Using Formative Research to Promote Behavior Change among Male Clients of Female Sex Workers in Vietnam

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Abstract

While HIV prevalence in Vietnam is relatively low at 0.53%, prevalence among male clients of sex workers (SWs) is disproportionately high at 2%. Frequency of commercial sex is common among Vietnamese men. In PSI’s (Population Services International) 2009 behavior survey conducted at targeted entertainment establishment venues, 39% of the men aged 18-40 reported having had commercial sex in the past three months. Additionally, a significant proportion (80%) of male clients of SWs also had non-commercial partners, which suggests that male clients may serve as a bridging population for HIV transmission to the general population.

With funding from United States Agency for International Development (USAID), and in partnership with the Vietnam Administration for HIV/AIDS Control (VAAC), PSI Vietnam is implementing a comprehensive 5-year, $15.5 million HIV prevention project, “Social Marketing Prevention and Supportive Services in Vietnam.” The primary goal of the project is to reduce new HIV infections among most-at-risk populations, or MARPs, including SWs and their male clients, injecting drug users, and men having sex with men.

As part of this project, and in partnership with the Provincial Health Departments (PHD) and Provincial AIDS Committees (PAC), PSI launched a branded intervention in 2007 called Vui Co Chung, Dung Dung Luc (Know When to Play, Know When to Stop). The intervention was designed to increase personal risk perception and promote safer sexual behavior among male clients of female sex workers (FSWs), specifically consistent condom use.

The first phase of the campaign demonstrated reasonable success and built considerable equity for the campaign slogan. This was evidenced by the high recall of the campaign slogan and associated key messages during the program evaluation.

PSI conducted formative qualitative and quantitative research in 2008 and 2009 to gain further insight into understanding the male client’s behavior of seeking sex with SWs and the key determinants of condom use with FSWs. The qualitative study explored the importance of group norms in seeking sex with a SW and aimed at an in-depth understanding of ‘peer pressure’ and ‘locus of control’ de-
terminants that were identified as significant in previous quantitative work conducted to understand men’s behavior seeking sex with SWs. The resulting campaign comprised of two initiatives:

- To promote personal risk perception and safer sexual behavior by addressing key barriers to consistent condom use under the *Know When to Play, Know When to Stop (KWTP)* campaign.

- To promote consistent condom use with SWs through the branded condom, *Number One*, as a supportive ‘friend’ that stays till the end and helps a man protect himself while having fun.

Target population insight also helped the program to position both campaigns more appropriately for male clients of SWs. The *KWTP* campaign centered on the social norm-based messages, and shifted to a strategy that focused more on the importance of the group dynamics and the resulting influence on individual risk perception and behavior.

In 2008 and again in 2009, PSI conducted a quantitative study to examine determinants of consistent condom use with SWs, and the relationship between exposure to program activities and behavior change. The results show a positive relationship between exposure to the program intervention, including mass media campaign and outreach activities, and increased consistent condom use. There was a strong association between consistent condom use with SWs and exposure to program activities (e.g., mass media, outreach, informational and educational communication materials). Male clients who reported contact with the provincial outreach teams and who had been exposed to the mass media campaign were significantly more likely to use condoms consistently with FSWs than male clients who reported no exposure (at the p<.05 level). Exposed male clients also had a higher proportion of protected sex acts (at the p<.001 level). Those who were exposed to mass media and outreach activities at least once were also significantly more likely to report higher personal risk perception, and agree with statements like “Every 15 minutes someone in Vietnam gets HIV” (at the p<.05 level) and significantly less likely to feel that they could judge a FSW’s risk by her appearance (at the p<.01 level).
Increased impact was also noted among those who were exposed to both mass media and frequent contacts with the provincial outreach teams. These findings also suggest that focusing on increasing risk perception and addressing the key determinants of condom use (e.g., safe sex worker construct) is an important means of promoting condom use among male clients of FSWs.
Introduction

This article discusses how formative research was used to develop an effective social marketing campaign targeting male clients of female sex workers (FSWs) in Vietnam. While this campaign was one of several components of an overarching HIV prevention project implemented by Population Services International (PSI), targeting various most-at-risk populations (MARPs) in Vietnam, the unique learnings and resulting behavioral impact from this campaign are the focus of this article.

In Vietnam, HIV prevalence remains low at 0.53%, and the epidemic is concentrated among MARPs, including sex workers (SWs), men who have sex with men, and injecting drug users. According to the Vietnam Ministry of Health (MOH), HIV prevalence among clients of SWs is estimated to be 2%. In fact, the single greatest risk factor for HIV in a study of HIV-positive Vietnamese men was sex with a commercial SW (i.e., 35% of HIV-positive men in the study had sex with a SW).

Male clients play an important role in the spread of HIV to the general population. The majority of males engaging in commercial sex also have regular and casual partners. According to one study, there is no difference in sex seeking among married and non-married men. A study of bridging behaviors among young people in Vietnam found that 27% of males engaged in sexual bridging behaviors, between high and low risk partners. A study of bridging among male clients found that more than half were ‘potential bridgers’ (i.e., had sex with high and low risk partners and used condoms consistently with high-risk partners only) or ‘active bridgers’ (i.e., inconsistently used condoms with both high and low risk partners). Another study on males at sexually transmitted diseases clinics found that 100% had visited a SW, and 73% had visited a SW at least once in the last three years.

The data on the number of men who have sex with SWs, the frequency with which they have commercial sex, and the increased risk for HIV suggest that interventions with male clients of SWs are strategically important.

With funding from United States Agency for International Development (USAID), and in partnership with the Vietnam Administration for HIV/AIDS Control (VAAC), PSI Vietnam is implementing a comprehensive 5-year, $15.5 million HIV prevention project, “Social Marketing Prevention and Supportive Services in Vietnam.” The primary goal of the project is to reduce new HIV infections among MARPs, including SWs and their male clients, injecting drug users, and men having sex with men. A key program component is a set of comprehensive behavior change activities targeting male clients to address barriers to consistent condom use in high-risk relationships. Complementary sales and distribution efforts also focus on improving access to condoms in high-risk settings by increasing condom availability in non-traditional outlets (e.g., hotels, guesthouses, cafes, and street vendors), and in entertainment establishments (e.g., cafes, karaoke bars, and massage parlors).

During the first phase of the program, PSI
launched a mass media campaign under an umbrella brand, Vui Co Chung, Dung Dung Luc (Know When to Play, Know When to Stop). The KWTP campaign employed an integrated, multi-channel approach, including TV, newspapers, billboards, bus stops, and web-based media. The primary campaign objectives of this first phase were:

1. To increase risk perception for HIV linked to sex with a SW
2. To increase ability to understand one’s limits with regards to risky sexual behavior
3. To develop a personal prevention strategy (e.g., ‘know when to stop’), which could include saying no to friends, not having sex with SWs, reducing frequency of commercial sex, or using condoms with SWs consistently.

The primary objective of the second phase of the campaign, which is the focus of this article, was to increase the percentage of male clients of FSWs who consistently use condoms with their commercial partners. The campaign was designed to build on the existing brand equity achieved by the first phase through the integrated use of multimedia and interpersonal communication. The tone and objective of the second phase were also strongly influenced by the key audience insight that described the importance of group dynamics to male sexual decision-making. This insight shifted the focus of the campaign from one that focused on individual behavior to one that acknowledged the importance of group norms and worked with peer groups to influence individual behavior.
Research Overview

Formative Quantitative Research

In preparation for the second phase of the program, PSI conducted a quantitative behavioral survey in 2008 with 645 male clients of FSWs in Hanoi and Ho Chi Minh City. Men aged 18-40 who had visited SWs in the last three months and resided in either Hanoi or Ho Chi Minh City were recruited using stratified two-staged cluster sampling. They were administered a questionnaire in-person by a trained interviewer covering socio-demographics, frequency of sex seeking, and consistent condom use. These theoretically related determinants were drawn from the Health Belief Model and Theory of Reasoned Action. Simple descriptive analyses were conducted for all variables and multivariate analyses were performed to identify determinants significantly associated with consistent condom use, which is defined as “always” using a condom with a FSW.

The study found that with a FSW partner, 96.6% of clients had used a condom at last sex, and 85.4% reported consistent condom use in the last three months. Rates of consistent condom use were lower among non-commercial partners, with just 66.8% using a condom at last sex and 39.4% consistently using a condom.

Theoretical and socio-demographic determinants that were associated with consistent condom use included beliefs about condoms and perceptions of their ability to judge whether a FSW was at risk for HIV, perceived threat, age, and frequency of visiting FSWs. Other demographic factors were not significantly associated with condom use.

Male clients who believed that condoms don’t often break during sex (OR = 1.81, p<.05), that condoms do not make sex unpleasant (OR = 2.69, p<.01), that sexual pleasure is not more important than risk of HIV infection (OR = 2.79, p<.001), and that they would use a condom even if they were in a hurry (OR = 3.78, p<.001) were more likely to be consistent condom users. Those who believed that they could assess whether a FSW was at risk for HIV (e.g., youth, beauty, or freshness) were less likely to be consistent condom users (OR = 0.36, p<.05).

Clients who used condoms felt that they were at a low risk for HIV (OR = 0.46, p<.05), but were also more likely to perceive risk in situations such as having sex just once or twice with a FSW without a condom (OR = 3.19, p<.05).

Consistent condom users were younger than inconsistent condom users (at 31.8 years versus 34.1 years, OR = 0.92, p<.01) and less likely to have visited a SW four or more times in the past three months (34.2% versus 48.2%, OR = 0.43, p<.05).
Formative Qualitative Research

PSI conducted a qualitative study on some of the determinants identified in the 2008 quantitative study to further explore the role of group dynamics and to gain deeper insight into key determinants of safer sex behavior. PSI’s qualitative research approach, Framework on Qualitative Research for Social Marketing (FoQus), uses narrative approaches to develop target audience profiles and generate insights for program design.

PSI researchers conducted in-depth interviews with 24 male clients of SWs in Hanoi and Ho Chi Minh City, exploring their decision-making process around sex and condom use with SWs. Although clients have high knowledge and awareness of the risk of frequently visiting SWs and are concerned about contracting HIV, they feel that they cannot always opt out of visiting SWs, due to pressures from their friends, colleagues, or business partners. Men often feel a level of responsibility for the level of fun the group will have. Visiting a SW is usually a group decision, and is often believed to be a key element of that fun. Men indicated feeling a strong sense of pressure to stay with the group and feeling powerless to refuse, and expressed concern about what their group will think if they do. The level of pressure they feel is strongly dictated by the type of group they are socializing with. For instance, men indicated it is easier to resist social pressure from colleagues and friends than from business partners.

The qualitative research was used to compile a profile of the target audience, ‘Tuan’. ‘Tuan’ was described as a middle-income man in his early 30s who likes to socialize and drink with his friends and while doing so, often has sex with SWs. While he regrets having sex with SWs, he feels he cannot resist the social pressure from the group and fears rejection if he does.
PSI’s Social Marketing Process

The program team used PSI’s approach to social marketing planning, DELTA, to apply the formative research to the social marketing strategy. The cornerstones of DELTA are Audience Insight and Brand Positioning. Decisions made and insights gathered here influence all other decisions made in the program.

The program team applied DELTA’s process through a workshop format to develop the marketing plan. During this strategy design workshop, the group applied the following steps:

1. Conducted a situation analysis using both data collected through using PSI’s quantitative and qualitative research described earlier, and secondary data compiled by government and non-governmental partners about SWs, their clients, and the environments in which they work;

2. Examined the original program objectives and set realistic new objectives for key behavioral outputs;

3. Identified and ranked key strategies to accomplish the prioritized objectives (e.g., product, price, place, and promotion) and defined key activities for each; and

4. Developed a work plan and outlined a corresponding program budget.

In the situation analysis step, the group gathered important audience insight, including the importance of the group dynamic and level of personal risk perception. This insight dramatically changed the emphasis of the campaign from the first phase, which focused on the target audience’s individual decision-making process, to one that acknowledged the importance the group places on an individual’s ability to make a decision about sex with a SW, and whether to use a condom.

The program team sought to increase both acceptability of consistent condom use among the target audience and to ensure that a condom was easily recognized and available. As a result, a two-part strategy was developed that would first seek to increase individual risk perception and overall demand for condom use with SWs through the branded campaign, Know When to Play, Know When to Stop and second to market PSI’s branded condom, Number One, specifically to men who have sex with SWs.

The program team used the audience profile ‘Tuan’ to guide the strategy for both the consistent condom use campaign, KWTP, and for Number One (see Figure 1, page 37). In order to do this, two separate positioning statements were developed:

**Positioning Statement #1:**
For the “Know When to Play, Know When to Stop” brand:

‘Know when to Play, Know when to Stop is a friendly reminder that Tuan can be safe and still have fun with his friends.’
Positioning Statement #2:
To position Number One condoms as the strong, reliable, supportive ‘friend’ that is part of the fun, while helping a man protect himself (see Figure 2, page 38):

‘Number One is the friend who is always a part of the Tuan’s group fun.’

The use of two separate branded campaigns allowed the program to avoid associating its Number One condom brand with potentially stigmatizing messages around HIV prevention, while still addressing HIV risk perception messages in an attractive and engaging way.
Campaign Objectives

The overall output level objective of the two campaigns was to increase risk perception among male clients of FSWs, specifically:

- Just one time not using a condom with a SW puts you at risk of HIV. Use a condom every time.

Increase the percent of men who believe that you can get HIV if you have sex with a SW just once, and you are at risk for HIV if the SW says she’s safe or looks ‘safe.’

The key message for Know When to Play Know When to Stop was:

- Number One condoms are strong and reliable (they don’t break).
- Make Number One part of your group fun; always carry a condom.

The key messages for Number One condoms were:

Figure 1: Phase 2 Condoms Campaign Non-Branded, Consistent Condom Use Execution
Figure 2: Phase 2 Campaign Branded Print Execution for Number One
Program Approach

The second phase of KWTP was launched in May 2009. The target audience was reached in ‘hot spots’ that included typical high-risk venues and entertainment establishments (EEs), such as hotels and guesthouses, and select cafes, restaurants, massage parlors, and karaoke bars.

The campaign employed a combination of mass media, including outdoor (e.g., billboards, bus stops, and posters), online communication, print (e.g., press and informational inserts), outreach utilizing small group and one-on-one activities in EEs, and ‘mid-media’ events using larger group activities in EEs and large public events.

The different channels were introduced in phases in order to address various determinants, achieve maximum reach, and reduce message fatigue. Outdoor promotion for KWTP was used to address risk perception. Outreach and mid-media activities supported mass media with more direct messages on how one cannot assess risk through a SW’s appearance, and not using a condom with a SW even once puts them at risk for HIV infection.

Outdoor promotion, events, and outreach activities targeted men in EEs where they frequently gathered before visiting SWs. Outreach workers used a range of interactive tools to engage male clients in discussions about their risk behavior and decisions to use condoms with SWs. One key tool was an interpersonal communications-led card game that depicted typical scenarios in which a male client would decide whether to use a condom with a SW, and encouraged men to think critically about their own risk in those situations.

Brochures and innovative leaflets branded under the KWTP campaign and linked to interpersonal communication messages were disseminated at the end of these sessions.

Print and online messaging under the KWTP campaign were also used to engage men in messages about using condoms with SWs. Informational articles were branded under the campaign, and used in newspapers to reach the target audience. Additionally, banner ads on popular websites were linked to flash-based content that provided an interactive game to deliver key messages. The project used a ‘surround’ and ‘engage’ strategy to reach male clients through a range of different communication channels with varying intensity.

Creative content for all materials, including KWTP and Number One promotion, were designed with the key audience insight about the pressures a man faces from his group to visit a SW, and how the night typically unfolds – starting at the EE, progressing to a karaoke bar or massage parlor, when somewhere along the way the group decides to visit SWs. Artwork for promotion materials drew from this concept by portraying groups of men together, and linking the concept of preserving group fun to condom use.

Through careful coordination between the campaign rollout and the efforts of the PSI sales team, the strategy supported condom sales heavily focused in places where men were most likely to have sex with SWs, such as hotels and guesthouses. Sales coverage also included cafes, karaoke bars, massage parlors, and street vendors, where men often congregated before visiting SWs.
Results

In 2009, PSI conducted a larger scale quantitative survey in seven provinces, where the project’s outreach interventions had been operating since 2007: Hanoi, Hai Phong, Quang Ninh, Ho Chi Minh City, Can Tho, An Giang, and Nghe An. Twenty districts across the seven provinces were sampled. The areas were predominantly urban and reflected areas where FSWs proliferate. This survey, because it was conducted at a larger scale with a different sampling methodology, is not comparable to the 2008 study reported in the formative research section.

Sampling was conducted at EEs, and males were screened for the eligibility criteria, which included being 18-40 years of age, and having had sex in the last three months. Of all the men screened, 39.1% reported having had sex with a FSW in the previous three months, for a total sample of 1,602 male clients. Male clients were administered a questionnaire in-person by a trained interviewer on socio-demographics, sexual behaviors with sex workers, consistent condom use and its theoretical determinants, and exposure to PSI’s programming.

Campaign exposure was measured through prompted recall. Interviewers showed the logos of KWTP and Number One condoms, and asked if male clients had participated in interpersonal communication (IPC) activities or seen any advertisements with the corresponding logos.

The study found that consistent condom use with FSWs was high (87% overall), but those who had more commercial sex had significantly lower rates of consistent condom use (from 89% for those who had sex with one SW to 76% for those who had sex with ten SWs). Past commercial sex was defined as sex with a FSW in the past three months. The vast majority of male clients, at 80%, also had sex with non-commercial partners. Consistent condom use with non-commercial partners was low at 21%.

Most clients, at 71%, reported having seen the *Know When to Play, Know When to Stop* mass media campaign. The most common form of exposure was through billboards (63%), followed by newspapers (35%), and websites (30%). In addition, nearly one in five men reported exposure to outreach workers and having participated in the IPC sessions. One note to make here is that these figures exclude those who said they only ‘rarely’ saw the campaign.

Those clients who were exposed to the KWTP campaign reported higher risk perceptions than those who were not (see Table 1, next page). Those who were exposed to mass media and at least one outreach contact were significantly more likely to agree that someone gets HIV in Vietnam every 15 minutes (at the p<.05 level). Those who were exposed to mass media and one to five or more contacts were all significantly more likely than their unexposed counterparts to feel that they could not judge a FSW’s risk by her appearance (p<.01 for one to four contacts, p<.05 for five or more contacts).
Table 1: Campaign Evaluation Results for Key Indicators by Mean Score

<table>
<thead>
<tr>
<th>Indicators</th>
<th>No Exposure</th>
<th>Mass Media</th>
<th>Mass Media + IPC</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Every fifteen minutes, one more person gets HIV in Vietnam (C33)</td>
<td>2.82 a</td>
<td>2.93 b</td>
<td>2.96 ab</td>
<td>*</td>
</tr>
<tr>
<td>I can’t get HIV if I have sex without a condom with a SW just once or twice (C34R)</td>
<td>3.23 a</td>
<td>3.24 b</td>
<td>3.31 ab</td>
<td>*</td>
</tr>
<tr>
<td>After drinking, I often do not remember that I have to use condom with SW (C37R)</td>
<td>2.96 a</td>
<td>3.00 a</td>
<td>2.95 a</td>
<td>no</td>
</tr>
<tr>
<td>“Appearance and Trust” construct (C23R-C32R)</td>
<td>3.27 a</td>
<td>3.40 b</td>
<td>3.40 b</td>
<td>***</td>
</tr>
<tr>
<td>Sexual pleasure is more important than the risk of HIV infection (C35R)</td>
<td>3.24 a</td>
<td>3.28 a</td>
<td>3.37 a</td>
<td>no</td>
</tr>
<tr>
<td>Condoms reduce pleasure during sex with SWs (C10R)</td>
<td>2.34 a</td>
<td>2.35 a</td>
<td>2.44 a</td>
<td>no</td>
</tr>
</tbody>
</table>

Note:
- Mean scores were generated on questions using a 4 point Likert scale for the response categories in which 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, and 4 = Strongly Agree.
- The Likert score was recoded such that higher scores are indicative of positive beliefs. The indicator is presented as it appeared in the questionnaire to avoid distorting the original meaning.
- Using UNIANOVA test with adjustment for provinces, age, job, education level, income, and marital status, being regular clients of sex workers, and number of sex act with sex workers in the last 3 months.
- Significance: * p < 0.05; **: p< 0.01; ***: p< 0.001

Male clients exposed to the campaign were significantly more likely to have used a condom consistently with a FSW than those who had not (at the p<.05 level). Of those who were not exposed to the campaign, only 79% reported consistent condom use, as compared to those who were exposed to mass media and outreach (87% for one contact, 89% for two, 92% for three, 95% for four, and 98% for five or more) (see Table 2, next page). Those exposed also had a significantly higher percentage of protected sex acts: 91% among those exposed versus 84.9% among those not exposed (at the p<.001 level).
The 2009 study was not compared to the 2008 study because the sampling frames were not comparable (i.e., 2008 included just two cities, whereas 2009 included seven provinces), thus this study is not able to present trends over time. A control group was not possible given the widespread nature of the campaign, but the non-exposed formed an adequate comparison group, as there were no significant differences between those exposed and non-exposed in socio-demographic characteristics. In addition, PSI is the only organization directly targeting male clients of SWs in the project provinces. This increases the confidence in interpreting the evaluation data, showing significant correlation between exposure to program activities and change in the behaviors targeted by the program.

Table 2: Consistent Condom Use and Exposure to Mass Media and Outreach

<table>
<thead>
<tr>
<th>No exposure</th>
<th>1 + contact &amp; mass media</th>
<th>2 + contacts &amp; mass media</th>
<th>3 + contacts &amp; mass media</th>
<th>4 + contacts &amp; mass media</th>
<th>5 + contacts &amp; mass media</th>
</tr>
</thead>
<tbody>
<tr>
<td>N = 442</td>
<td>229</td>
<td>119</td>
<td>95</td>
<td>73</td>
<td>56</td>
</tr>
</tbody>
</table>

All statistically significant compared with no exposure p < .05
Limitations

There were some limitations to this evaluation approach. First, the evaluation did not include a control group, which would have been difficult to obtain given the scope of the project. Thus, those not exposed had to serve as the comparison group. This group may be different in some way from other clients, which was not revealed in the data. Second, there is a potential for selective attention bias – that those clients who were more likely to participate in or attend to campaign communications (e.g., IPC and mass media) were those who may have been more likely to practice safer sex. To attempt to offset this issue, the analyses controlled for socio-demographic characteristics.
Discussion

Audience insight drives effective programming.
The better a program understands its target audience, the more effective and impactful the program can be. The program was able to uncover critical insights into what motivates the target audience’s behavior, and used those insights to guide the planning process for the intervention design. The understanding that men typically gather in EEs prior to visiting SWs helped the program select the right place to meet them. The understanding of the pressures a man faces from his peers to keep the group together all night helped to better position the KWTP campaign and the Number One condom campaign. The understanding that male clients are more likely to use condoms consistently with SWs if they better understand their risk led to the design of more effective campaign materials that focused on the key determinants.

Consistency is key when promoting both a brand and an entire category.
Consistent positioning is key. Because this campaign sought to promote both Number One condoms and the practice of consistent condom use with SWs, all branded condom materials continued the theme of peer influence and positioned Number One condoms as one of the target audience’s ‘friends.’ Just as friends make group decisions about having one more drink, the branded campaign rests on the idea that men can also stick together about consistent condom use in commercial sex encounters.
Lessons Learned

The program evaluation data is consistent with favorable campaign effects:

- Outreach, when combined with mass media exposure, does have a positive association with higher levels of reported consistent condom use. Overlapping media channels is necessary when the reported behavior levels are already very high. Mass media alone has an association with a higher proportion of sex acts protected by condoms. This suggests that both channels, outreach and mass media campaigns, are adding value to the effort to raise levels of consistent condom use.

- The evidence suggests that the key message of PSI’s outreach campaign — you cannot judge the level of risk of a commercial sex partner simply on her looks — was a good decision since male clients with more positive beliefs on this issue are more likely to be consistent condom users.

- The program should continue to target its condom distribution at high-risk venues, mostly hotels and guesthouses, where the majority of commercial sex is taking place. Although male clients are accessing FSWs at a range of venues, more than eight out of ten commercial sex acts take place in hotels and guesthouses.

A number of changes should be made to program design to enhance and strengthen its success:

- The program should try to substantially enhance and increase the number of contacts that outreach teams make with male clients. Outreach is key in influencing both consistent condom use and voluntary counseling and testing (VCT) uptake, but less than one fifth of male clients in intervention areas currently report exposure to the outreach teams.

- The program has to ensure overlap between mass media and outreach activities to increase the likelihood of behavior change. In this case, there is potential to improve mass media efficiency by targeting activities in venues where outreach activities are conducted. The project worked with provincial partners to ensure cluster mapping of intervention sites for convergence of all media channels.
References


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