Stigma Campaign Image Pilot Progress Report

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A stigma reduction campaign will be undertaken in 14 Free State hospitals as part of a broader infection control trial. The campaign will utilize imagery in posters, decals, other marketing materials, and correspondence between hospital managers and staff. These images are targeted to all healthcare workers in the hospitals, and intended to communicate anti-stigma, anti-discrimination and confidentiality messaging. The images will be used to create a single campaign brand and will include consistent messaging.

Seven image series (2-3 individual images in each) were designed, for a total of 18 images (see appendix A). Development of images focused on the following attributes: Aesthetics, cultural appropriateness, literacy, togetherness and connection to the UNAIDS *Getting to Zero* campaign *(zero stigma, zero new HIV/TB infections, zero HIV/TB deaths).*

Aesthetics: Images will be printed in a variety of sizes and forms (such as large format posters, doorframe decals and letterhead), and should therefore be able to draw attention from a distance, as well as be clean enough for small printing. Accordingly, the images developed include bright colours, basic text and straightforward imagery.

Cultural Appropriateness: Over 60% of the population of The Free State, and majority of hospital staff, are of Sotho origin.[1] Attention to details such as colours, patterns (in particular Sotho *shweshwe* cloth print) and design is an important process in developing materials and messaging that hospital staff can relate to and identify with.

Literacy: Besides Sesotho, Afrikaans and English are widely spoken among hospital staff. Official hospital correspondence is conducted in English, and the stigma reduction campaign will primarily be developed for English speakers. However, given the range of literacy levels among hospital staff in the Free State, much of the marketing material will be provided in the three languages.

Togetherness: The concept of *Ubuntu* is common and well understood in modern South African culture. Many interpretations exist, and we have adopted to understand *Ubuntu* as "I am because you are." From this interpretation, we believe that the concept of *Ubuntu* will create a theme of togetherness, as people will relate the health and wellbeing of their colleagues to their own health and wellbeing.

UNAIDS *Getting to Zero Strategy*: The current Joint United Nations Programme on HIV/AIDS focuses on three zeros: Zero new HIV infections; zero AIDS-related deaths, and zero discrimination of HIV. For the purposes of this RCT, the *getting to*

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[1] Statistics South Africa. (2012). *The South Africa I Know, The Home I Understand.* Pretoria: Statistics South Africa.

zero has been slightly modified to include TB (zero new TB infections and zero TB deaths).

The attribute of togetherness inspired the use of holding hands as in our images, and the *Getting to Zero Strategy* lends itself to the use of a zero, or circle, which is aesthetically pleasing, simple and can represent completeness or holistic care. Using online stock image repositories to search for various images that included themes of unity, circular and togetherness, we developed 7 image series.

Series 1 (Health Care Workers Helping Health Care Workers): One image of many hands overlapping to create a circle was used as a frame for the "Ubuntu @ work" messaging.

Series 2 (Helping Hands): Another image of 4 hands reaching inwards to create a circle incorporates all the above-mentioned themes. Variations were created by filling in the hands with shweshwe prints of different patterns and colours. The message of "working together" was inserted within the circle of hands.

Series 3 (Let's Stop Stigma): Following on the theme of hands, we developed a series using a hand in the STOP position, to be used with Stop Stigma messaging. The image is more abrasive and direct, but was softened with the use of shweshwe print. This series used the message "health care workers stop stigma" in English, Afrikaans, and Sesotho.

Series 4 (Getting to Zero): The UNAIDS *Getting to Zero Strategy* logo of a blue circle was recoloured using different shweshwe prints, and various slogans were used within the circles. The slogans were: "working together" (in all three languages); "zero stigma/new TB infections/new HIV infections"; and "Ubuntu @ work."

Series 5 (Keeping Confidentiality): One component of the stigma intervention and overall RCT is to encourage health care workers to utilize their occupational health units (OHU). Therefore, three images around the concept of confidentiality in the OHU were developed. These images are intended as posters for the OHU, and the messaging promotes the confidentiality of the OHU at each hospital. Messages for this series are: "We don't gossip about your health" (used with a silhouette of a person holding their finger to their lips); "Your information is safe with us" (used with a cartoon image of lips); and "keeping you healthy/keeping your information safe" (written on a locked file).

Series 6 (Health care workers – let's make a difference): Elastoplasts (bandages) of different shapes were used in conjunction with two related messages: "Me/We" and "care for yourself/care for others." The elastoplasts provide a connection to the role of health care workers as 'healers,' and suggest that reducing stigma is a form of health care in itself. The "Me/We" messaging was borrowed from a local artist and was incorporated to tie in the idea of caring for colleagues in relation to the concept of *Ubuntu*.

Series 7 (Everyone Wins): The rosette prize ribbons emerged from the idea that stigma does not embody any commodity, and therefore it becomes difficult to 'sell' the concept of stigma reduction. The idea of 'winning' is intended to remove the abstract nature of stigma, and offer an end-product that health care workers can conceptualize, internalize and work towards. Within each image is a stigma goal that can be achieved: "zero prejudice @ work;" "zero stigma @ werk;" and "zero gossip @ mosebetsing." The word 'work' only was translated into Afrikaans and Sotho (respectively).

The eighteen images were piloted at five hospitals using a basic interview format. Respondents were asked to discuss their initial thoughts regarding each image series (see appendix B). Summary of respondent demographics in Table 1:

Sex	Male				Female		
	3				8		
Age	21-39				40-59		
	6				6		
Race	Black				White		
	8				3		
Occupation	Nurse		Allied			Administrative	
	3		5			2	
Unit	Admin	OHU	Eye Clinic	Family Medicine	Pharmacy	Health Promotion	Dentistry
	1	1	1	2	3	2	1
Years working at current hospital	<1		2-5		6-10		10+
	2		3		3		3
Highest level of education achieved	Secondary		Matric		Diploma		Degree
	2		3		4		2

Table 1: Demographics of Participants in First Round of Interviews

Results of each interview were transcribed for each image series. Answers to all questions in a given series were combined, as respondents did not necessarily follow each question. Analysis focused on positive and negative perceptions that were common across interviews, and a summary of the perceptions was developed for each image series (see table 2).

	Perceptions
Series 1: Healthcare workers helping healthcare workers	Message of working together, image 1 is more clear and legible, different skin tones is nice, message of Ubuntu is well represented
Series 2: Helping Hands	Image 3 is preferred because different colours = different cultures = different hospital units; hands represent coming together to work towards common goal
Series 3: Let's Stop Stigma	Must have all three languages; image 6 stands out more; hand means stop; red would be a better colour (attracts attention and signals danger)
Series 4: Getting to Zero	Images difficult to connect to message; image 8 messaging makes it clear about HIV/TB
Series 5: Keeping Confidentiality	Lock imagery catches everyone's attention, meaning is clear and to the point; image 10 also well received
Series 6: Health Care Workers - let's make a difference	Elastoplasts make connection to health and HCWs; image 14 preferred image; message is clear but "me/we" may not make sense to all staff members
Series 7: Everyone Wins	Images do not connect to message; message is important but not catchy
Table 2: Summary of Results from First Round of Interviews	

Based on the results of the interviews, four of the image series were chosen as 'favourites,' and modified accordingly (see appendix C). For series 1, the first image was kept, and a second image with different colouring and messaging added. This message was adopted from the 'Getting to Zero' series. For series 3, the blue *shweshwe* was changed to red, and some grammatical changes in the Sotho translation were made. For series 5, one image was removed, and an alternate image of the lock was designed with slightly different messaging. Lastly, for series 6, the 'Me/We' messaging was replaced with "zero to prejudice/zero to stigma/zero to gossip." This is the original messaging from series 6, slightly modified to match the language style used in a union poster found at one of the hospitals during field work (see appendix D). Series 2, 4 and 7 were concluded to not be appropriate for the stigma intervention, and thus removed from further piloting.

A second set of interviews was conducted with the four updated image series. Fewer respondents were interviewed, and results were not conclusive. Nevertheless, one perception of some images was that they were not original, with similar imaging being used in other health promotion ca`mpaigns (such as no smoking), as well as in commercial mass media (such as Vodacom advertisements). Such resemblance to other widely spread campaigns reduces the attention-grabbing effect of the images. The elastoplast and locked file images continue to be well liked by the majority of respondents, and the stop hand also liked by many. The messaging itself was well received by respondents.

Following the second pilot, three images were identified as appropriate for the stigma campaign and for the RCT branding in general. Series 5 and 6 remain unchanged, while series 3 was modified further to reflect respondents comments (appendix E). It is recommended that series 3 be used as the primary 'brand' image for the stigma component of the RCT (such as large format posters), as it has a broad and 'loud' message. Series 6 is more direct regarding how to reduce stigma, and should be used as secondary messaging to complement series 3.

It is important to note that although infection control is the primary focus of the RCT, it is recommended that infection control messaging should *not* be included in the stigma campaign. HIV and TB prevention messaging can in itself be stigmatizing to people living with HIV or TB, and in the context of this RCT, is more concerned with occupational risk and exposure. Therefore, infection control messaging should be promoted through occupational health workshops (such as on preventing needle stick injuries and proper N95 respirator use) and encouragement from management (such as promoting the use of the OHU). There already exist a plethora of HIV and TB prevention messaging throughout hospitals in the Free State, and stigma messaging should be focused on attitudes regarding HIV and TB, not on their prevention.

Confidentiality at the occupational health units is a major concern for many HCWs in Free State hospitals. It is recommended that confidentiality messaging be introduced at a later stage of the intervention, through close collaboration with the OHNs at each hospital. They should be involved in the promotion of their services through personal contact with staff members, and using the messaging developed here as secondary materials.

One component of the RCT is to distribute TB symptom check cards to all hospital employee. These cards will be stapled to paychecks, and will include the four symptoms used for TB screening (coughing for more than two weeks, fever for more than one week, unintentional weight loss and night sweats). These cards will utilize the red stop hand developed for the stigma campaign with "Let's Stop TB" written on the palm. The cards will also include additional TB information, such as prevention messaging (covering cough, open windows and identify coughing patients).

Appendix A
Image Series, First Pilot

Health Care Workers Helping Health Care Workers

Series 1

Helping Hands

Series 2

Let's Stop Stigma

healthcare workers stop stigma

5

healthcare workers stop stigma
gesondheidswerkers stop stigma
basebetsa ba emisa ka sekgobo

6

Series 3

Getting to Zero

working together
sebetsa mmoho
saamwerk

7

zero
stigma
new tb infections
new hiv infections

8

ubuntu
@
work

9

Series 4

Keeping Confidentiality

10

11

12

health care workers – let's make a difference

Sorg vir jouself

ek ons

Sorg vir kollegas

13

Care for yourself

me we

Care for colleagues

14

Itlhokomele

nna rona

Hlokomela le wena

15

Everyone Wins + Almal Wen + Kaofela Reahlola

ZERO
PREJUDICE
@ work

16

ZERO
STIGMA
@ werk

17

ZERO
GOSSIP
@ mosebetsing

18

Series 7

Appendix B
Questions for each Image Series

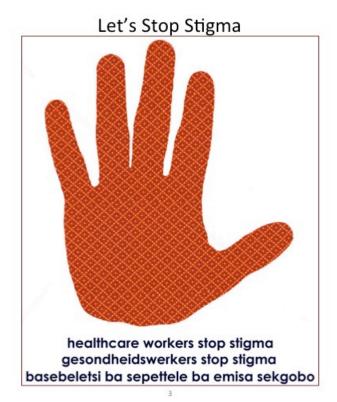| |
|---|
| 1. What are your first thoughts when you see these pictures?
Probes: Feelings, Messages, Clarity |
| |
| 2. Do you like these pictures? Why or Why Not?
Probes: Which picture do you prefer? |
| |
| 3. What do you think about the wording, text, pattern and colours?
Probes: Catchy, Correct, Appealing, Better ways of getting the message across. |
| |

Appendix C
Image Series, Second Pilot

Health Care Workers Helping Health Care Workers

Series 1

Series 3

Keeping Confidentiality

Series 5

Health Care Workers: Let's Make A Difference

Series 6

Appendix D
Union Poster found in Pelonomi Hospital

Appendix E

Let's Stop Stigma

healthcare workers stop stigma
gesondheidswerkers stop stigma
basebeletsi ba sepettele ba emisa sekgobo

Series 3