Support LabCOP country teams in developing strategies for a hashtag campaign to improve viral load demand creation and uptake – Phase 2 Implementation

Pontsho Pilane
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OBJECTIVES

• Develop tailored community-led communication campaigns to raise awareness and create demand for routine viral load testing in countries

• Develop a monitoring and evaluation plan for measuring the impact of the campaign

• 6 countries: DRC, Kenya, Malawi, Sierra Leone, South Sudan, Zimbabwe

• Phase II of the campaign that ran from July – November 2021, after Phase I October – December 2020
Supporting Campaign Continuation

Provide two virtual orientation, reflection and recap sessions
Develop new messaging and streamline target groups
Redevelop Communications Plans
Implementation
Develop a monitoring and evaluation plan for measuring the impact of the campaign

OUTPUTS:
• Revised Communication Plan
• Indicator Tracking sheets
• Campaign materials (e.g. messages, flyers, videos, etc)
• Post campaign assessments
# Overview

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<tr>
<th>Country</th>
<th>Target audience</th>
<th>Target media</th>
<th>Greatest reach (audience)</th>
<th>Greatest reach (media)</th>
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<td>Democratic Republic of Congo</td>
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**Target audience:** MN=Men living with HIV, WM= Women living with HIV, YU= Youth, EM=Expectant mothers, KP= key populations, RL= religious leaders, SMI= Social media influencers

**Platforms:** WA= WhatsApp, FB=Facebook, TW=Twitter, RD=Radio, IN=Instagram, PE= Peer educator, VR= Virtual Meeting
Democratic Republic of Congo (DRC)

- The campaign was led by the national network of people living with HIV, Union Congolaise des Organisations des PVVIH (UCOP+), and other implementing partners continued their focus on adult and young PLHIV and pregnant women.
- The campaigns messages were disseminated, in French and Lingala, through WhatsApp, Facebook, Twitter and Instagram.
- To build cohesiveness across the partner online platforms, the hashtag #ConnaitreMaChargeVirale was used.
- A total of 19,164 people were reached across all platforms.
- The message that got the widest reach: “Une CV indétectable rassure ton avenir; d’où l’importance de connaître sa CV” (“an undetectable viral load secures your future, hence it is important to know one’s viral load”)
- As was observed in Phase I, demand for viral load testing was generated but stockouts in lab reagents were observed in the health facilities accessed by informed recipients of care.
Kenya

- A coalition composed of NEPHAK, AYARHEP and PYWV, carried out a campaign aimed at people living with HIV, social media influencers and key population groups.

- Messages were delivered through Facebook Live, Twitter Chat and Zoom sessions and Twitter Chats and Facebook Lives were held in August and October 2021, using the hashtag, #knowmyviralload.

- NEPHAK community members took part in protests calling on the health ministry to ensure the restoration of multi-month dispensing of ARVs and for viral load testing to be restored; it was halted in 2020 due to lack of reagents and the latter has not yet been fully restored.

- A total of 10,394 people were reached through the Facebook, Twitter and virtual meeting channels, with Twitter reaching the most people (9,010).

- Using the recently launched undetectable=untransmittable campaign, to leverage the campaign messages about the importance of viral load in knowing one is undetectable.

- As before, due to its success, the campaign hashtag was occasionally hijacked on Twitter by other non-related parties and required close monitoring. Additionally, while the social media campaigns were successful, disparities in reaching the grassroot and rural areas remain.
Sierra Leone

- Led by NETHIPS, targeted adults living with HIV, expectant mothers and key populations with their messaging.

- While the team had previously prioritized WhatsApp, radio and in-person peer-engagement groups, the country team added additional platforms over the course of the campaign, including Twitter and bulk SMS—which underperformed.

- Combined, the messages reached a total of 16,143 people over the course of the campaign. Radio (estimated 5500 people) and WhatsApp (5546 people) reached the most people.

- The peer educator meetings reached a total of 3078 people, with a negligible amount reached through bulk SMS (11) and Twitter (2).

- Members of key populations (men who have sex with men and people who inject drugs) experience stigma and discrimination and struggle to disclose their identities.
Post campaign assessment

- A post-campaign survey was developed to measure the outcomes of the campaign.
- The target audience were members of the community networks as well as communities in which the PLHIV networks carry out advocacy.
- The survey was structured to assess: a) knowledge of RVLT; b) effectiveness of campaigns to increase awareness about RVLT; and c) health seeking behaviour as a result of exposure to campaigns.
- A total of 188 people were polled across all six countries.
- With the exception of 3 people, most people were exposed to the campaigns and hence comparisons between the groups for knowledge gain is not possible.
- The results provided insights on the campaign and health-seeking behaviour.
Post campaign assessment

- Took a test after learning about VL test (n=186):
  - Yes: 82%
  - No: 18%

- Told a friend after learning about VL test (n=188):
  - Yes: 83%
  - No: 17%

- Asked a healthcare worker for VL test result interpretation (n=185):
  - Yes: 76%
  - No: 24%
Post campaign assessment

8. Out of the new information I learned from the sources listed in Part 3 (question 1), which method/platform was the most effective or engaging in helping me to learn new information? Please check only ONE campaign platform.

- 46.4% In-person/support meeting/peer educators
- 11.9% WhatsApp
- 10.6% Twitter
- 7.9% Radio
- 7.3% Virtual meeting/event (not connected to social media)
- 4.6% Facebook
- 1.3% SMS
- 1.3% TV
- 8.6% Other. Please specify:
Lessons learnt

• Social media platforms such as WhatsApp, Facebook, Twitter and Instagram are useful tools in reaching a wide audience and is especially useful given COVID-19 restrictions, when in-person interactions are limited.
• The campaign audiences valued most dissemination platforms that allowed interactivity with the messaging and the opportunity to ask questions and clarifications.
• Collaborations between community organisations were strengthened as community organisations shared similar messaging and cross-posted across each other’s platforms, as seen in Kenya, DRC, Malawi and Zimbabwe
• Unfortunately, as observed in phase 1, the success of campaigns was hindered by systemic barriers to viral load testing, including lab reagent stockouts, viral load machine breakdown and long turnaround times. Hence, a sustained effort is needed to address these to ensure that demand creation efforts are not in vain.
• As highlighted in Sierra Leone and Kenya, key populations face additional stigma and discrimination barriers requiring more tailored, targeted messages that take their needs into account
Key takeaways

• Country teams in Malawi and Kenya found that coupling the messaging with the Undetectable=Untransmittable made the campaign messaging particularly powerful.

• The campaigns in South Sudan and Zimbabwe emphasised the importance of receiving the results and understanding what they mean and not only getting a viral test.

• Social media platforms such as WhatsApp, Facebook, Twitter and Instagram are useful tools in reaching a wide audience and is especially useful given COVID-19 restrictions, when in-person interactions are limited.

• The importance of planning campaigns and choosing relevant platforms for target audiences. Twitter, for example, is a commonly used platform among young Kenyans, an observation not seen in other countries.

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