

## **About the The 360 degree surround BULADI Campaign**

West Bengal State AIDS Prevention and Control Society, Government of West Bengal prioritises the agenda of containing the epidemic in the state through sustained awareness initiatives with the steady objective of educating and informing the people of the state about HIV/AIDS and its prevention.

In the year 2004, 1st of December, World AIDS Day with the launching of the 360 Degree Surround Campaign( involving all types of media from Hoardings – Radio - TV and unconventional touchpoints) pivoting on Buladi, the mass awareness generation policy underwent a remarkable paradigm shift. It moved away from isolated IEC programmes or one time event to sustained campaigns specifically focusing on women and youth blanketing the overall general population as well. Keeping with the traditional look of a rag doll with chubby features and outspoken in her safe sex messages, Buladi emerged in consonance with the 2004 World AIDS Day theme- '*Women and Girls : Have a Say*' With her initial journey getting ripe by two years, she transcends her role of just being a brand ambassador of West Bengal State AIDS Prevention and Control Society talking about HIV/ AIDS prevention. She delves into the human behavioral concerns and talks about sex as basic human need and its linkages with HIV with the call for action to use condoms everytime in commercial, casual and conjugal sex situations. Conceived by Ogilvy and Mather, initiated by Mr S. Suresh Kumar, the then Project Director of WBSAP&CS and appropriately sustained by Dr R. S. Shukla the present Project Director of the Society, Buladi plays both in the urban and rural turf.

Categorized as a Low Prevalence State ( Prevalence of HIV cases amongst Antenatal mothers is less than one percent and prevalence of HIV cases among the STD clinic attendees is less than 5% ) West Bengal State AIDS Prevention and Control Society banks considerably on Buladi in plateauing the epidemic by stalling cases of new infection. The two year old campaign was put under three different phases- Phase 1 addressed the prevalent myths as to HIV/ AIDS and the second phase talked on STD & AIDS symptoms and linkages. The present third stage now continuing addresses low self risk perception or self exclusion. Through out the three phases the call for action had always zoomed down to condom promotion and hits to 1097 ( the toll free hot line telecounseling services operating in the city of Kolkata and suburbs.) The present priority of WBSAP&CS is to move and sustain the Campaign into the rural turf for generating a better understanding of HIV/AIDS as a preventable behavioral disease and to encourage VCTC Walk – INS for voluntary HIV Testing.

## **Targeting Self Exclusion / low self risk perception in Phase III**

The phase three of the campaign is focusing on the issue of low self risk perception among the general population who consider themselves excluded from being vulnerable to HIV and unable to contract the disease.

### **Keep Condoms Handy**

The thrust of the Phase three Buladi campaign would be to make the general population understand the importance and the necessity of protected sex with a practical and realistic suggestion to keep condoms handy to tackle vulnerable moments of unwarranted surges in casual /commercial sex situation.

### **Condoms in Conjugal Sex**

With it the stress is also to build up a general consciousness towards consistent condom use in conjugal relationships whereby the couple not only sees condom as a pregnancy barrier but a prevention to HIV/AIDS. The call for action is again 1097 for holistic awareness with advice for VCTC consultation and Walk ins.

### **The Impact Assessment Findings :**

To understand the campaign impact the following analysis conducted by Synovate Ltd was in 2005 will be relevant:

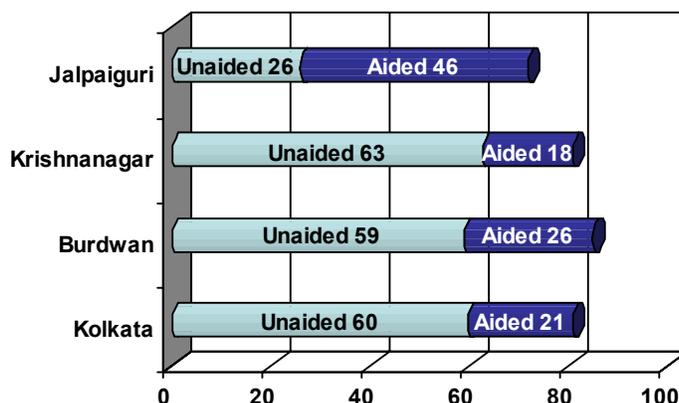
### **Impact assessment : The Buladi Campaign Phase – I**

#### **Relevant facts :**

The demographic sample covered were

- 300 Kolkata ,**
- 60 Burdwan,**
- 60 Krishnanagar,**
- 60 Jalpaiguri**

within the age group of 15 to 50 years in 50:50 male female ratio were randomly interviewed for the study.



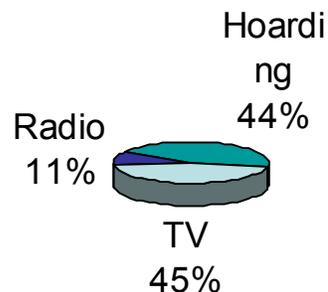
Content recall: verbatim	%
“Call BULADI and know about AIDS at toll free 1097”	59
“My son was previously taking drugs through injection, can he have AIDS now?”	8
“There were two dolls - one is asking the other, she has a single partner how can she be infected by AIDS”	8
“My husband is gentleman, how can he be affected by AIDS?”	6
“I have only one sex partner, can I have AIDS?”	6
“Two dolls, red and blue standing and enquiring about AIDS”	5
“Condom must be used to prevent AIDS”	5

### The findings of the study of Buladi Phase I reveal -

1. **79 % of all respondents have not seen any HIV/AIDS related campaign** prior to the Buladi campaign
2. **The percentage of unaided recall( when the respondent is not given any cues to recall the “subject”)** is much more than the aided recall ( when cues and related facts about the subject is given to the respondent so that he / she derives at the correct answer) This suggests a fair degree of the popular acceptance of the Buladi Campaign Phase 1.
3. The percentage of female respondents in unaided recall superceded that of their male counterparts ( 57 % unaided recall in women whereas 54 % unaided recall in men ). This is suggestive of the campaign being taken note by women for which the campaign was fundamentally developed.

### Efficacy of the mix of Communication Channels

The campaign conceived as a 360 degree campaign did get visibility in all its channels , however outdoor & TV seemed to be catching the highest audience attention with *44% message recall being traced back to Outdoor hoardings while 45% to TV and 11% stated Radio to be the source of recall.*



Further 71 % of those who recalled the campaign stated that the outdoor was appealing enough to prompt

them for the suggested call for action.

The success of the campaign in Kolkata could be traced back to higher investment in hoarding display for Kolkata. Further the availability of both CNS and Non CNS channels for Kolkata also went towards giving higher visibility to the campaign.

***The findings suggest the campaign upscaling in Outdoor and for districts in a big way*** for the Phase II of the Campaign based on the response that has been caught in figures by the Impact Assessment study for the first round.

### **Knowledge Attributes**

-87% strongly agree that HIV/AIDS can be prevented by using condom during sex

-91 % strongly agrees that HIV can be spread by sharing needle

-75% agree that the virus can remain dormant in human body for number of years

-91 % agree that HIV is transmitted from unprotected sex

-75% agree that one can be affected by HIV even he/she has got a single sex partner

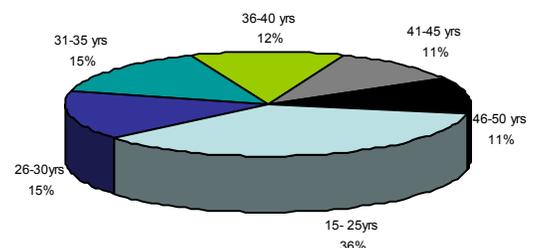
**The Phase I of the campaign generated a state wide familiarity with the 1097 Toll free number for STD/HIV/AIDS related queries while addressing several prevalent myths on the issues related to HIV/AIDS. Phase II tries to generate awareness about STD – HIV/AIDS linkages, STD symptoms particularly among women, Symptoms of HIV/AIDS infection in people.**

**The call for action is more towards getting people to get HIV tested at VCTC centres when one feels to be at risk of HIV/AIDS and get treated at STD clinics when symptoms suggest so. The message on Condom usage holds common for both the phases.**

### **Impact assessment of the Second Phase of the Campaign:**

#### **Methodology :**

- The sample was selected based on demographics (proportionate to the population segments of West Bengal) ie Male: Female (50:50)
- Target group: People belonging to the age group of 15 to 50 yrs were selected randomly and interviewed for the study.
- Sample covered
  - Kolkata 480
  - All Districts 60 each
  - Total Sample 1560



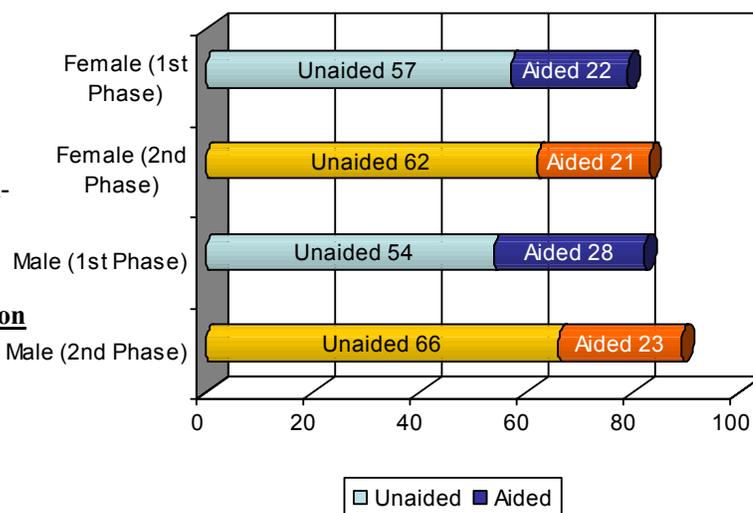
## Comparative Impact Assessment

### Kolkata and Districts

#### **Analysis of Phase I and Phase II**

In comparison between the Campaign Efficacy parameters of the phase I and Phase II campaign impact analysis The following is found-

A) In the Second Phase **higher percentage of both women population ( 62 %) and male population (66%) have shown unaided recall** of Buladi Campaign messages more than unaided recall in Phase One

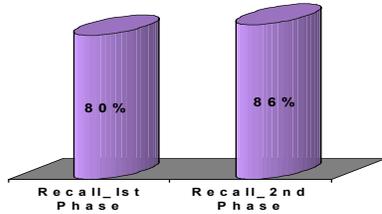


B) Female unaided recall of the Second Phase of the campaign has climbed up from **57 % in the First Phase to 62% in the Second Phase** whereas male unaided recall for the Second Phase has been heightened to 66 % from the previous 54 %.

#### Message Content Recall ( Verbatim) in Phase ii

	%
<i>"A women telling Buladi that her husband has extra marital affair... Buladi is advising them to get their blood tested from the hospital"</i>	40
<i>"A Man telling Buladi about his son's prolonged stomach upset &amp; fever. Buladi advice medical help &amp; blood test"</i>	31
<i>"A boy wants to know from Buladi whether STD is fetal"</i>	19
<i>"A Women Tells Buladi that she has smelly white discharge.....What should she do?....Buladi advices her to see a doctor"</i>	15
<i>"Call Buladi to know about AIDS"</i>	13
<i>"Two dalls discussing how STD can cause AIDS"</i>	9
<i>"Sexual diseases increase the risk of HIV 10 times"</i>	8

## Overall Recall

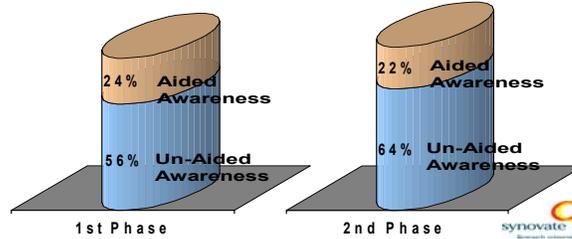


### 1<sup>st</sup> Phase

79% of all respondents have not seen any HIV/AIDS related campaign prior to this

### 2<sup>nd</sup> Phase

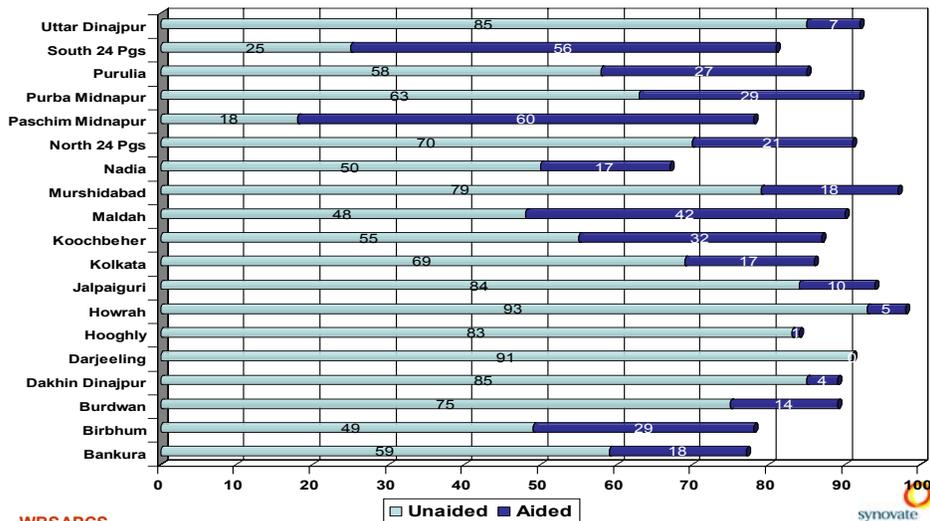
83% of all respondents have not seen any HIV/AIDS related campaign prior to this



WBSAPCS



## Recall: All Centres



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## Findings :

The campaign has been registered well in the district towns and has been well taken and by the district population. In districts where the ANC seroprevalence is more than 1 % and the raging

epidemic marks them as hotspots ( Darjeeling where the seroprevalence in general population is 11.2 %) unaided recalls have been significantly high superceding the aided ones.

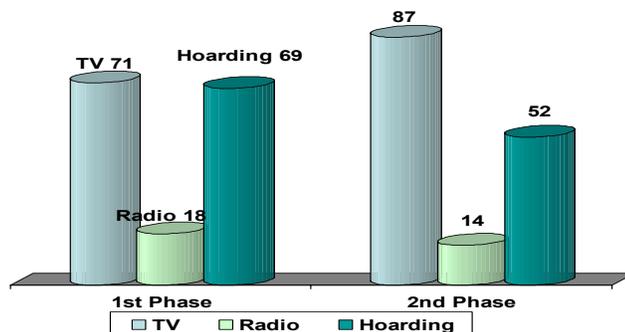
- Jalpaiguri – unaided – 84 %**
- Howrah -93 %**
- Darjeeling- 91 %**
- Dakshin Dinajpur -85%**
- Burdwan -75 %**

-As per the media deployment strategy message visibility and percolation was highest through the Television followed by Outdoor Hoarding plan.

**- The KABP analysis:**

Point of discussion	Phase i	Phase ii
After seeing / hearing these communication there has been a drastic change of idea about HIV/AIDS prevention and control	45% respondents strongly agree	80 % respondents strongly agree
HIV is preventable through protected sex by using condoms	87 % strongly agree	90% strongly agree
HIV /AIDS can be spread by sharing a needle	91%	91%
The HIV/AIDS virus can remain dormant in one's body for number of years	75 %	79%
One can be affected by HIV/AIDS even he/she has got a single sex partner	75%	79%

**Recall by Media**



## % Feels the need



Sl.no	Statement	Yes	No
1	To use condom consistently in all sexual relationship	95	5
2	To go to the VCTC for a blood test if they have any type of sexually transmitted disease	99	1
3	To go to a hospital for blood test if they have lower abdominal pain and foul smelling discharge	98	2
4	To visit to a doctor if a person has common STD symptoms	99	1
5	To go to a hospital for blood test, if someone has more than one sexual partner. Both of them should undergo testing.	99	1
6	To go to VCTC for blood test, if one is suffering from upset tummy & fever for a long time	100	0
7	To call on 1097 to know about HIV/AIDS in details	99	1

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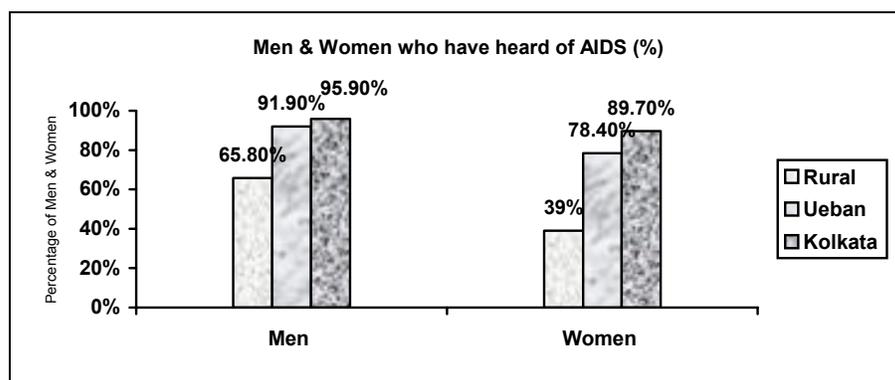


## The National Family Health Survey, Wave – 3 ,2005-06 Findings

The National Family Health Survey, Wave – 3 ,2005-06 has revealed the degree of knowledge among ever married adults in rural and urban West Bengal and in Kolkata as well. The findings are encouraging as it reflects fairly high HIV/AIDS awareness level throughout the state, the city scenario being stronger however.

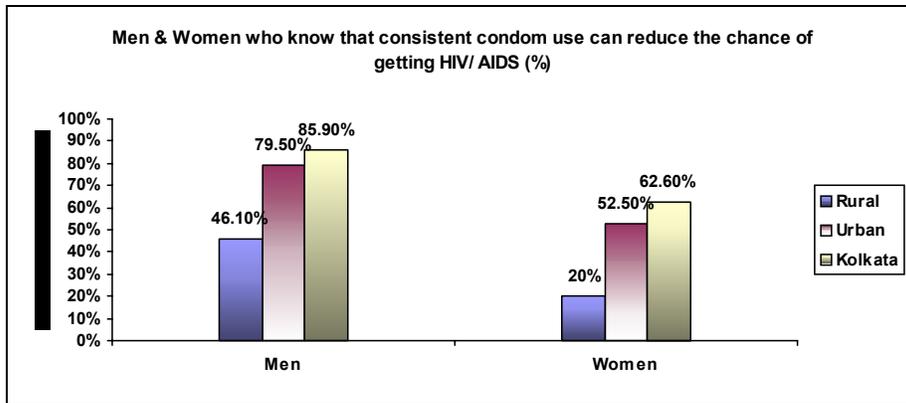
### Knowledge of HIV/ AIDS among Ever-Married Adults (15-49)

#### (National Family Health Survey-3 2005-06)



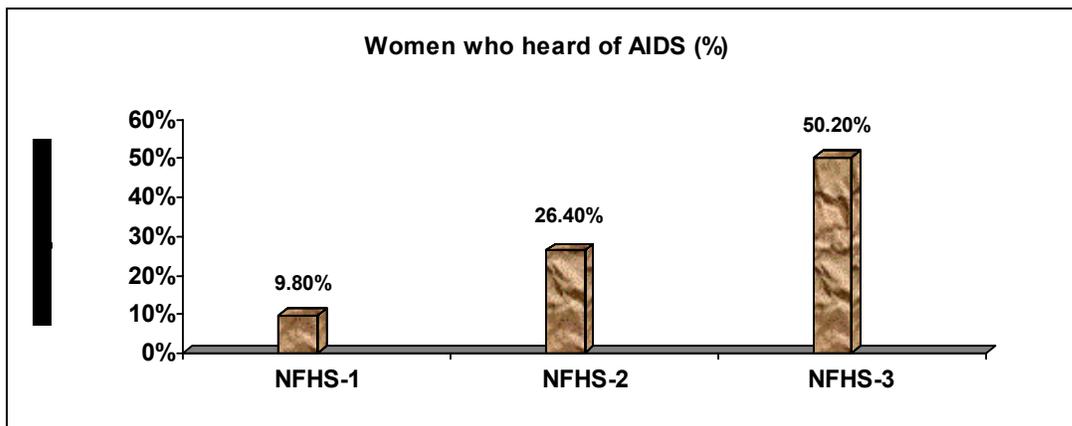
The above graph ( NFHS -3) shows the following-

- 65.80 % of ever married rural men and 39% of ever married rural women having heard of HIV/AIDS
- 91.90 % of ever married urban men and 78.40% of ever married urban women having heard of HIV/AIDS
- 95.90 % of ever married men in Kolkata and 89.70% of ever married women in Kolkata having heard of HIV/AIDS



The above graph( NFHS -3) shows the following-

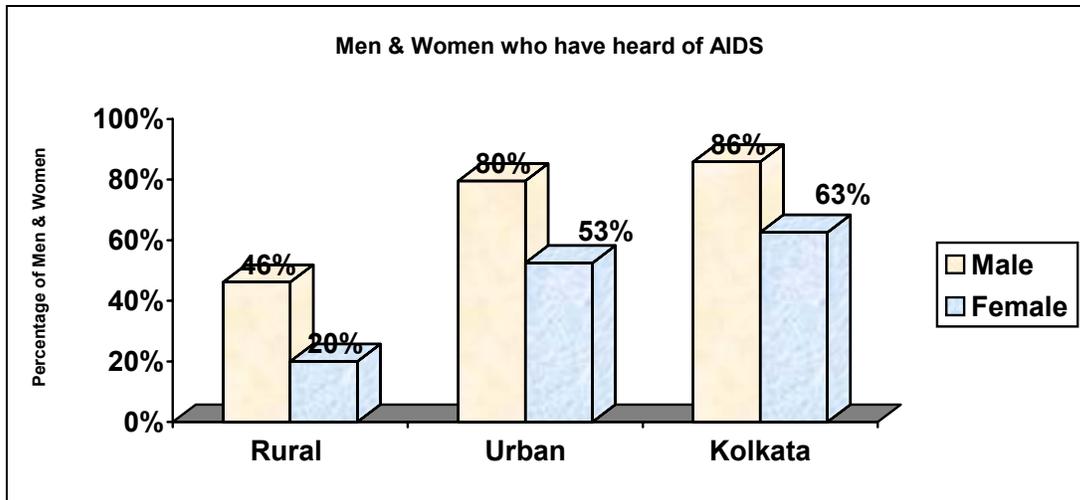
- 46.10 % of ever married rural men and 20% of ever married rural women know that consistent condom use can reduce the chance of getting HIV/AIDS
- 79.50 % of ever married urban men and 52.50% of ever married rural women know that consistent condom use can reduce the chance of getting HIV/AIDS
- 85.90 % of ever married men and 62.60% of ever married women in Kolkata know that consistent condom use can reduce the chance of getting HIV/AIDS



The above graph ( NFHS -3) reveals the gradual increase in proportion of women ( shown in %) who have heard of AIDS as had been captured in NFHS waves 1, 2 and 3. In NFHS -1 it was **9.80%**. In the following NFHS 2 it went up to **26.40 %** with a further climb to **50.20 %** in NFHS III .

The above graph ( NFHS -3) reveals-

- 66 % of rural men and 39 % of rural women have heard of AIDS.
- 92 % of urban men and 78.40% of urban women have heard of AIDS
96. % of men and 89.70% of women in Kolkata have heard of AIDS .



The above graph ( NFHS -3) reveals-

- a) **46. %** of rural men and **20%** of rural women know that consistent condom use can reduce the chance of getting HIV/AIDS
- b) **79.50 %** of ever married urban men and **52.50%** of ever married rural women know that consistent condom use can reduce the chance of getting HIV/AIDS
- c) **85.90 %** of ever married men and **62.60%** of ever married women in Kolkata know that consistent condom use can reduce the chance of getting HIV/AIDS

West Bengal State AIDS Prevention and Control Society has taken steps to furthermore strengthen the Campaign through rolling newer messages catering to a diverse audience segments with focus on behavioural change for taking up of safe health practices.