can be discouraging were one is not seeing the results in the immediate.

The programmes faces challenges in that, most people can't join in because they think these are Catholic Church programmes as most youth groups use the Catholic Church premises for their activities, and so those who are not Catholics don't want to join in. The Catholic Church has come to support the activities of YAZ because they support the values of the organisation. It was felt that a neutral place was better if everyone has to go and meet freely. The BCP

programmes of the YAZ are upheld by the Catholic Church as they follow the values of the church. It is difficult to tell the progress of the BCP because it's hard to tell where change is coming from.

5.3.2 Abstinence

Among the objectives of YAZ, is the promotion of abstinence as the best strategy in the fight against HIV/AIDS amongst youth and children. The in-depth interviews revealed that abstinence is making an impact on people in promoting good morals amongst the Youths. People are interested to listen to the messages. However, due to other conflicting messages being propagated such as the use of the condom, the young people are getting confused and discouraged. Peer pressure for the Youths to use condoms is also mounting up. Those advocating for condom use go into the communities and distribute condoms. In abstinence one can only give pamphlets and hold talks on the important of abstinence

It was observed that those advocating for condom use are heavily funded. Most donors would rather fund organizations which promote Abstinence, Being faithful and Condom use – the ABC approach. This is because they are able to see results in the way

condoms are selling or being distributed. Due to the many messages in the communities, the YAZ youths begin by talking about behaviour of a person before they even talk about HIV. It is difficult to get a feedback on abstinence. However, despite the fact that abstinence messages are considered to be old, conservative and dogmatic, the interviews revealed that these values are having an impact because they are recognised. It was also revealed that the abstinence messages are having a part to play in changing people's behaviour. For instance the global fund in the fight against HIV/AIDS gave money to organisations supporting abstinence as part of the strategies in combating HIV. The role YAZ plays in the prevention of HIV has been recognised. The organisation has been consistent in its messages on behaviour change as seen where they have been working. Organisations such as CHAZ have showed willingness to continue supporting the approach used by YAZ

5.3.3 Advocacy

Increase advocacy on issues that affect young people in relation to Reproductive health sexuality and HIV/AIDS is another objective of YAZ. The In-depth interview revealed that the Youths have participated in Drama and Music festivals as well as Sports galas at

least once a year in order for them to transmit messages and these have proved to be effective. Theatre is popular as it reaches a large number of people. As a follow up, the youths go round into the communities and talk to the people. However the youths felt that once a year is not enough to convey the messages. Most of the time, they wait for the World's AIDS Day in order to convey their messages through drama, March pasts, music and posters.

It also came to light that there are sensitization talks in schools, churches on matters concerning HIV/AIDS, for example why people should abstain. This is done through group discussions on 'lets share it' as method used for the Youths to discuss their problems in a group. This has proved to be effective as individuals share experiences. In some groups they try other means such as donating items to the Old people in aftercare centres and share their messages although this has not been effective as these groups lack finances. However, the advocacy has a number of challenges such as peer pressure, lack of recreation facilities, in most communities there are a lot of bars/taverns, brothels, as well as the promiscuous movies shown on the media. There is not much advocacy on abstinence on television. Parents also have an impact in directing their children's behaviour towards good morals.

Unfortunately they say little against immoral programmes on the television.

There is political will in telling the youth to abstain. Condom distribution has been discouraged in schools. It has been observed that it is becoming increasingly accepted that young people cannot abstain.

5.3.4 Document analysis

A number of documents were analysed at the Secretariat. Among them were the Youth Alive Annual report, Brochures, newsletters, testimonies of the Youths and training guides. The analysis revealed that by implementing programmes like the Adventure Unlimited, Fully Alive Life skills and Education for life, - Behaviour Change programme and other support activities, YAZ has been able to influence the behaviour attitudes of those reached out to. In the 2004, a total of 22,055 people were reached throughout the year in Lusaka province alone.

The analysis revealed that the implementation level of the programme was largely driven by young people who gave their time to give a service to the community as volunteers. The school

managers have come to accept and appreciate the interventions. The reports revealed that there has been a great inclination towards primary prevention programmes such as those promoting abstinence and value based approaches. This can be seen as this can be seen from the recent ban on the distribution of condoms in schools as government preferred measures that encourage youths to stay away from sexual activity. The provision of anti retroviral treatment has enabled those who are infected to access this treatment thereby improving their quality of health. This has had a considerable impact on the efforts implored by YAZ to contribute towards the reduction of HIV/AIDS at national level. The anti retroviral therapy has greatly assisted individuals that have tested positive as they can now focus on positive living.

The documents revealed that a total of 50 BCP workshops were conducted and 1,863 youths were reached. During these workshops there were considerable change in perception and clarification on misconceptions surrounding sex and HIV/AIDS. Some of the noted areas included the significant differences in terms of knowledge about HIV/AIDS and ways to avoid getting the infection among those reached by the programme in the sites. There was also a significant drop in those who believed having sex

was a way of proving love from 20 per cent to 12 percent in most sites. The programme strengthened the religious values of those reached. Radio programmes have been transmitted in all the nine provinces of Zambia with the aim of empowering young people by giving information on reproductive health and issues related to the problems that they are encountering in their daily lives. According to the 2004 annual report, the organisation managed to record and air 43 programmes on Zambia National Broadcasting Corporation (ZNBC) bringing the total to 78 radio programmes.

The analysis revealed that a sports gala was held and 536 youths (291 females & 245 males) attended. The theme was 'Abstinence, for healthy and resourceful lifestyles' as an input on healthy love and relationships. Myths and misconceptions about abstinence were also encountered during the discussion. Some young people felt it was not possible for boys and girls to only be friends without having sex to the contrary the young people were encouraged to look beyond sex and generate alternatives and negotiation skills to ensure that they do not indulge into premarital sex. Those abstaining were encouraged to continue upholding the value of chastity

5.4 INTERPRETATION

From the findings; it is clear that the Youths have knowledge of HIV/AIDS and how it is transmitted. It is clear that the youths have come to know that unprotected sex is one method in which HIV/AIDS is mostly transmitted. Other ways in which the disease is transmitted is still not clear and often misunderstood. For instance, a few people still believe that one can have HIV through witchcraft or having sex with unhygienic person. From this one can deduce that other methods of transmission are not being emphasised such as the use of contaminated needles.

The study reviewed that the Youths trained under YAZ have come to appreciate abstinence as the best method of prevention. Although it is difficult to tell whether abstinence is practiced, one can deduce from the moral behaviour of these individuals such as sticking to one sexual partner, the places they are found in which encouraged moral behaviour such as not being found taverns as well as being involved in healthy behaviour like staying away from drugs as is emphasised by YAZ. It has been observed that YAZ has contributed towards the reduction of HIV/AIDS. There has been recognition of prevention programmes promoting abstinence and value based approaches. This can be seen from what happened in

the recent past when Government banned the distribution of condoms in schools preferring to encouraged the youths to stay away from sexual activities.

The researcher also found that peer education has an influence on the youths in terms of behaviour change. The youths are able to reach out to their fellow youths because they identify with them. They have group discussions in which the youths are able to share their problem. This helps them to open up and share the difficulties that they may be facing. However, owing to the many messages going on such as the promotion of condom use, the Youths are faced with a lot of challenges as they are encouraged to have sex by using condoms. On the other hand they are being told by YAZ to abstain from indulging in sexual activities. The other difficulties which have been identified are the social and economic problems faced by the youths despite having a desire to lead a morally upright life. Some problems as mentioned earlier include unemployment, lack of recreation facilities, peer pressure especially on the use of condoms and poverty. These lead to risky sexual practices, drug abuse, teenage pregnancies, abortions and child dumping.

The findings revealed that even though the media is one of the best ways of transmitting HIV/AIDS messages. The study revealed that most youths don't listen to the Yatsani radio a community radio station used by YAZ to give information on reproductive health and issues related to the problems that the Youths are encountering in their lives. Most Youths prefer to listen to radio stations such Choice –FM which has entertainment programmes which are more Youth oriented. Those who listen to the radio, listen only very early in the morning. It was observed that YAZ has concentrated on the radio programmes than other forms of media such as television and the print media. Most youths watch television a lot although they concentrate so much on watching soap operas and other forms of entertainment.

In terms of behavioural change programmes, YAZ has managed to increase the knowledge of the youths in ensuring that they are given the basic facts about HIV and AIDS in a language the youths understand by using the youths themselves. One of the ways in which YAZ has managed to stimulate discussions on HIV/AIDS is through the sports galas; where factors that contribute to the epidemic are discussed. They also hold discussions of healthcare and seek behaviours for prevention, care and support.

The researcher found out that the drama festivals have been successful although they are held once a year. It would be profitable if they were held more than once a year. People tend to forget quickly but a constant reminder would be helpful. People are interested in drama performances and these are effective in bringing out messages. The people or the audience easily relate to the messages. These drama performances done in the communities will have more effect as the messages are right at the door steps of the people.

It was observed that there was need for YAZ to provide refresher courses for the facilitators to ensure that they do not deviate from the organisations values or objectives. The researcher found out that there was very little input in terms of posters, flyers promoting the program especially on abstinence. Instead YAZ prefers to have dialogue with the Youths and let them chose what is best for them.

It was observed that after the trainings, the number of participants reduces hence it affects the number of the youths being reached to in the community. The facilitators in the communities mostly are unemployed. This makes it difficult for them to do things on a

voluntary basis. The issue of organisation and transport comes in. While YAZ promotes peer education and the youths helping fellow youths, the facilitators expect some form of remuneration.

During the study it was observed that the Youth groups do not keep records of their activities such as the group discussions they have, the visitations they do or the counselling offered to their fellow youths. It would be of benefit if records are kept for future following and progress. It would also be helpful to YAZ to monitor these activities.

CHAPTER SIX

CONCLUSION AND RECOMMENDATIONS

The general finding of this evaluation suggests that the BCP has had an effect on the youths that have been reached by YAZ. The research results identified that YAZ has contributed to the fight against HIV/AIDS in promoting essential attitude change. Behaviour change is a slow process and may be affected by other factors in the economic and social environment. The issues of whether indeed sexual behaviours have been changed should be left to the individual youths who have become equipped with information.

The BCP has been the main thrust of YAZ activities promoting good behaviour but not overlooking the fact that behaviour is not easy to change and that not everyone will change. It is clear from the study that the Youths have knowledge on HIV/AIDS and how it is transmitted. Other methods of transmission such contaminated needles have not been emphasised. There are still a small percentage of the Youths who think that HIV can be transmitted by having sex with an unhygienic person.

The research also identified that the Youths who are trained under YAZ have come to appreciate abstinence as the best method of prevention. Although it is difficult to tell whether abstinence is practiced, it can be seen from the moral behaviour of an individual.

Peer education was also identified to have an influence on the youths in terms of behaviour change. The Youths have participated in music festivals, sports galas and group discussions with the fellow youths. This has helped them to open up and share the difficulties that they may be facing. Even though Abstinence from sexual activities has been emphasized by YAZ, it is also clear that the youths are faced with other messages such as condom use instead of abstinence.

One of the methods identified by the research used by YAZ is the training of facilitators in the community to promote its programmes. However, after the workshops those who are trained find it very difficult to organise the activities due to financial constraints especially for the activities organised outside schools.

The radio is one media used by YAZ to channel its messages. However the research identified that most youths don't listen to the Yatsani radio, a community radio used by YAZ to give information

on reproductive health. Most youths prefer entertainment programmes which are Youth oriented. YAZ has concentrated on radio programmes than other forms of the media such as television which most youths are interested in.

It is therefore important that in order to achieve its objective in the fight against HIV/AIDS as well as help the Youths in terms of behaviour change; the following are the recommendations that would assist YAZ;

- More funding is needed for YAZ to step up its activities. There is need for the organisation to come up with local fundraising ventures than being dependant on donor funding.
- More programmes on television and other radio stations be aired as this medium has proved to be very effective in channelling messages.
- There is need for YAZ to scale up its operations and activities in order to reach more youths in schools as well as those not in schools.
- Facilitators in the communities need some kind of allowances to assist in the implementation of the programmes as well as to retain the facilitators

- YAZ should look at what is going around the world, the messages being sent and the influences on the youth and repackage their messages to suit the environment.

REFERENCES

Books

- Central Health Board, Central Statistics Office, (2003) Zambian Demographic and Health Survey 2001-2002, Lusaka.
- Education For Life (2004) - A Behaviour Change Manual Programme Manual, YAZ, Lusaka
- GRZ (2002) The Transitional National Development Plan
Ministry of Finance and National Planning, Lusaka
- MOH/CBH (1999) HIV/AIDS in Zambia: Background, Projections Impacts and Interventions, Lusaka.
- Mody , Bela (1991) Designing Messages for Development Communication: An Audience participation-based approach, New Delhi.
- National HIV/AIDS/STI/TB Council (2002) National HIV/AIDS/STI/TB Intervention strategic Plan 2002 – 2005, Lusaka.
- National HIV/AIDS/STI/TB Council (2004) The HIV/AIDS Epidemic in Zambia, Lusaka.

Rodgers, E.M (1995) Diffusion of Innovation, 4th ed., New York, Free Press

White et al (eds) (1994) Participatory Communication Working for Change and Development, New Delhi Sage Publications

Wimmer, R.D & Dominick, J.K (1997) Mass Media Research U.S.A Wadsworth Publishing Company

Articles

Agha, S. (2001) *An Evaluation of the Effectiveness of a Peer Sexual Intervention Among secondary school Students in Zambia*, Society for Family Health, Lusaka.

ILO (2001) *An ILO Code of Practice on HIV/AIDS and the World of Work*, Geneva.

<http://www.state.gov/r/pa/ei/bgn/2359.htm>

<http://www.undp.org/hiv/publications/studies...>

<http://teachnet.Edb.utexas.ed~lynda-abbort/social-html>).

Kasongo, Jumbe (2004) *Youth Alive Zambia, Annual Report 2004*, Lusaka.

Ndubani, Philemon et al (2000) *Evaluation of the Youth Alive Zambia
Behaviour Change Process*, University of Zambia,
Lusaka

UNICEF (1996) *The Progress of Nations*, New York

Zambia Basic Education Atlas (1994)

HIV/AIDS Questionnaire

Date of Interview _____ Questionnaire No. _____

Residential Area: _____

Questionnaire to assess the impact of HIV/AIDS Communication campaigns among the Youths between 15 – 29.

Section A: Background Information

| Q. No | Questions, instructions & Filters | Responses | Go To |
|-------|--|--|------------|
| 01 | Sex of Respondent | 1. male 2. female | |
| 02 | Marital Status | 1.married 2. single 3. Widowed 4. Divorced 5. Cohabiting | |
| 03 | Age of Respondent | 1. 15-19 2. 20-24 3. 25-29 | |
| 04 | Have you ever attended school | 3. yes 4. No → | Skip to 07 |
| 05 | Are you currently studying | 1. yes 2. no | |
| 06 | What is the highest level you reached? | 1. 5 – 7 2. 8 – 9 3. 10 – 12 4. college 5. University | |
| 07 | Are you in any form of employment? | 1. Yes 2. No → | Skip to 09 |
| 08 | What type of employment? | 1. Informal 2. Formal | |

Section B: Knowledge, Attitudes, Behaviour and practices

| | | | |
|----|--|---|------------|
| 09 | Have you ever heard of HIV/AIDS? | 1. Yes 2. No → 3. Do not know | Skip to 23 |
| 10 | Do you think HIV/AIDS is transmitted in any of the following | 1. unprotected sex 2. mother to child 3. breastfeeding 4. contaminated (unsterilized) 5. Contaminated blood | |

| | | | |
|----|---|---|--------------------------|
| | (read the list and allow for multiple answers) | transfusion 6. if STD are left untreated 7. Witchcraft 8. sex with se workers 9. sex with a promiscuous person 10. sex with unhygienic person 11. mosquito bites 12. sharing meals with an infected person 13. sharing a toilet with infected person 14. sharing a bathroom 15. other (Specify)_____ | |
| 11 | In your opinion can a person avoid getting HIV/AIDS? | 1. yes 2. No _____→ 3. I don't know _____→ | Skip to 13 Skip to 13 |
| 12 | What ways can people protect themselves from getting infected with AIDS virus | 1. Use a condom every time they have sex 2. having one sex partner who has no other sex partners 3. Abstinence 4. avoiding multiple sex r/ships 5. avoid contaminated blood transfusion 6. injections with contaminated needles 7. not sharing meals with an infected person 8. avoid mosquito bites 9. avoid sharing a toilet with infected person 10. avoid sharing a bathroom with infected person 11. other(specify)_____ | |
| 13 | Do you think a healthy looking person can be infected with HIV/AIDS | 1. yes 2. No 3. Don't know | |
| 14 | Do you think a person can die if they have HIV/AIDS | 1. Yes 2. no 3. don't know | |
| 15 | Do we have medicine that can cure a HIV/AIDS patient? | 1. Yes 2. No 3. don't know | |
| 16 | Are you aware of any facility where you can get tested for | 1. Yes 2. No _____→ | Skip to 19 |

| | | | |
|-----|---|---|--|
| | HIV/AIDS? | 3. Don't know | |
| 17 | Do people use services of HIV/AIDS testing facility? | 1. yes 2. no 3. don't know | |
| 18. | According to you, what are the inhibiting factors | 1. people will suspect the behaviour and face ridicule 2. social stigma attached to the disease 3. fear of knowledge 4. don't know | |
| 19 | Would you use the services of HIV testing facility, if need be? | 1. yes 2. no 3. don't know | |
| 20 | Have you used the services of HIV testing facility? | 1. yes 2. no 3. don't know | |

Section C: media habits

| | | | |
|----|---|---|------------|
| 21 | Which of the media do you have access to? | 1. Television 2. Radio 3. Newspaper 4. All of the above 5. None of the above → | Skip to 30 |
| 22 | How often do you watch television? Would you say....(READ OUT) (CIRCLE ONE) | 1. Every day 2. once a week 3. once a fortnight 4. once a month 5. other specify _____ 6. do not have access to television 7. do not watch TV | |
| 23 | Which station do you like to watch most | 1. ZNBC 2. DSTV 3. TBN 4. Muvi 5. Other (specific) _____ | |
| 24 | How often do you listen to the radio? Would you say....(READ OUT) (CIRCLE ONE) | 1. Every day 2. once a week 3. once a fortnight 4. once a month 5. other specify _____ 6. do not have access to radio 7. do not listen to the radio | |
| 25 | Which station do you like to watch most | 1. radio phoenix 2. radio 4 3. Choice FM 4. Christian Voice 5. BBC 6. Radio Yatsani | |

| | | | | |
|-----------------------|---|--|--|--|
| | | Other (specify) _____ | | |
| 26 | How often do you read newspapers? Would you say....(READ OUT) (CIRCLE ONE) | 1. Every day 2. once a week 3. once a fortnight 4. once a month 5. other specify _____ 6. do not have access to a newspaper 7. do not read newspaper | | |
| 27 | Which newspapers do you read most? | 1. The Post 2. Times of Zambia 3. Daily mail 4. National Mirror 5. Other (specify) _____ | | |
| 28 | When do you listen to radio and watch TV/ (Circle top 2 slots only) | Radio | TV | |
| 29 | Early Morning(6am – 8 am) | | | |
| | Mid-morning (8 am – 10 am) | | | |
| | Mid-morning (10 am – 12 noon) | | | |
| | Afternoon (12 noon – 2 pm) | | | |
| | Afternoon (2 pm – 4 pm) | | | |
| | Evening (4 pm – 7 pm) | | | |
| | Evening (7pm – 7:30 pm) | | | |
| | Late evening (7:30 pm – 8 pm) | | | |
| | Night (8 – 10 pm) | | | |
| | Late night (10 onwards) | | | |
| | Never watch TV | | | |
| Never listen to radio | | | | |
| 30 | Please list the programmes you watch /listen to? | 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ | 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ | |
| 31 | Which other media do you get information from? | 1. Pamphlets 2. Brochures 3. fliers 4. booklets 5. billboards 6. Magazine 7. other (specify) _____ | | |

Section D: Current interventions

| | | | |
|----|---|---|--|
| 31 | Has anyone in the last two years approached you to educate you on the spread of HIV/AIDS? | <ol style="list-style-type: none"> 1. yes 2. no | |
| 32 | Who are these individuals? (MULTIPLE RESPONSE POSSIBLE) | <ol style="list-style-type: none"> 1. Government doctor 2. Private doctor 3. nurse from govt. hospital/clinic 4. Health workers from NGOs 5. school teachers 6. friends/peers/spouse other family members 7. peer educators 8. community health workers 9. others(specify)_____ 10. don't remember | |
| 33 | Besides individuals, which other sources from where you have heard of HIV? | <ol style="list-style-type: none"> 1. Radio 2. TV 3. Cinema hall 4. newspaper/magazine 5. billboards/posters 6. public announcements 7. hand bill/pamphlets/booklets 8. wall writing 9. drama/skirts/street play/puppet show 10. school curriculum 11. none of these 12. others (specify) 13. don't remember | |
| 34 | Have you ever attended/participated in any campaign/meeting on HIV/AIDS | <ol style="list-style-type: none"> 1. Yes 2. No | |
| 35 | If not, why did you not participate | <ol style="list-style-type: none"> 1. no such campaign/meeting was ever organized 2. did not get time 3. was not interested 4. felt shy/hesitant 5. it was meant for those people with such problems | |
| 36 | Do you approve of community based interventions related to HIV/AIDS in your community | <ol style="list-style-type: none"> 1. yes 2. no 3. don't know | |
| 37 | Would you participate in community based interventions if they were organized in your community | <ol style="list-style-type: none"> 1. yes 2. no 3. don't know | |

Interview guide

1. For focused group discussions

- a. Are the youth getting information on HIV? How?
- b. Comment on the HIV/AIDS communication campaigns being provided by the organization.
- c. Are the methods and strategies being used effective?
- d. Is there any difference in terms of behaviour among the youth?
- e. Comment on the HIV/AIDS facilities in your community?
- f. Suggestions on ways of communicating the messages to the Youths
- g. What are the difficulties the youths are facing in terms of behaviour change?
- h. Are there recommendations to improve the communication campaigns to the youth?

▪ Service providers

- a. What are the programmes being offered for the Youth in relation to HIV/AIDS?
- b. What are the strategies being used to reach the youth?
- c. How effective are these methods and strategies?
- d. How long have you been using the methods of communication?
- e. Who are the most receptive between males and females to the messages?
- f. Do you have programmes in the rural areas?
- g. How do you reach those who have no access to the media?
- h. Who are the other actors are you working with in the fight against HIV/AIDS?
- i. What challenges is the organization facing to reach out to the youth?

- j. In which areas has the organization been successful?
- k. Recommendations