

Assessment of Effectiveness of IEC material at Red Ribbon Clubs (RRCs)



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LIST OF ACRONYMS

AIDS	Acquired Immuno- Deficiency Syndrome
ANM	Auxiliary Nurse Midwife
ASHA	Accredited Social Health Activist
AWW	Anganwadi Worker
BCC	Behaviour Change Communication
DK/ CS	Don't Know/ Can't Say
HIV	Human Immuno- deficiency Virus
ICTC	Integrated Counselling and Testing Center
IEC	Information Education Communication
NACP	National AIDS Control Programme
NCLP	National Child Labor Eradication Programme
NGO	Non Government Organisation
PE	Peer Educator
PHC	Primary Health Center
RRC	Red Ribbon Club
RTI	Reproductive Tract Infection
SR	Spontaneous Recall
STI	Sexually Transmitted Infection
ToR	Terms of Reference
TR	Total Recall (Spontaneous + Prompted)
U	Understood
VCT	Voluntary Counselling and Testing

EXECUTIVE SUMMARY

Red Ribbon Clubs have been set up in schools and colleges to train young student volunteers to make information on sexuality, teenage pregnancies, and Sexually Transmitted Infections (STIs) widely accessible. This is conveyed through interactive, lively events like role-plays, brainstorming, street theatre, elocution, debates, poster-making etc.¹ The main objective of these clubs is to increase the knowledge and skills to reduce new HIV infection among the youth. This objective is envisaged to be achieved by raising the risk perception of the youth through proper education on sex and sexuality and HIV/AIDS, by imparting new skills on communication, self-protection, negotiation, care and support and effective group interaction. It also aims to prepare the youth as peer educators and agents of change by developing their skills on leadership and team building.

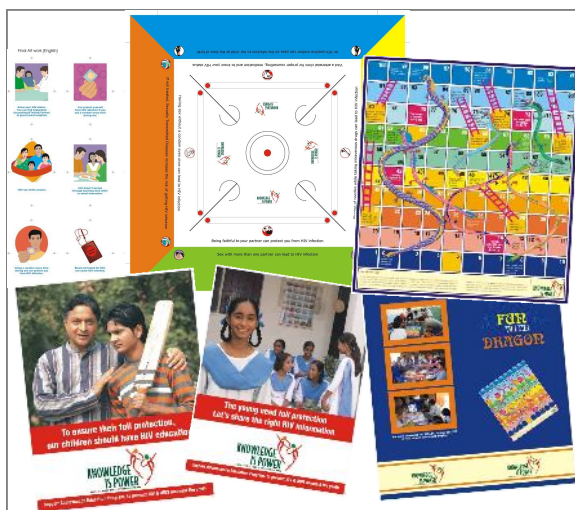
In the year 2007 four games and a set of nine posters on HIV prevention were developed by UNICEF for young people. These were as follows:

Games

1. Fun and Dragon (a variation of snakes and ladders)
2. Memory game (a card game)
3. Playing cards with HIV messages
4. Carom boards with HIV messages

Posters for different target groups

1. Young people – boys
2. Young people – girls
3. Peer educators – boys
4. Peer educators – girls
5. Parent – mothers
6. Parents – fathers
7. Panchayats
8. Teachers – female
9. Teachers - male



These materials were sent by UNICEF to the Red Ribbon Clubs (RRCs) in the following states/districts:

Maharashtra	Chandrapur, Latur, Nandurbar, Sangli, Mumbai
Karnataka	Raichur, Mysore, Dharwad, Bangalore
Andhra Pradesh	Medak, Guntur, Hyderabad
West Bengal	Purulia, Murshidabad, Jalpaiguri
Gujarat	Baroda, Valsad, Surat (only carom boards were sent)

UNICEF envisaged undertaking a survey to understand the effectiveness of IEC materials sent to the Red Ribbon Clubs (RRC) and any other IEC materials that may be present in the RRCS in

¹ <http://www.hivaidsonline.in/index.php/Interventions/communicating-effectively-in-tamil-nadu.html>

increasing knowledge about HIV and AIDS, as well as changing the attitudes and behaviors. The study is perceived to have manifold utility in providing insights to various stakeholders in terms of impact of these materials on knowledge, attitudes and risk perceptions of the beneficiaries; modifications required in the visual appeal, content etc.; and addressing demand and supply issues.

The broad objective of the study was to understand the effectiveness of IEC materials supplied by UNICEF and other IEC materials present at the Red Ribbon Clubs in the states of Maharashtra, Karnataka, Andhra Pradesh, West Bengal and Gujarat.

The study aimed to provide answers to the following broad research questions:

- Are the materials sent to the RRCs relevant for the target audience and purpose for which they were intended?
- Are there other materials displayed/being used other than the ones mentioned before? What are they?
- Are the materials sent to the RRCs effective in communicating the intended messages?
- What is the impact of the materials sent to the RRCs?
- Is the supply chain management system in place efficient?
- What are the material gaps?

In order to answer the research questions extensive investigations were carried out at various levels viz. the beneficiary, peer educator and the stakeholder levels. A mix of quantitative and qualitative research techniques in the form of semi structured interviews were adopted for generating the required information for the study. In addition, observations were carried out at existing RRCs to check the availability, usage, display of the IEC materials provided by UNICEF. Observations were also made regarding the storage space and maintenance of these materials. Photographs were also taken of the RRCs that existed and wherever it was permitted by the in charges.

The respondents for the survey comprised the following target groups.

- Beneficiaries: *Young people who had ever participated in RRC activities as reported by Peer Educators*
- Peer Educators: *Educators identified for RRC activities*
- Stakeholders: *Sarpanch, teachers, Anganwadi workers, ASHA etc involved in RRC activities*
- RRC coordinators: *Those assigned by NGO to monitor the RRC programme*
- NGO coordinators: *Coordinators at the NGO level in charge of implementing RRC programme*

The study covered one district from each of these five states in line with the suggestions in the TOR. The selected districts were Guntur (Andhra Pradesh), Vadodara (Gujarat), Raichur (Karnataka), Sangli (Maharashtra), and Purulia (West Bengal).

In all the study covered 107 RRCs, 703 beneficiaries, 191 peer educators, 61 RRC Coordinators and 82 stakeholders in all the study states. The state-wise sample coverage is as below.

Sample at a glance

States	RRCs	Beneficiaries	Peer Educators	RRC Coordinators	Stakeholders
Andhra Pradesh	17	150	54	14	27
Gujarat	12	61	23	7	14
Karnataka	12	80	9		
Maharashtra	18	61	16	11	11
West Bengal	48	320	89	29	30
Total	107	703	191	61	82

Limitation of the study

The study faced certain limitations at the time of fieldwork. A majority of the RRCs were non functional with the situation much worse in Raichur (Karnataka), Sangli (Maharashtra), and Purulia (West Bengal). While in the former two districts, the programme was reported to have never taken off in a big way after its inception in 2007, in the latter, the programme started in most RRCs in June 2006 and got over in December 2007. In Gujarat, the programme had officially ended in December 2008. Only in Guntur (Andhra Pradesh) was the programme found to be functional. Consequently in all these cases, it was very difficult to locate RRCs and the target respondents. Many of the peer educators and beneficiaries had migrated out of their villages. Availability of female beneficiaries and peer educators was less in all the study states except Andhra Pradesh.

FINDINGS AND EMERGING ISSUES

Profile of RRCs and Respondents

Red Ribbon Clubs

- Around half of the RRCs were formed in 2007, and more than one-third (37%) in the year 2008 and the remaining in the year 2006
- More than half of the RRCs did not have a separate room for IEC activities
 - The location of the RRCs varied from state to state.
 - Andhra Pradesh: NCLP schools and youth centres
 - Gujarat and West Bengal: youth information centres or youth clubs
 - Karnataka: Peer educators home
 - Gujarat RRCs: RRC coordinators home and PHCs
- The average number of beneficiaries enrolled in the RRCs ranged from 24 in Maharashtra to 68 in Andhra Pradesh.

- *Supply, availability, adequacy, usage and storage condition of IEC materials:* The supply of IEC materials by UNICEF was not uniform to all the states. The information on availability as observed indicated that except for Carrom Board and Fun & Dragon, all other materials though supplied in good condition but were either not sufficient to be distributed to all the RRCs or had got displaced. Mostly all the available material in the RRCs was in use. Inadequacy of materials was reported in Andhra Pradesh, Maharashtra and West Bengal, probably due to high demand. Separate storage facility was hard to see and needs to be looked into by programme authorities. A glimpse of supply, availability, usage and storage conditions of IEC materials in different study states is as below.

States	Supply, Availability, Usage, Adequacy & Storage Conditions
Andhra Pradesh (N=15)	<ul style="list-style-type: none"> • Supply: All IEC materials have been supplied to the RRCs in the state • Availability: Almost all RRCs had Carrom board & Fun and Dragon; only a few (2) had playing cards; Posters not available in any RRC. • Usage: All the available materials were in use • Adequacy: IEC material was felt inadequate at almost all RRCs • Storage Condition: Only some RRCs (4) had separate storage facility
Gujarat (N=10)	<ul style="list-style-type: none"> • Supply: Only Carrom boards were supplied • Availability: Carrom boards were available in majority (7) • Usage: All were in use. The messages had faded/worn out in few centres • Adequacy: Adequacy was reported at the centres where carrom boards were available. • Storage Condition: None of the RRCs had any separate storage facility
Karnataka	Observation of IEC material was not feasible as none of the RRCs contacted had any set up
Maharashtra (N=10)	<ul style="list-style-type: none"> • Supply: Except for Fun & Dragon, all games and posters were supplied • Availability: Majority of RRCs had carrom boards (8); other games & posters available only in some RRCs(3-4) • Usage/Displayed: All the available material was in use. The messages on Carrom Boards in a few centres were in Gujarati • Adequacy: Only half of the RRCs reported adequacy • Storage Condition: Only some RRCs (4) had separate storage facility
West Bengal (N=31)	<ul style="list-style-type: none"> • Supply: Except for posters all other games were supplied. Posters were also available with the UNICEF logo, but had different pictures • Availability: Majority of RRCs (>26) had Carrom board & Fun and Dragon and Playing Cards (21); only some had Memory Games (14); and less than one-third had posters • Usage/Displayed: Use of Carrom Board and Fun & Dragon was highest (23 & 19 RRCs respectively). Use of Playing Cards was reported in some (16). Most displayed poster was of young girl and young boy. • Adequacy: Inadequacy of materials was reported at almost all RRCs (29) • Storage Condition: About half did not have any separate storage facility

Profile of Beneficiaries, Peer Educators, RRC Coordinators, Stakeholders, and NGO Coordinators

Beneficiaries

- *Gender:* Overall three-fifths of the beneficiaries were males. Higher proportion of male beneficiaries was found in Karnataka, Maharashtra and West Bengal, whereas in Gujarat and Andhra Pradesh the proportions were almost equal.
- *Age:* Almost all of the beneficiaries were below the age group of 25 years (Mean age: 18 years). Across states, this percentage was similar except in Andhra Pradesh where the mean age of beneficiaries was 14 years.
- *Social Category:* The programme seemed to have made efforts to reach out to beneficiaries from all social categories with one-thirds representing other backward classes and scheduled caste/scheduled tribe each and 28 percent representing general category.
- *Educational Status:* Three-fifths of the beneficiaries were currently studying at the time of the survey, about 36 percent had ever attended school and about 4 percent had never attended any educational institution. The proportion currently studying was highest in Andhra Pradesh (85%), followed by West Bengal (60%) and Maharashtra (56%).

Peer Educators

- A total of 191 Peer Educators were covered in the study
- *Age:* The mean age of peer educators was 25 years. The number of male and female peer educators covered in the study was almost equal (53% males and 47% females).
- *Education:* Majority were 10th standard and above
- *Social Category:* About 30 percent of the Peer Educators belonged to the other backward classes; about 28 percent to general category; and 42 percent to scheduled castes/scheduled tribe.
- *Appointment and Experience:* On an average, the peer educators had worked at the RRC for about 16 months. PEs perceived that they had been selected for this programme because of the popularity they enjoy among the community members (34%) followed by their knowledge about HIV/ AIDS (28%). They had come to know about the existence of RRC from the local NGOs and the local Panchayat.
- *Training received:* More than two-thirds received training at NGO or local school and average duration of training was 5 days
- *Main topics covered in training:*
 - Basic knowledge about HIV/AIDS (63%-86%)
 - Effective usage of IEC material (32%)
 - Counselling (15%)

Peer Educators

- Roles and Responsibilities of PEs (33%)
- Aims and objectives of Programme (16%)
- Perception on main roles and responsibilities
 - Create awareness in the community
 - Educate youth about HIV testing facility &
 - Condom use (Exceptionally high in Gujarat)

RRC coordinators

- Overall, 61 RRC coordinators were covered in the study
- Education: Majority had studied up to high school or above (46)
- Training received: 4/5th had received training under RRC programme
- Main activities of RRC coordinators:
 - Establish RRCs/enrolling student members (27)
 - Sensitization programme for teachers & parents (30)
 - Identify & train peer educators (29)

Stakeholders

- In all 82 stakeholders were covered during the study.
- Education: Mostly educated up to high school or above (56)
- Perception about target group:
 - More than half (46) felt it catered only to adolescents
 - Less than 1/3rd felt it was meant for all target groups
- Participation in RRC activities (67):
 - Support in providing AIDS related information to young people (22)
 - Help in conducting IEC activities by RRC (10)
 - Motivate parents to send their children to RRC (10)

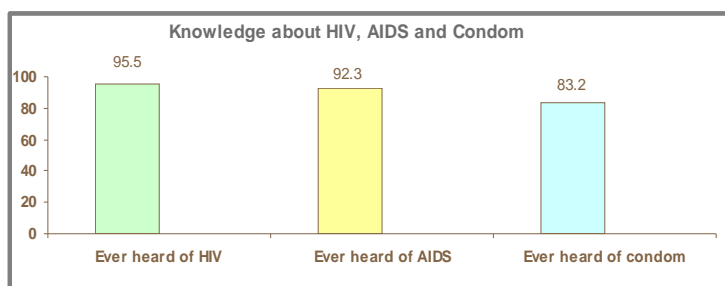
Profile of NGO Coordinators

- Coordinators of 7 NGOs were contacted in all the study states.
- All of these NGOs were more than 10 years old.
- The coordinator of the NGO coordinating RRC activities in Purulia district (West Bengal) was the only one reporting to have received any training related to Red Ribbon Clubs.

Knowledge and Attitude regarding HIV/ AIDS

Awareness about HIV/ AIDS, Condom and ICTC

- Most of the beneficiaries (>90%) were aware about HIV and AIDS. About 83 percent had ever seen or heard of a condom.



- More than one-third of the beneficiaries were aware about Integrated Counseling and Testing Centres (ICTCs).
- As regards knowledge of peer educators, almost all had heard of HIV, AIDS and condom and almost three-fourths had heard of ICTCs.

Modes of transmission and preventive measure

- About 68 percent to 86 percent of the beneficiaries were aware of different modes of transmission of HIV/AIDS. Knowledge regarding 'Sharing a needle with an infected person' was highest (86%), followed by 'Infected blood transfusion' (84%).
- As regards preventive measure, about 71 percent had correct knowledge that condom should be used every time having sex and 59 percent agreed that having one uninfected faithful partner can help prevention.
- Almost all of the peer educators had good knowledge about the spread and prevention of HIV infection

Myths regarding HIV/ AIDS

- A majority of the beneficiaries did not believe in the common myths surrounding spread of HIV/ AIDS with around 65 percent aware that a person can not get HIV/AIDS by sharing a meal with someone who is infected, and 85 percent aware that HIV/AIDS does not spread through touching each other or social interaction.

- About 67 percent of the beneficiaries knew that that a healthy-looking person can also transmit HIV/AIDS and more than four-fifths (82%) of them knew that there is no medicine that can cure HIV/AIDS.
- Findings regarding the myths surrounding transmission of HIV were similar across peer educators as well

Attitude towards those affected

- The beneficiaries of Red Ribbon Clubs had positive attitude towards those affected with 76 percent agreeing to the statement that 'one should not discriminate against those affected with HIV/ AIDS'.
- About 66 percent felt that with love and affection one can help HIV positive person lead a normal life and that 'An HIV positive person can lead a normal life'.

Beneficiaries' attitude towards safe behaviors

- Encouragingly, almost all (95%) of the beneficiaries agreed with the statement that 'Early marriage should not be supported'.
- Most felt that one should know his/ her HIV status to live life responsibly and that the right knowledge about HIV may save their life as well as their friends' (82% each).

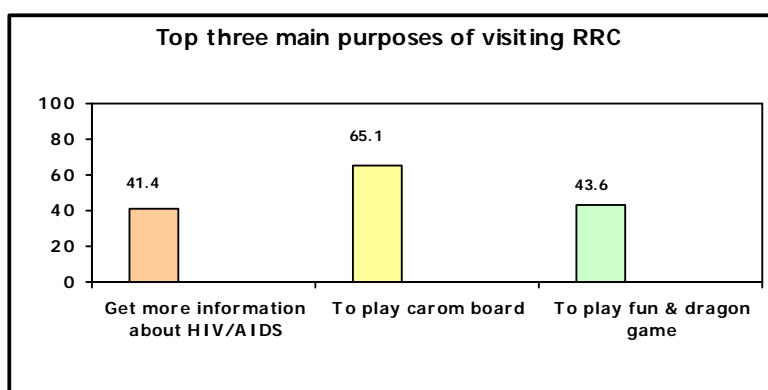
Self risk perception

- More than three-fourths of the beneficiaries felt that they were at no risk of contracting HIV. However, about 9 percent did feel that they were at a high risk of contracting HIV.

Participation in of beneficiaries, peer educators, RRC coordinators and stakeholders in RRC activities

Beneficiaries

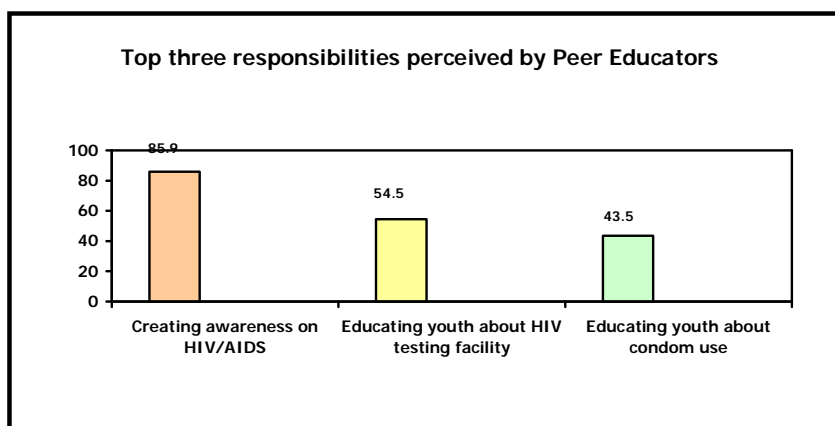
- Playing carom board (65%) followed by playing fun and dragon game (44%) and getting more information about HIV/ AIDS (41%) comprised the top three purposes of visiting the RRCs.



- Playing carom board was very popular among beneficiaries in Andhra Pradesh (91%), followed by Maharashtra (64%), Karnataka (63%) and West Bengal (60%). Fun and Dragon also was very popular in Andhra Pradesh (80%) and Karnataka (59%)

Peer Educators

- Overall, 86 percent of the peer educators felt that creating awareness about HIV/ AIDS in the community was their role/ responsibility as a peer educator. This percentage was highest across states in Gujarat, Karnataka and Maharashtra (100% each) and lowest in Andhra Pradesh (59%).



- More than half of the peer educators reported education of youth about HIV testing facility followed by education of youth about condom use (44%) as their role/ responsibility.

RRC coordinators

- The topmost roles and responsibilities as perceived by RRC coordinators included, 'Creating awareness about HIV/AIDS', 'Educating youth about HIV', and 'Organizing group meetings on HIV/AIDS'.
- More than one-third of the RRC coordinators were also involved in the supply and distribution of IEC material.

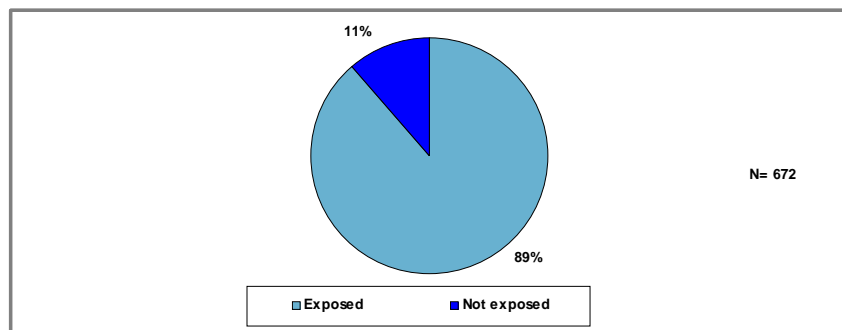
Stakeholders

- The activities that the stakeholders had been involved in included, 'Support in providing HIV/ AIDS related information to young people', 'Lending help in conducting IEC activities at the RRC', and 'Motivating parents to send their children to the RRC'.
- Adolescents (10-18 years) and youth (19-24 year) comprised the main target group the peer educators, RRC coordinators and the stakeholders interacted with.

Experience of Beneficiaries and Peer Educators with IEC Materials

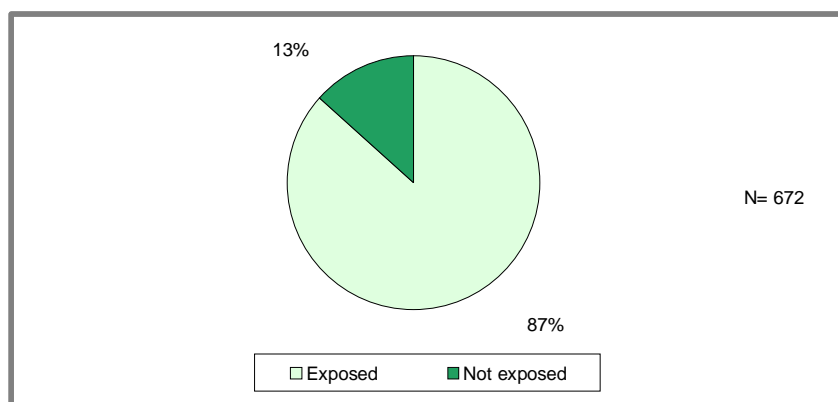
Exposure of beneficiaries to IEC Materials at the RRCs

- *Exposure to any IEC Material supplied by UNICEF:* Overall, 89 percent of the RRC beneficiaries



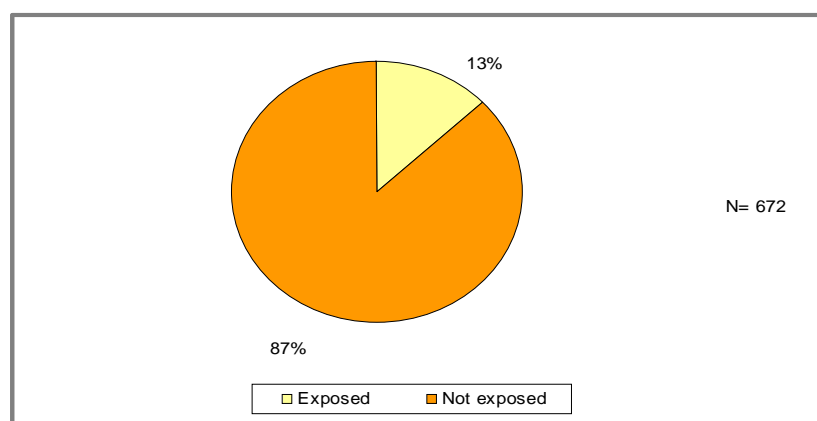
had exposure to any IEC material supplied by UNICEF for young people. The proportion of beneficiaries having such exposure was very high in Andhra Pradesh and Maharashtra (cent percent) and 89 percent of those in West Bengal.

- *Exposure to any Game supplied by UNICEF:* Overall, 87 percent of the RRC



beneficiaries had exposure to any game supplied by UNICEF to the Red Ribbon Clubs. Across states, all the beneficiaries in Andhra Pradesh, 93 percent in Maharashtra and nearly four-fifths in Karnataka and West Bengal had exposure to any game at the RRC.

- *Exposure of beneficiaries to any of the nine posters supplied by UNICEF:* Overall about 87 percent of the beneficiaries were exposed to any of the nine posters supplied to RRCs by UNICEF. This percentage was

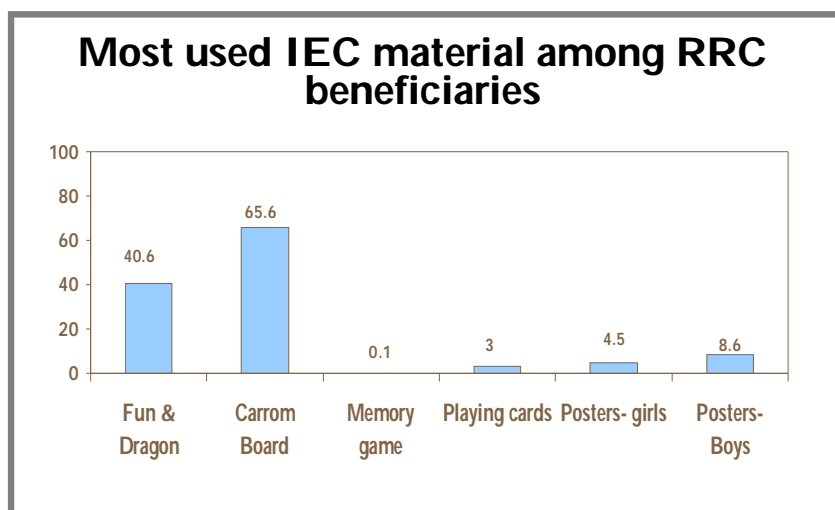


low across all the five states, it was relatively higher in the state of Maharashtra (57%) as compared to the other four. In West Bengal, there was no supply of these posters according to information received from UNICEF. However, upon visits to these RRCs in Purulia district, it emerged that there were some posters on HIV/ AIDS that had been supplied by UNICEF.

- *Exposure of beneficiaries to any other IEC Material at the RRCs:* Nearly one-fourth of the beneficiaries had exposure to IEC materials other than the ones supplied by UNICEF. Across states, the beneficiaries who reported exposure to other IEC materials were mostly from Maharashtra (61%) and Gujarat (57%). Books, Posters and the Charts were some of the other IEC materials available at the RRCs.

Exposure to Specific IEC Materials

- The most commonly used IEC materials at the RRCs was the carrom board (66%) followed by Fun and Dragon Game (41%). The use of Memory Game (0.1%), Playing Cards (3%), Poster on Young Girls (5%) and Poster on Young Boys (9%) was quite limited at the RRCs.



- The use of carrom board was reported in all the five states. As compared to other states the use of carrom board at the RRC was more common in Andhra Pradesh and Maharashtra (89% each) followed by West Bengal (59%). In Gujarat and Karnataka 38 and 50 percent of the beneficiaries respectively reported the use of carrom board.
- The use of Fun and Dragon Game was reported by the beneficiaries in the states of Andhra Pradesh (74%), Karnataka (49%) and West Bengal (38%). The Fun and Dragon Game was not available in any of the RRCs visited in Gujarat and Maharashtra.
- The exposure to posters on young girls and young boys was reported mostly by the beneficiaries in Maharashtra.

Recall of Messages in the IEC Materials

- The beneficiaries contacted for the study mostly had exposure to Carrom Board and Fun and Dragon Game. The use of other IEC materials was almost non existent. Hence, in the subsequent sections findings relating to spontaneous recall of the messages only for the carrom board and fun and dragon game have been presented.

Carrom Board

- Effectiveness of the communication intended through the carrom board and fun and dragon game was measured in terms of the proportion of beneficiaries who could recall the messages in the games. Recall was evaluated by soliciting spontaneous responses.

- Almost all the beneficiaries (98%), who had exposure to carom board, could recall that the carrom board at the RRC had messages relating to HIV/AIDS.
- Overall, 7 to 29 percent of the beneficiaries having exposure to the carom board could recall the messages spontaneously. The recall of messages given in carom board was much better among beneficiaries in Andhra Pradesh.
- The top three messages that the beneficiaries could recall spontaneously were:
 - Sharing needles while taking intravenous drugs can lead to HIV infection (28.6%)
 - Sex with more than one partner can lead to HIV infection (24.5%)
 - Having sex without condom even once can lead to HIV (23.4%)

Fun and Dragon

- The exposure to Fun and Dragon Game was reported by beneficiaries in the states of Andhra Pradesh, Karnataka and West Bengal.
- Almost all the beneficiaries (99%), who had exposure to Fun & Dragon game mentioned that the Fun & Dragon game had messages relating to HIV/AIDS.
- Overall, 11 to 37 percent of the beneficiaries having exposure to the fun and dragon could recall the messages spontaneously.
- The top three messages that the beneficiaries could recall spontaneously were:
 - Sharing needles for drugs can cause HIV infection (37%)
 - Before donating blood you will make sure you are tested for HIV (37%)
 - Always use a new needle or get it sterilized (37%)

Opinion of the beneficiaries on IEC Materials

Carrom Board

- The opinion on the carom board game was sought from all the beneficiaries who had ever played the carom board at the RRC. Over three-fifths of the beneficiaries who had ever played the game liked the game. The proportion of beneficiaries liking the game varied between 89 to 95 percent across all the states excepting Andhra Pradesh where only 46 percent of the beneficiaries liked the game.
- Almost all the beneficiaries perceived the pictorials/visuals used in the in the carom board as appropriate and appealing.
- The written materials in the game were also perceived to be appropriate as well as appealing by almost all the beneficiaries.
- 70 percent of the beneficiaries perceived that they were better informed about HIV/AIDS after seeing the messages in carom game. These beneficiaries were mostly from the states of Karnataka (95%) , West Bengal (93%) and Maharashtra (89%).
- Overall 29 percent of the beneficiaries gave suggestions to make the carom board game more effective. The most commonly mentioned suggestions to make the carom board game more

effective were “Size of carom board should be larger”, “Number of carom boards at the RRC should be increased” and “Messages should be in the form of slogans”.

Fun and Dragon game

- Fun and Dragon game was reported in the states of Andhra Pradesh, Karnataka and West Bengal.
- Most of the beneficiaries (87% to 93%) who had played the game mentioned that they liked the game in general.
- Most of the beneficiaries Andhra Pradesh and West Bengal (90%) and Karnataka (82%) perceived that the messages in the game were relevant for themselves.
- Almost all the beneficiaries perceived that the pictorials /visuals used in the game as appropriate and appealing.
- The written materials in the game were also perceived to be appropriate and appealing by most of the beneficiaries (over 90%) who had played the game.
- More than 76 percent of the beneficiaries reported that they had discussed the messages in Fun & Dragon Game with others.
- Most of the beneficiaries in Karnataka and West Bengal (95% and 89% respectively) and 41 percent in Andhra Pradesh felt that they were better informed about HIV/AIDS after seeing the messages in Fun & Dragon Game.

Perception of the Peer Educators on Games Supplied by UNICEF

Carom Board

- Almost all the peer educators covered in the five states reported that they had ever played/facilitated the carom board game at the RRC.
- Overall 45 percent of them had received training for facilitation of the game and 53% had received instructions on how to play the game. The peer educators receiving training as well as instruction materials were mostly from the states of Karnataka Maharashtra and Gujarat.
- Most of the peer educators (93%) did not face any problem in understanding the messages in the game.
- More than 90% of the peer educators liked the game and perceived the messages to be relevant for the target groups.
- One third of the peer educators gave suggestions like “More information on HIV/ AIDS should be given in the carom board”, “Separate carom boards should be supplied for boys and girls” and “Messages should be given on carom coins”

Fun & Dragon Game

- Over four-fifths of the peer educators in Andhra Pradesh and West Bengal and two-thirds in Karnataka reported that they had ever played/facilitated the game at the RRC.

- All the peer educators in Karnataka, 54 percent in West Bengal and 28 percent in Andhra Pradesh mentioned that they had received training for facilitation of the game.
- Overall, a few of the peer educators (10%) faced any problem in understanding the messages in the carom board.
- All most all the peer educators (95%) liked the game and found the messages relevant for the target groups.
- The suggestions like “Font size of the written materials should be increased” and “More number of coins should be provided” were given by the peer educators for further improvement in the carom board.

Memory Game

- The availability of memory game was reported by 7 peer educators in West Bengal and 1 peer educator in Karnataka.
- Of these 8 had received training for facilitation of the game and 7 had received instructions on how to play the game.
- Most of the peer educators (93%) did not face any problem in understanding the messages in the game.
- Seven peer educators liked the game and 6 found the messages relevant for the target groups.
- Four 4 peer educators suggested that there should be more information on HIV/ AIDS in the memory game.

Playing cards

- Playing/facilitating of the playing cards was reported by 22 peer educators in West Bengal in 6 in Andhra Pradesh and 1 in Karnataka.
- Among the peer educators 12 had received some training on facilitation of the game and 19 had received instructions on how to play the game.
- Overall, one-tenth of the peer educators faced any problem in understanding the messages in the carom board.
- Twenty seven peer educators liked the game.
- All the peer educators perceived that the messages in the playing cards are relevant for the target groups. “Font size of the written materials should be increased” , “Supply of materials should be increased” and “Cards should have plastic cover” were some of the suggestions given by peer educators for further improvement in the playing cards.

Exposure and opinion of other stakeholders on IEC materials

RRC Coordinators

- Almost all the RRC coordinators had been exposed to Carom Board (55) followed by Fun and Dragon game (38). Their exposure to Playing cards (27) and Memory game (14) was relatively low.

- Almost all the RRC coordinators who had been exposed to carom boards, approved it and liked the messages given therein. A few of them found some difficulties in using the game, mainly related to the pockets of the carom board being small and lack of supply of powder for smooth sliding of the coins. Their suggestions on improving the game related to giving more information on the board and increasing the size of the board so that more messages can be included in it.
- The RRC coordinators also approved the Fun and Dragon game, liked the messages therein and felt that they are relevant for the target group. Their suggestions to improve the game included making the language simple and making a provision for a separate room for the female beneficiaries to play.
- Similar pattern was observed in case of both playing cards as well as memory games.
- The exposure of RRC coordinators to the posters was limited. Posters with young boys (18) and young girls (17) were seen by maximum number of RRC coordinators. They found these posters appropriate, appealing as well as relevant.

Other stakeholders (Sarpanch, AWW and Teachers)

- The stakeholders were mainly asked regarding their exposure and opinion on the specific posters that were meant for them specifically as a target group.
- The exposure of other stakeholders to the posters was very low and hence the opinion was also minimal.
- The perception of those having seen it was that these (IEC materials) are very good source of information about HIV/ AIDS an interesting way of learning especially for the young generation.

Conclusions

Relevance of the materials for the target audience

The IEC materials were largely felt to be relevant by the beneficiaries except in one state i.e. Andhra Pradesh where the RRC program was being implemented in NCLP schools. The children felt that the messages were more for youth. Among all the IEC materials, carom board and Fun & Dragon game was used most. The remaining were either not supplied or not used much.

Effectiveness of the materials and suggestions for contents/appearance

Of all the games supplied, carom board and Fun & Dragon game was the most popular. The target audience, peer educators and RRC coordinators largely found the visuals as well as pictorials of these games appealing as well as appropriate. Both these games had been very effective as most messages therein were recalled, understood, felt relevant and liked by the respondents. Main suggestions for increasing effectiveness of the IEC materials were: provision of separate rooms to play for males and females, more supply of IEC materials (especially for Carrom Boards and Fun & Dragon), more pictorials in Carrom boards, protective plastic cover for the games to increase their durability and use of simpler and colloquial language.

Impact of the materials

Although the games had been successful in terms of target beneficiaries feeling better informed on the issues relating to HIV/AIDS, triggering discussions on HIV/AIDS, impact of IEC material in terms of beneficiaries' knowledge regarding HIV/ AIDS and their positive attitude regarding discrimination against people affected with HIV/ AIDS can not be completely attributed to these IEC materials at RRCs in absence of any baseline information available regarding the same.

Efficiency of supply chain management system

The supply of IEC materials was not uniform across all the study states. Among all the IEC materials, the supply of Carrom Board and Fun & Dragon game was fairly good in all the states except for Gujarat where only Carrom Boards were supplied. The supply also had been more or less one time during the entire program period. The storage facility was largely not available. Only some RRCs in Andhra Pradesh, Maharashtra and West Bengal reported availability of storage facility. Mostly the Peer Educators were in charge of keeping them.

CHAPTER 1

Introduction and Methodology

1.1 Background

In the year 2007 four games and a set of nine posters on HIV prevention were developed by UNICEF for young people. These were as follows:

Games

5. Fun and Dragon (a variation of snakes and ladders)
6. Memory game (a card game)
7. Playing cards with HIV messages
8. Carom boards with HIV messages

Posters for different target groups

10. Young people – boys
11. Young people – girls
12. Peer educators – boys
13. Peer educators – girls
14. Parent – mothers
15. Parents – fathers
16. Panchayats
17. Teachers – female
18. Teachers - male



These materials were sent by UNICEF to the Red Ribbon Clubs (RRCs) in the following states/districts:

Maharashtra	Chandrapur, Latur, Nandurbar, Sangli, Mumbai
Karnataka	Raichur, Mysore, Dharwad, Bangalore
Andhra Pradesh	Medak, Guntur, Hyderabad
West Bengal	Purulia, Murshidabad, Jalpaiguri
Gujarat	Baroda, Valsad, Surat (only carom boards were sent)

A brief about Red Ribbon Clubs

Red Ribbon Clubs have been set up in schools and colleges to train young student volunteers to make information on sexuality, teenage pregnancies, and Sexually Transmitted Infections (STIs) widely accessible. This is conveyed through interactive, lively events like role-plays, brainstorming, street theatre, elocution, debates, poster-making etc.²

The main objective of these clubs is to increase the knowledge and skills to reduce new HIV infection among the youth. This objective is envisaged to be achieved by raising the risk

² <http://www.hivaidsonline.in/index.php/Interventions/communicating-effectively-in-tamil-nadu.html>

perception of the youth through proper education on sex and sexuality and HIV/AIDS, by imparting new skills on communication, self-protection, negotiation, care and support and effective group interaction. It also aims to prepare the youth as peer educators and agents of change by developing their skills on leadership and team building. The main focus under this is on the following:

- Abstaining from sexual activity as the most effective and only certain way to avoid HIV infection
- The development of skills for practicing abstinence
- The importance of abstinence in eliminating the risk of HIV transmission among unmarried individuals
- The decision of unmarried individuals to delay sexual debut until marriage
- The adoption of social and community norms that support delaying sex until marriage and that denounce cross-generational sex, rape and other forced sexual activity

In the above context, the following activities are undertaken by the Red Ribbon Clubs:

- Establishing Abstinence Club/enrolling student members
- Help to identify and train peer educators
- Sensitization program for principal and teachers
- Installation of Information and Display Board with permanent abstinence focused message
- Providing abstinence focused HIV/AIDS education through IPC activities by PEs
- Identify students who are practicing risk behaviors/hang-outs/risk sites nearby the college
- BCC through interpersonal communication by trained peer educators for students at risk
- Referral and follow-up for counseling/VCT services/treatment for RTI/STI (who are identified as at-risk students/infected with RTIs/STIs)
- Help to identify and provide Training of Trainers on traditional media and street theatre
- Formation of sub groups/cultural team
- Conducting BCC events, viz., street play, exhibitions, slide shows, video shows, etc.
- Conducting scientific section on sexual health and HIV/AIDS
- Distribution and Display of IEC materials
- Using mass media to generate support from general population especially from parents community

The monitoring system for the above is three folds, a) monitoring of Peer Educators by Key Coordinator through weekly peer educators' meetings; b) monitoring of Key Coordinators' work through monthly meetings organized by Project Officer; and c) Monthly Technical Reports (MTR).

NACP-III aims to promote Red Ribbon Clubs to cover young persons who are at greater risk to HIV both in campuses as well as in community.³ The programme addresses the knowledge, attitude and behavior of youth in the interrelated areas of both HIV/AIDS and sexuality, as demanded by their age, environment, and life style. Thus, Red Ribbon Clubs serve as a complementary and comprehensive prevention intervention to support and reinforce similar youth led initiatives.

³ www.ksacs.in/red-ribbon-club.php

RRCs make use of the following IEC/BCC materials (select list) and strategies and due recognition given to creative innovations⁴ using the following:

- CDs
- Training Manuals
- Exposure visits
- Glow sign box, stickers
- Handbills
- Hoardings
- Poster messages
- Video-on-wheels
- Wall paintings & wall writings
- Songs and Jingles
- Teasers

The strategies adopted to spread awareness by means of the above mentioned IEC materials include:

- Awareness campaigns
- Debates, Workshops, Seminars
- Leadership Training
- Public Meetings
- Intra- and Inter- University Competitions
- Cultural programmes (Folk art, street play, etc)
- Popular Personalities Involvement
- Positive Persons Presentation
- Exhibition
- Rallies
- Road shows
- Use of local cables (talk shows, phone-ins, etc.)
- Publicity in dailies, AIR, TV, etc.
- Counselling
- Inter-sectoral partnership
- Newsletters
- Leadership and Communication skill training

In the Red Ribbon Clubs, from among the enrolled members of the club, Sub-Committees in terms of its total strength are encouraged by grouping students according to their talents. For instance, those who have theatrical talents can form Theatre Committee; those who are good in writing as Writers Group; those who are good in speaking can form the Oratorical Group. Active RRC members are selected as leaders and representatives for planning and implementing out-reach activities in their surroundings⁵.

1.2 Need of the Study

UNICEF envisaged undertaking a survey to understand the effectiveness of IEC materials sent to the Red Ribbon Clubs (RRC) by UNICEF and any other IEC materials that may be present in

⁴ <http://www.ngogateway.org/ngo/bitstream/1/247/13/Annex%204%20red%20ribbon%20club%20and%20YFIC%20budget.doc>

⁵ <http://www.ngogateway.org/ngo/bitstream/1/247/13/Annex%204%20red%20ribbon%20club%20and%20YFIC%20budget.doc>

the RRCS in increasing knowledge about HIV and AIDS, as well as changing the attitudes and behaviors.

The present study may have manifold utility in providing insights to various stakeholders in terms of:

- Impact of these materials on knowledge, attitudes and risk perceptions;
- Identify modifications required, gaps (if any);
- Assess further material needs and the details thereof;
- Highlight supply chain management issues; and
- Provide guidance for further development and usage of IEC materials and suggest changes required (if any).

In the above context, ORG Centre for Social Research (a division of ACNielsen ORG MARG Pvt. Ltd.) to conducted the survey on IEC materials at Red Ribbon Clubs at the instance of UNICEF. The following sections outline the objectives, approach and methodology; sample achieved, research instruments, fieldwork, data processing procedures, etc that were followed for the survey.

1.3 Objective

The broad objective of the study was to understand the effectiveness of IEC materials supplied by UNICEF and other IEC materials present at the Red Ribbon Clubs in the states of Maharashtra, Karnataka, Andhra Pradesh, West Bengal and Gujarat.

The study aimed to provide answers to the following research questions:

- Are the materials sent to the RRCs relevant for the target audience and purpose for which they were intended?
 - Are the materials being used?
 - Does the target audience consider them relevant for themselves?
- Are there other materials displayed/being used other than the ones mentioned before? What are they?
- Are the materials sent to the RRCs effective in communicating the intended messages?
 - Does the target audience understand and recall the messages sought to be communicated through the materials?
 - Does the target audience like/dislike the materials? What do they like/dislike?
 - Are the visuals and written matter in the materials appropriate and appealing to the target audience?
 - What are the target audience's suggestions to make the materials more effective?
- What is the impact of the materials sent to the RRCs?
 - Is the target audience better informed on the issues relating to HIV and AIDS?
 - Have they had any impact on self risk perception, attitude towards those infected and safe behaviours?
 - Have they talked to anyone about it?

- Is the supply chain management system in place efficient?
 - Did the materials reach the RRCs?
 - Did they reach in a reasonable time?
 - Did they reach in good condition?
 - Is there storage space available to store them?
 - Who is in charge of keeping them/putting them up/ensuring they are used?
- What are the material gaps?
 - On what issues and for which target audience are the IEC materials required?
 - Are there any suggestions on content/appearance?

1.4 Methodology

Keeping in view the above issues to be addressed, extensive investigations were required at various levels viz. the beneficiary, peer educator and the stakeholder levels for collection of the relevant information for the research. The following sections describe the study coverage, research techniques and the sampling design to be adopted for the survey.

1.4.1 Geographical coverage

As indicated in the background section, the IEC materials were sent to five states. For the purpose of this study, one district was selected from each of these five states in line with the suggestions in the TOR. The selected districts are as below:

- Andhra Pradesh: Guntur
- Gujarat: Vadodara
- Karnataka: Raichur
- Maharashtra: Sangli
- West Bengal: Purulia

1.4.2 Target Groups

The respondents for the survey comprised the following target groups. These target groups played an important part in the functioning of the Red Ribbon Clubs:

- **Beneficiaries**
Young people who had ever participated in RRC activities as reported by Peer Educators (PE)
- **Peer Educators**
Educators identified for RRC activities
- **Stakeholders**
Sarpanch, teachers, Anganwadi workers, ASHA etc involved in RRC activities
- **RRC coordinators**
Those assigned by NGO to monitor the RRC programme

➤ **NGO coordinators**

Coordinators at the NGO level in charge of implementing RRC programme in the district

1.4.3 Research Techniques

A mix of quantitative and qualitative research techniques in the form of semi structured interviews were adopted for generating the required information for the study.

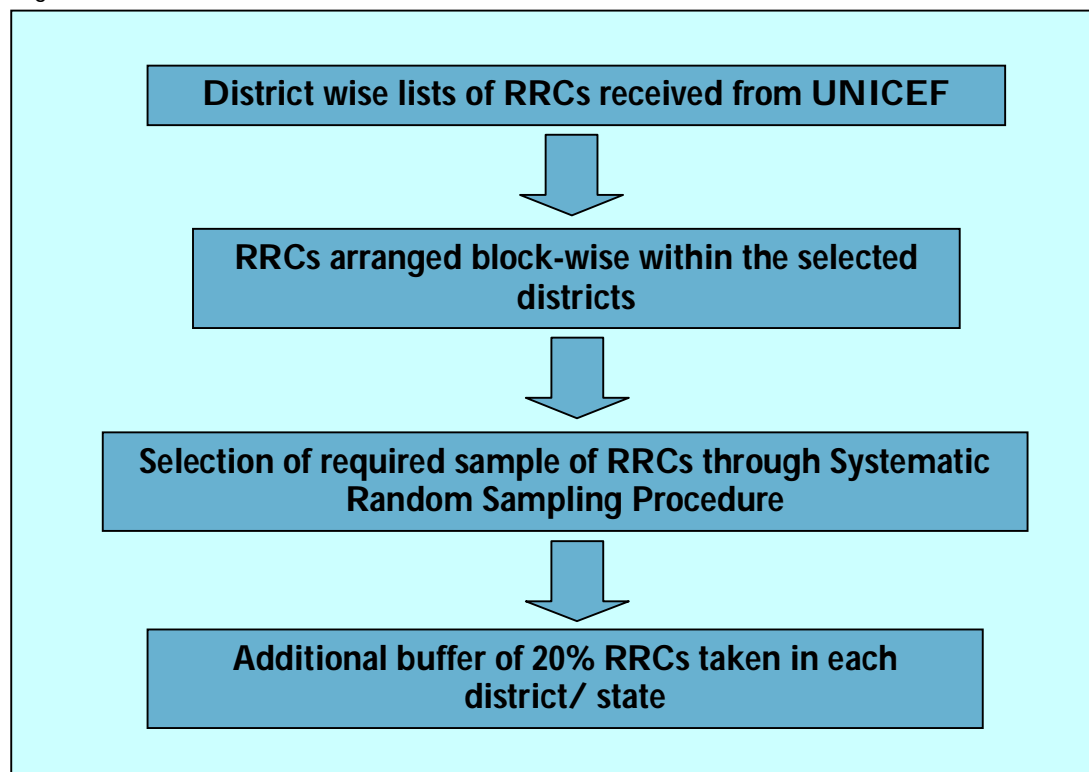
Semi structured interviews were conducted with all the target respondents like beneficiaries, peer educators, RRC coordinators, stakeholders and NGO coordinators. These interviews had a mix of structured as well as open ended questions for greater depth and understanding and substantiating the findings from the structured questions.

In addition, an observation exercise was also conducted at all the existing RRCs. A checklist was prepared for this purpose with various questions pertaining to availability, usage and positioning of the IEC materials provided by UNICEF. Observations were also made regarding the storage space and maintenance of these materials. Photographs were also taken of the RRCs that existed and wherever it was permitted by the in charges.

1.4.4 Sampling procedure

The following table presents the steps included in the sampling exercise for selection of Red Ribbon Clubs included in the study:

Figure 1: Selection of RRCs:



Selection of Beneficiaries and other respondents

For the purpose of selection of beneficiaries in any particular village, peer educators were first contacted and asked for the list of beneficiaries who were enrolled in the particular RRC. This list was thereafter divided in to two lists of male and female beneficiaries and the required sample of beneficiaries were then selected from this list using systematic random sampling procedure. Important to note here is that the lists of beneficiaries enrolled in the RRCs were only available in the state of Andhra Pradesh owing to the establishment of these RRCs in schools. Therefore, in these states where the list was not available, purposive selection of beneficiaries through peer educators had to be done. The other respondents like stakeholders, RRC coordinators and NGO coordinators were also contacted through peer educators.

However, after going into the field, the teams observed that in villages where the RRCs were no longer functional, it was sometimes difficult to find peer educators as they were unavailable or had moved out of the village for better work opportunities. In these cases, other key community members like Village Pradhan, teachers, ANM, AWW were contacted directly and beneficiaries were contacted through them. Important to mention here is that in such cases, coverage of the required number of beneficiaries and maintaining equal number of males and females could not always be possible.

1.4.5 Achieved Sample

A total sample of 90 RRCs was to be covered across the selected states as suggested in the ToR (See Annex 2). The following table (Table 1.1) gives details of the proposed and achieved number of RRCs (including 20% buffer) in each of the five states.

Table 1.1: Total number of RRCs contacted for the study

States	Proposed	Contacted
Andhra Pradesh	15	17
Gujarat	10	12
Karnataka	10	12
Maharastra	15	18
West Bengal	40	48
Total	90	107

As per the ToR, in each RRC, a sample of 10 beneficiaries (5 boys and 5 girls); four peer educators, two stakeholders were to be interviewed. Also, coordinators of NGOs looking after the activities related to RRCs were also interviewed across states. In addition, interviews were also conducted with the Coordinators at each RRC. Thus, the study aimed to altogether cover a sample of 900 young people, 360 peer educators, 90 RRC coordinators, 180 stakeholders and 64 NGO coordinators in all the five states.

The following table (Table 1.2) provides details of proportion of respondents covered in each state against the proposed sample.

Table 1.2: Total sample of target respondents achieved for the study

States	Beneficiaries		Peer Educator		RRC Coordinators		Stakeholders	
	No.	%	No.	%	No.	%	No.	%
Andhra Pradesh	150	100.0	54	90.0	14	93.3	27	90.0
Gujarat	61	61.0	23	57.5	7	70.0	14	70.0
Karnataka	80	80.0	9	22.5				
Maharashtra	61	40.6	16	26.6	11	73.3	11	36.7
West Bengal	320	80.0	89	55.6	29	75.0	30	37.5
Total	703	78.1	191	53.0	61	70.0	82	45.6

1.5 Research Instruments

Semi structured interviews schedules containing both close and open ended questions were developed for all the target respondents as mentioned below:

- Beneficiaries
- Peer educators
- RRC coordinators
- NGO coordinators
- Stakeholders

Apart from the above, checklists for observations of RRCs were also developed to gain an insight into the availability and storage facilities available for IEC materials.

While closed ended questions provided factual information, open ended ones provided greater depth and understanding in addition to substantiating the findings from the closed ended questions. For the observation exercise, which was conducted at all the existing RRCs, the checklist comprised of various questions pertaining to availability, usage and positioning of the IEC materials provided by UNICEF. Observations were also made regarding the storage space and maintenance of these materials. Photographs were also taken of the RRCs that existed and wherever it was permitted by the in charges.

All the tools developed for the survey were pre tested in five RRCs of Gujarat and the findings of the pre testing exercise were utilized for finalization of the tools. Final tools were used for the survey after receiving approval on the same from UNICEF. Translations were done into the regional languages of all the five states included in the survey and bilingual schedules were used for the study.

1.6 Recruitment, Training and Fieldwork

Recruitment of field staff

While selecting the field staff, it was ensured that skilled male and female candidates with prior experience of social research are recruited. Further, efforts were also made to recruit fieldworkers who have previous experience of conducting RCH/HIV/AIDS studies. Keeping in mind the dropout rate, 20 percent extra candidates were recruited and trained. A total of 11 field teams were recruited across the five states to complete the entire field work within the stipulated time period of two weeks. Each field team recruited for the survey had one supervisor, 2 female interviewers and 2 male interviewers.

Training of field staff

A training of the trainers (ToT) was organized for one day in Delhi for all the team members and Field Executives. During the ToT all the questionnaires developed for the study and the research methodology was discussed in detail. The professionals and the field executives who had participated in the ToT thereafter imparted training to field staff in the five selected states. Training was organised in 5 locations namely Hyderabad (Andhra Pradesh), Baroda (Gujarat), Bangalore (Karnataka), Kolhapur (Maharashtra) and Kolkata (West Bengal).

The training of field teams comprised both classrooms as well as field practice. In the classroom training sessions, apart from background and objectives of the study, instructions in interviewing techniques, field procedures for the survey, important knowledge about HIV/ AIDS, the contents of the questionnaire were discussed in great detail. Mock calls were also conducted in the classroom before taking them to field for trial calls. Trial calls by supervisors and interviewers were made in order to ensure a clear understanding of each item in the tools.

Fieldwork and monitoring

The fieldwork was carried out simultaneously in all the states covered in the study. As also mentioned earlier, a total of 11 teams- each team consisting of 1 supervisor, 2 male and 2 female investigators were deployed to complete the field work in all the five states within the stipulated time.

A letter was issued by UNICEF endorsing the study and asking all stakeholders to extend their support and cooperation to the team from ORG Centre for Social Research during the fieldwork. All investigators were advised to carry this letter with them for all interview calls/ meetings during the course of the study and produce it to the respondents/ other stakeholders as and when required.

For proper monitoring of fieldwork and ensuring the quality of data collected, emphasis was laid on regular scrutiny of questionnaires by the supervisors, revisit to the respondents in case of discrepancies, on the spot observations of some interviews carried out by the field staff, visit of the concerned research professionals for monitoring the fieldwork and providing technical guidance to the field staff.

1.7 Data processing and analysis

The data from all the five states was handled at Baroda where a senior system analyst with the support of a programmer monitored the data entry.

Before data entry each and every questionnaire was scrutinized with respect to completeness and consistency of the questionnaires and coding of open ended questions. The scrutiny and coding of the questionnaires was initiated one week after the launch of field work. All office editors and supervisors were briefed about scrutiny and coding procedures. The core study team members also supervised the entire scrutiny operation for monitoring the quality output.

The data entry operation was carried out using data entry and editing software CS Pro. The data entry operation was initiated within one week of receiving the first set of completed questionnaires. Computer based checks were used to clean the data and the inconsistencies were resolved on the basis of the responses recorded in the questionnaires. The system analyst for the study as well as the core study team members closely monitored the data entry operations.

The core team members and the system analyst under the guidance of the team leader prepared the analysis/tabulation plan. The analysis plan was finalized in consultation with UNICEF and the required tables were generated using latest version of SPSS.

1.8 Field Problems and Limitations

Every study has a set of problems and limitations that need to be overcome for successful completion of the study. Even in this study there were certain problems that were faced and have been talked about in the following paragraphs.

A major limitation encountered during the study was that majority of the RRCs were non functional at the time of the survey. The situation was much worse in Raichur (Karnataka), Purulia (West Bengal) and Sangli (Maharashtra). While in Raichur and Sangli, the programme was reported to have never taken off in a big way after its inception in 2007, in Purulia the programme started in most RRCs in June 2006 and got over in December 2007. Even in Gujarat, the programme had ended in December 2008. Consequently in all these cases, it was very difficult to locate RRCs and the target respondents. Many of the peer educators and beneficiaries had migrated out of their villages or got married thus affecting the achievement percentage of the sample.

Only in Guntur (Andhra Pradesh) was the programme found to be functional. However, here the shortcoming was that the programme was started under the Nation Child Labor Eradication Programme (NCLP). As a result, RRCs were set up in schools and young children, even 10 years of age were the beneficiaries and their teachers acted as peer educators. While peer educators should ideally be the same age group as the beneficiaries they interact with, in Andhra Pradesh the teachers were identified as 'educators' instead of 'peer educators'. After an initial round of explanations about the messages, the IEC material was mainly used for the purpose of recreation in free time of the young students. The beneficiaries as a result felt that the messages provided were not relevant to their age group and were meant for 'older people'.

In the states of West Bengal, Karnataka and Maharashtra we had to contact the beneficiaries and peer-educators who had earlier been involved with the RRCs activities when they were functional. Most of the peer-educators trained for the job were currently not involved in the programme and in many of the cases they were not available. Availability of female beneficiaries and female peer educators was a major problem in all states except Andhra Pradesh.

Further, the teams also faced difficulty in conducting interviews with stakeholders as their involvement in the programme was limited.

1.9 Presentation of the Report

The results of the study are presented in the seven chapters. The first chapter outlines the objectives, methodology, sampling and sample coverage of the study. The second chapter provides the details of profile of the RRCs as well as all the respondents covered in the study. Chapter three presents the findings on the knowledge and attitude of beneficiaries as well as peer educators about HIV/ AIDS. Chapter four outlines the awareness, participation and involvement of all respondents in the activities of the RRCs. In the fifth chapter the experiences of beneficiaries and peer educators with specific IEC materials supplied by UNICEF have been discussed. Chapter six explores the exposure of other stakeholders like RRC coordinators, NGO coordinators as well as stakeholders like Sarpanch etc to these specific IEC materials. Chapter seven in the end highlights the conclusions and recommendations as an outcome of this study.

CHAPTER 2

Profile of RRCs and Respondents

This chapter begins with discussing the profile of the Red Ribbon Clubs. Details like the year of formation of these RRCs, their location; supply, availability, usage, storage and adequacy of IEC materials have been discussed in this chapter. This is followed by a section on the profile of respondents which discusses details like gender, age, social category, educational status etc.

In case of the peer educators' profile, apart from details like their age, gender, social category and educational status, details of training(s) they have received under the RRC programme and their experience as a peer educator has also been discussed. The chapter ends with a brief discussion on the profile of other respondents like RRC coordinators, NGO coordinators as well as stakeholders like Sarpanch, teachers, ANM, AWW etc who were covered in the study.

2.1 Profile of Red Ribbon Clubs

Observation exercise of the Red Ribbon Clubs could be conducted in 66 out of the total of 107 covered in the study. The reason for not carrying out observations in the remaining RRCs was that either the RRC activities were not taking place there at all or RRCs had no definite place of functioning which could have been observed. In the latter case, the IEC materials were moved from one peer educator's house to another's.

The year of formation of about half of these RRCs was 2007, followed by more than one-third (37%) which were formed in the year 2008.

Observations at the RRCs revealed that more than half of the RRCs did not have a separate room for IEC activities.



There was no uniform location from where the RRCs functioned. While in Andhra Pradesh RRCs functioned from NCLP schools and youth centres, in Gujarat and West Bengal it was youth information centres or youth clubs. In Karnataka the RRCs functioned from Peer educators home and in Gujarat RRCs functioned from RRC coordinators home and even from PHCs. The following table presents the location of RRCs in the different states:

Table 2.1: Location of RRCs in different study states

	Andhra Pradesh	Gujarat	Karnataka	Maharashtra	West Bengal
Location of RRCs	<ul style="list-style-type: none"> ▪ Local schools, ▪ Youth centres 	<ul style="list-style-type: none"> ▪ Youth information centres 	<ul style="list-style-type: none"> ▪ Peer educators' homes 	<ul style="list-style-type: none"> ▪ Sampurna Siksha Kendra, ▪ PHCs, ▪ RRC coordinators' homes 	<ul style="list-style-type: none"> ▪ Youth clubs, ▪ Youth Information Centres

The average number of beneficiaries enrolled in the RRCs ranged from 24 in Maharashtra to 68 in Andhra Pradesh.

Supply of IEC materials

Table 2.2 presents the supply of IEC materials to RRCs in the different study states. While Andhra Pradesh was supplied with all kinds of IEC materials developed by UNICEF, Gujarat only had the supply of Carom boards.

Table 2.2 Supply of IEC materials to different study states

IEC materials	Andhra Pradesh	Gujarat	Karnataka	Maharashtra	West Bengal
Fun & Dragon	✓		✓		✓
Carom Board	✓	✓		✓	✓
Memory game	✓		✓	✓	✓
Playing Cards	✓		✓	✓	✓
Posters (any)	✓		✓	✓	

Availability of IEC materials at RRCs

This was assessed through the observation exercise conducted by the field teams. Table 2.3 presents the availability, usage, adequacy and storage condition of IEC materials in different study states. However, Karnataka has not been presented as observation of IEC material was not feasible in the selected RRCs in Raichur district as none of the RRCs had any set up. It was reported by peer educators as well as NGO coordinators in Karnataka that peer educators were trained directly by the NGO and the RRCs were functioning from the homes of these PEs. At present however, none of the RRCs were functional though the games were being played from the homes of PEs.

Table 2.3 Availability, usage, adequacy and storage condition of IEC materials in observed RRCs of different study states

Particulars	Andhra Pradesh (N=15)	Gujarat (N= 10)	Maharashtra (N= 10)	West Bengal (N= 31)
Availability	<ul style="list-style-type: none"> -Almost all had Carrom board & Fun and Dragon; - Playing cards in 2 RRCs only -Posters not available in any RRC 	<ul style="list-style-type: none"> Except for Carrom boards (7), other materials were not available 	<ul style="list-style-type: none"> 8 RRCs had carrom board; other games & posters available only in 3-4 RRCs 	<ul style="list-style-type: none"> Carrom board & Fun and Dragon (>26 RRCs); Playing Cards (21 RRCs); Memory Games (14 RRCs); Less than 1/3rd had posters

Particulars	Andhra Pradesh (N=15)	Gujarat (N= 10)	Maharashtra (N= 10)	West Bengal (N= 31)
Usage	All the available materials were in use	All were in use. The messages had faded/worn out in few centres	All were in use. The messages on Carrom Boards in a few centres were in Gujarati	Use of Carrom Board was highest (23 RRCs) followed by Fun & Dragon Game (19 RRCs) and Playing Cards (16 RRCs).
Adequacy	IEC material was felt inadequate at almost all RRCs	Adequacy was reported at all centres	5 centres reported inadequate supply of material	Inadequacy of materials was reported at almost all RRCs (29)
Storage Condition	4 RRCs had separate storage facility	None of the RRCs had any separate storage facility	4 RRCs had separate storage facility	About half did not have any separate storage facility

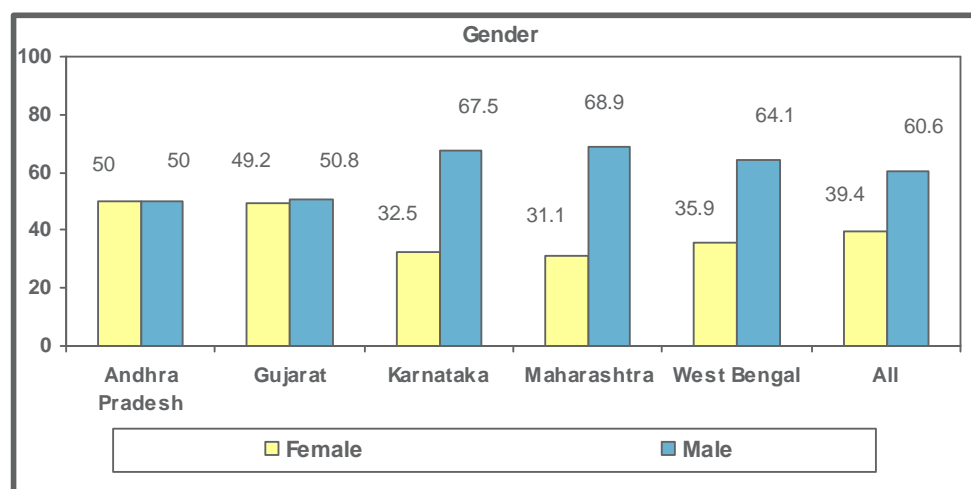
2.2 Profile of Beneficiaries

Beneficiaries included in the study were young people who according to the Peer Educators had ever participated in the activities of the RRC. Efforts were made to include both males as well as female beneficiaries in the study. However, as mentioned in the introduction chapter, it was difficult to cover female beneficiaries in all states except Andhra Pradesh and Gujarat. The ensuing sections describe in detail profile of the beneficiaries covered in the survey.

Gender

As presented in Figure 2.1, overall three- fifths of the beneficiaries were males. Across states, the coverage of males and females was more or less equal in the states of Andhra Pradesh and Gujarat. As mentioned in the earlier chapter, since majority of the RRCs were not functional the field teams made efforts to cover people who had in the past been beneficiaries. However, it proved to be difficult as many of the female beneficiaries had been married and/ or migrated out of their village. In addition, it was observed that there were relatively more male than female beneficiaries in most RRCs.

Figure: 2.1: Percentage distribution of beneficiaries by gender (N= 672)



Age

The mean age of the beneficiaries was 18 years. Almost all of the beneficiaries were below the age group of 25 years (Table 2.4). Across states, this percentage was similar except in Andhra Pradesh where the mean age of beneficiaries was 14 years. This was because of the RRC being set up in schools under the National Child Labor Eradication Programme (NCLP) which mainly had adolescents as students.

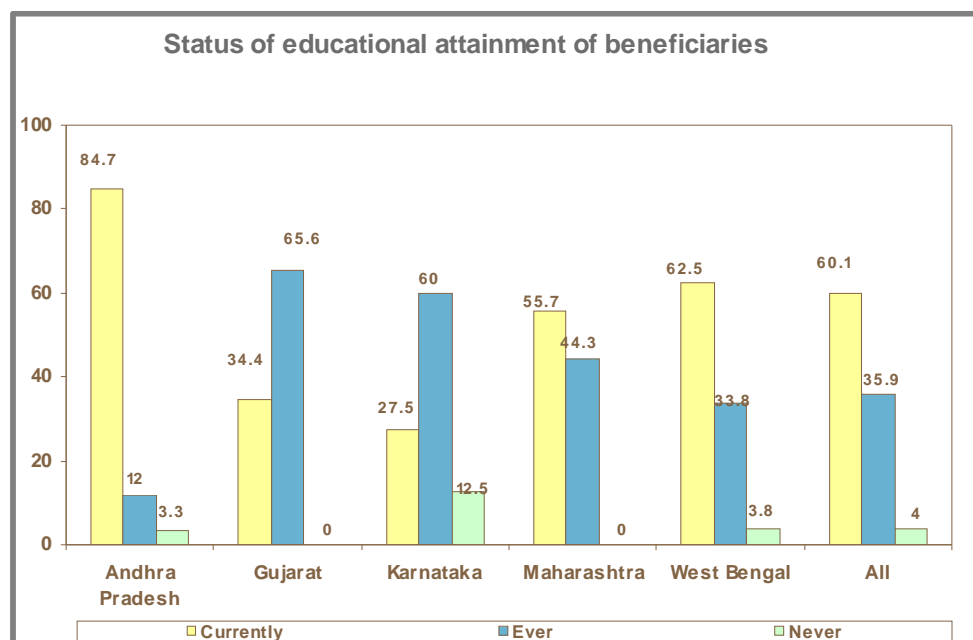
Table 2.4: Percentage distribution of beneficiaries by age (in years)

Age	Andhra Pradesh	Gujarat	Karnataka	Maharashtra	West Bengal	All
10- 15	87.3	4.9		1.6	30.9	34.8
16- 20	8.0	37.7	37.5	59.0	41.6	34.8
21- 25	4.7	36.1	45.0	23.0	27.5	24.9
26- 30		14.8	16.3	9.8		4.2
31 and above		6.5		6.6		1.1
DK/CS			1.3			0.1
Mean age	13.6	22.3	22.1	20.8	17.9	18.1
Total N	150	61	80	61	320	672

Educational Status

Figure 2.2 presents the status of attainment of education of beneficiaries. Three-fifths of the beneficiaries were currently studying at the time of the survey. Across states, this percentage was highest in Andhra Pradesh (85%) and lowest in Karnataka (28%). About 4 percent of the beneficiaries of RRC program had never attended any educational institution. Highest proportion of beneficiaries currently attending school in Andhra Pradesh is attributed to the fact that the RRC program was being implemented in NCLP schools there.

Figure 2.2: Status of educational attainment of beneficiaries (N=672)



Social Category

About one-thirds of the beneficiaries belonged to the other backward classes (35%). This was followed by about 28 percent from the general category and one-fourths from the scheduled castes. About 12 percent belonged to the scheduled tribe. This is indicative of the efforts of the programme to reach out to beneficiaries from all social categories.

2.3 Profile of Peer Educators

Peer educators (PEs) covered in the study were those who had been identified for the RRC activities. Interestingly, while majority of these respondents were peers of beneficiaries who had been identified to be their educators, in Andhra Pradesh these were teachers of NCLP schools

who were identified to play the role of 'peer educators'. A total of 191 peer educators were covered for the study.

Figure 2.3: Peer Educators' Profile At a Glance

- **Age:** The mean age of peer educators was 25 years
- **Education:** Majority were 10th standard and above
- **Training received**
 - > 2/3rd received training at NGO or local school
 - Av. Duration of training: 5 days
 - Main topics covered in training:
 - Basic knowledge about HIV/AIDS (63%-86%)
 - Effective usage of IEC material (32%)
 - Counselling (15%)
 - Roles and Responsibilities of PEs (33%)
 - Aims and objectives of Programme (16%)
- **Perception on main roles and responsibilities**
 - Create awareness in the community
 - Educate youth about HIV testing facility & Condom* use

* Exceptionally high in Gujarat

Age and Gender

The mean age of the peer educators overall was 25 years (Figure 2.3). As shown in Table 2.5, the number of male and female peer educators covered in the study was almost equal (53% males and 47% females). Except in Andhra Pradesh, field teams faced more difficulties in contacting the female peer educators in other states as they had either been married outside village or migrated outside village with family for work. In Andhra Pradesh, the teachers of NCLP Schools who were the peer educators were mainly females and therefore more females were covered there as compared to male PEs.

Table 2.5: Gender of peer educators by state

Age	Andhra Pradesh	Gujarat	Karnataka	Maharashtra	West Bengal	All
Females	39	8	3	9	31	90
Males	15	15	6	7	58	101
Total N	54	23	9	16	89	191

Social Category

About 30 percent of the peer educators belonged to the other backward classes (56). This was followed by about 28 percent from the general category (53) and 23 percent from the scheduled castes (43). About 19% belonged to the scheduled tribe (37).

Educational Status

None of the peer educators were found to be illiterate. Majority of them had attained education till 10th class or more.

Appointment and Experience

On an average, the peer educators had worked at the RRC for about 16 months. Close to half (94) had come to know about the existence of RRC from the local NGO working in their area followed by a member of the Panchayat informing them (44). More than one- thirds of the PEs perceived that they had been selected for this programme because of the popularity they enjoy among the community members (66) followed by their knowledge about HIV/ AIDS (54). About one-fourths (48) of the peer educators felt that they were selected as they must have passed some selection criteria (Figure 2.3).

Details of training

More than two-thirds (132) of the peer educators had received some training when they joined the programme as a peer educator (Figure 2.3). The duration of these trainings on an average was about five days. The main topics covered in these trainings were 'various aspects related to basic knowledge about HIV/AIDS' (83- 114), Roles and Responsibilities of PEs (43), effective usage of IEC material (42), Aims and objectives of Programme (21), Counseling (20). Almost all of the PEs who had received training felt it was useful (129) and more than half (72) felt the need for more training. Close to three- fifths (42) of those who wanted additional training felt it should be refresher training on HIV, STI's etc.

2.4 Profile of RRC coordinators, Stakeholders and NGO coordinators

RRC Coordinator

Overall, 61 RRC coordinators were covered in the study. A majority of them had studied up to high school or above (46). Four-fifths of these respondents had received training under RRC programme. The main topics covered in this training were: knowledge regarding HIV/ AIDS (41), counseling (21), aims

Figure 2.4: RRC coordinators' Profile at a Glance (N=61)

- **Education:** Majority had studied up to high school or above (46)
- **Training received**
 - 4/5th had received training under RRC programme
- **Main activities of RRC coordinators:**
 - Establish RRCs/enrolling student members (27)
 - Sensitization programme for teachers & parents (30)
 - Identify & train peer educators (29)

and objectives of the RRC programme (13), roles and responsibilities of an RRC coordinator (11). Almost all of these respondents felt that the training was useful and more than three-fifths felt there should be more training like this mainly as a refresher course. The main roles and responsibilities played by RRC coordinators were establishing RRCs/enrolling student members (27), sensitization programme for teachers & parents (30) and identifying & training peer educators (29).

Stakeholders

As depicted in Figure 2.5, a total of 82 stakeholders were interviewed for the present study.

As mentioned in the introduction chapter, only those stakeholders were covered who had been associated with the RRCs and/ or their activities. As regards their profile, most of them were educated up to high school or above

(56) and almost all were aware about RRCs in their villages (81). When asked regarding their perception about the target group of the RRC programme, more than half (46) felt it catered only to adolescents followed by less than one- thirds who felt it was meant for all target groups. Most of these stakeholders (67) had participated in the activities of the RRC. These activities mainly included support in providing AIDS related information to young people (22), help in conducting IEC activities by RRC (10), motivating parents to send their children to RRC (10).

Figure 2.5: Stakeholders' Profile at a Glance (N= 82)

- **Education:** Mostly educated up to high school or above (56)
- **Perception about target group:**
 - More than half (46) felt it catered only to adolescents
 - Less than 1/3rd felt it was meant for all target groups
- **Participation in RRC activities (67):**
 - Support in providing AIDS related information to young people (22)
 - Help in conducting IEC activities by RRC (10)
 - Motivate parents to send their children to RRC (10)

NGO Coordinators

Coordinators of 7 NGOs were contacted in all the study states. All of these NGOs were more than 10 years old. The coordinator of the NGO coordinating RRC activities in Purulia district (West Bengal) was the only one reporting to have received any training related to Red Ribbon Clubs. Coordinators of the following NGOs in the study districts of the five states were contacted:

- Andhra Pradesh:
 - Social Education and Economics Development Society (SEEDS), Address: P.O.Box # 249, Door No.4-16-25/3, Bandlamudi Complex , Near Andhra Bank (Srinagar Branch), Amaravati Road, Guntur-522002
- Gujarat:
 - Shroff Foundation Trust (SFT), Adress: Head Office: Kalali Village, Near Baroda City , Gujarat
 - Pratikar Trust, Address: A/13 Gokul Vatika Society, Near Nava Bus Depot, Savli.

- Baroda Citizen Council (BCC); Address: Near MCDonald, O.P.Road, Baroda.

- Karnataka:
 - SEVA (Social Education & Vocational Association), Address: 12-11-110/1 Oppo. Turab Ali Baba Dargah, Arab Maholla, Raichur- 58410, Karnataka.

- Maharashtra:
 - Yerla Project Society, Yerla Bhavan- Near Guest House, Sangali Miraj Road Vishram bag Sangali 416415

- West Bengal:
 - Gandhi Memorial Leprosy Foundation, Address: P.O- Rangadih,Ps -Balarampur, Purulia, West Bengal

Apart from their regular work, these NGOs were involved in distribution of IEC materials supplied by UNICEF to the RRCs in their area.

CHAPTER 3

Knowledge and Attitude regarding HIV/ AIDS

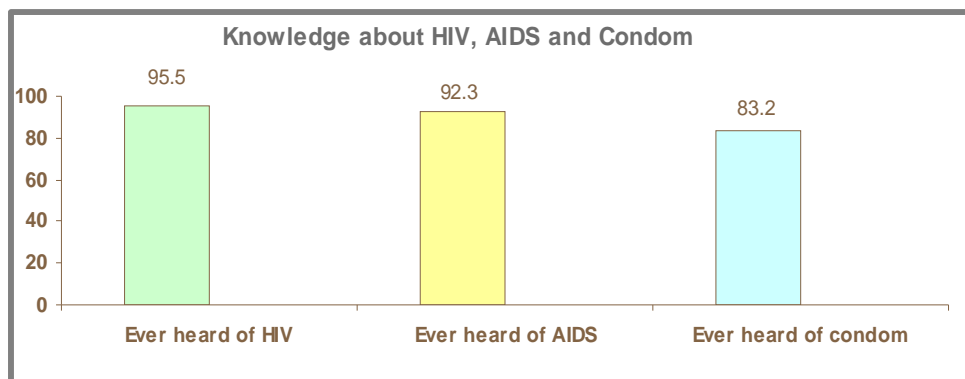
The present chapter aims to provide an insight into the awareness and knowledge of beneficiaries covered in the study regarding HIV/ AIDS and related issues. The ensuing sections begin by discussing the awareness levels of beneficiaries about HIV, AIDS and condom. Following this, the beneficiaries' knowledge regarding HIV/ AIDS has been discussed with respect to transmission and prevention of the infection. Further, various common myths related to HIV/ AIDS have been talked about and the beneficiaries' opinion on the same has been discussed.

This chapter also delves into the attitudes of beneficiaries regarding people living with HIV/ AIDS as well as about safe behaviors related to HIV/ AIDS. Finally, the chapter ends with a discussion on the self risk perception of beneficiaries as well as peer educators.

3.1 Awareness about HIV, AIDS and Condom

Overall, almost all of the beneficiaries covered in the study were aware about HIV followed by about 92 percent who were aware about AIDS (Figure 3.1). About 83 percent of them had ever seen or heard of a condom. This percentage was highest in Maharashtra (100%) and lowest in Andhra Pradesh (62%). While Maharashtra, especially district Sangli which was selected for the study has a high prevalence of HIV/ AIDS and therefore is likely to have received a lot of intervention on HIV/ AIDS, in Andhra Pradesh, the age group of the beneficiaries is likely to be a deterrent in their awareness regarding condoms.

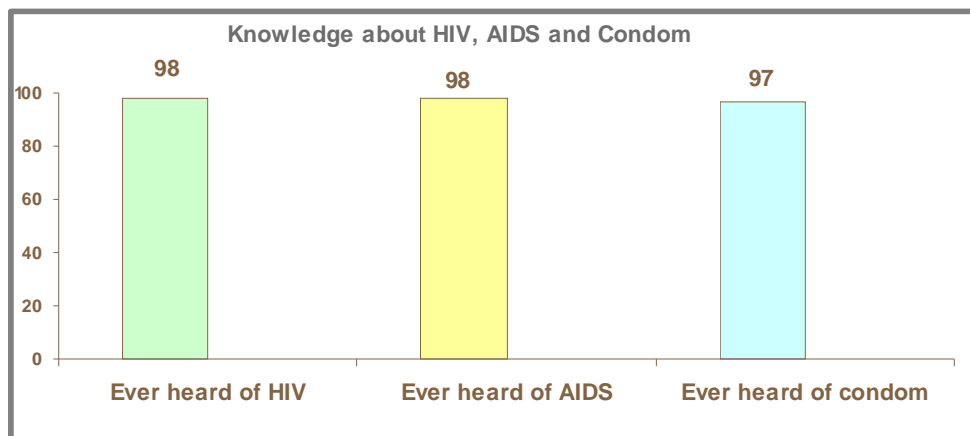
Figure 3.1: Percentage distribution of beneficiaries by their knowledge about HIV, AIDS and condom



More than one-third of the beneficiaries (37%) were aware about Integrated Counseling and Testing Centres (ICTCs). Among the peer educators, almost all had heard of HIV, AIDS and condom.

When peer educators were asked regarding their awareness (Figure 3.2) about HIV, AIDS and condoms, almost all had heard of HIV (187), AIDS (188) and condom (186). Further, almost three fourth of the PEs had heard of ICTCs (141).

Figure 3.2: Percentage distribution of peer educators by their knowledge about HIV, AIDS and condom



3.2 Knowledge about HIV/ AIDS transmission and prevention

Figure 3.3 presents the knowledge of beneficiaries regarding the main issues related to HIV/ AIDS transmission and prevention. As depicted, beneficiaries were aware about the transmission of HIV/ AIDS in the range of 68 percent (aware about transmission of HIV through sexual contact) to 86 percent (aware about transmission of HIV through sharing a needle with an infected person).

Apart from these, one-third of the beneficiaries (74%) were aware that sex with more than one partner can lead to HIV infection. Almost three fifth (59%) of them felt that a person suffering from sexually transmitted infections has a high chance of HIV/AIDS exposure.

About 71 percent of the beneficiaries had correct knowledge that they should use condom every time they have sex to prevent HIV infection. Almost three-fifths of these respondents agreed that having one uninfected faithful sex partner can help in HIV prevention (Figure 3.3).

Figure 3.3: Knowledge of beneficiaries about HIV/ AIDS

Modes of transmission:

- Sharing needle with infected person: 86%
- Infected blood transfusion: 84%
- Vertical transmission: 69%
- Sexual contact: 68%

Preventive measures:

- Using condom every time having sex: 71%
- Having one uninfected faithful sex partner: 59%

Table 3.1 presents a number of statements presented to the beneficiaries regarding HIV/ AIDS to understand their knowledge and understanding of issues related to the topic. The responses of the beneficiaries were elicited on a three point scale: agree, neither agree nor disagree and disagree.

Nine tenths of the respondents agreed that one should always use a new needle or get it sterilized (90%) followed by 86 percent agreeing that before donating blood one should make sure that he/she is tested for HIV. Almost four- fifths of the beneficiaries felt that Sex without a condom is the greatest cause of HIV transmission. Least proportion of respondents overall had knowledge that it can take 8- 12 years for an HIV infected person to develop AIDS symptoms (44%).

Table 3.1: Percentage distribution of beneficiaries agreeing to some statements regarding HIV/ AIDS

	Andhra Pradesh	Gujarat	Karnataka	Maharashtra	West Bengal	Total
Sex without a condom is the greatest cause of HIV transmission	54.7	78.7	96.3	90.2	84.1	79.0
Using a condom every time during sex reduces the risk of HIV	44.7	85.2	92.5	96.7	81.9	76.5
Sex with out condom even once poses the risk of HIV	46.0	75.4	56.3	80.3	78.1	68.3
Having sex under the influence of alcohol poses the risk of HIV	33.3	62.3	20.0	75.4	69.4	55.4
Before donating blood one should make sure that he/she is tested for HIV	83.3	86.9	61.3	100.0	90.0	85.7
One should always use a new needle or get it sterilized	92.0	90.2	72.5	100.0	92.2	90.3
HIV can strike anyone	68.7	77.0	60.0	96.7	79.7	76.2
It can take 8- 12 years for an HIV infected person to develop AIDS symptoms	18.0	47.5	38.8	86.9	48.1	43.8
One should not have any discrimination towards a HIV positive person	62.7	72.1	71.3	100.0	80.3	76.3
One can be HIV infected and yet may not be aware of it	48.7	57.4	50.0	83.6	75.9	65.8
Taking drugs is injurious to health	30.0	90.2	22.5	100.0	85.9	67.6
Total N	150	61	80	61	320	672

As expected, almost all of the peer educators had good knowledge about the spread and prevention of HIV infection.

3.3 Myths regarding HIV/ AIDS

To understand the knowledge of people regarding any particular issue requires an understanding into their opinion on the myths related to the issue in question for better insight. Therefore in this case, common myths related to HIV/ AIDS were discussed with the beneficiaries of Red

Ribbon Clubs and efforts were made to understand what the respondents felt regarding the same (Table 3.2).

The study revealed that the majority of the beneficiaries did not believe in the common myths surrounding spread of HIV/ AIDS. Overall, almost two- thirds (65%) of the beneficiaries knew that a person can not get HIV/AIDS by sharing a meal with someone who is infected. About 85 percent of the beneficiaries correctly felt that HIV/AIDS does not spread through touching each other or social interaction.

About 67 percent of the beneficiaries knew that that a healthy-looking person can also transmit HIV/AIDS and more than four- fifths (82%) of them knew that there is no medicine that can cure HIV/AIDS. These findings regarding the myths surrounding transmission of HIV were similar across peer educators as well.

Table 3.2: Percentage distribution of beneficiaries by their belief in certain common myths related to HIV/ AIDS

	N	%
Can a person get HIV by sharing a meal with someone who is infected?		
Yes	142	21.1
No	438	65.2
Don't Know / Can't Say	92	13.7
Can HIV/AIDS spread through touching each other or social interaction?		
Yes	104	15.5
No	466	69.3
DK/ CS	102	15.2
Do you think that a healthy-looking person can also transmit HIV?		
Yes	451	67.1
No	83	12.4
DK/ CS	138	20.5
Do we have any medicine that can cure a HIV/AIDS patient?		
Yes	122	18.2
No	379	56.4
DK/ CS	171	25.4
Total	672	100.0

3.4 Attitude towards HIV/ AIDS and related issues

Certain statements were presented to the respondents and their responses taken on a three point scale: Agree, neither agree nor disagree or disagree. Respondents could also report that they do not know about these statements, in which case a fourth code was used. This was done to assess how many respondents did not know about the issue in question.

Beneficiaries' attitude towards those affected

More than three- fourths of the respondents (76%) agreed that one should not discriminate against those affected with HIV/ AIDS (Figure 3.4).

About two-thirds (66%) agreed that with love and affection, one can help HIV positive person lead a normal life and about 66 percent felt that an HIV positive person can lead a normal life. This presents a healthy pattern regarding the attitude of these beneficiaries of Red Ribbon Clubs towards people affected with HIV/AIDS.

Figure 3.4: Beneficiaries' attitude at a glance

- **Attitude towards those affected:**
 - One should not discriminate against those affected with HIV/AIDS: 76%
 - With love and affection, one can help HIV positive person lead a normal life: 66%
 - HIV positive person can lead a normal life: 63%
- **Attitude towards safe behaviour:**
 - Early marriage should not be supported: 95%
 - Pregnancy can be risky at an early stage: 75%
 - One should know his/ her HIV status to live life responsibly: 82%

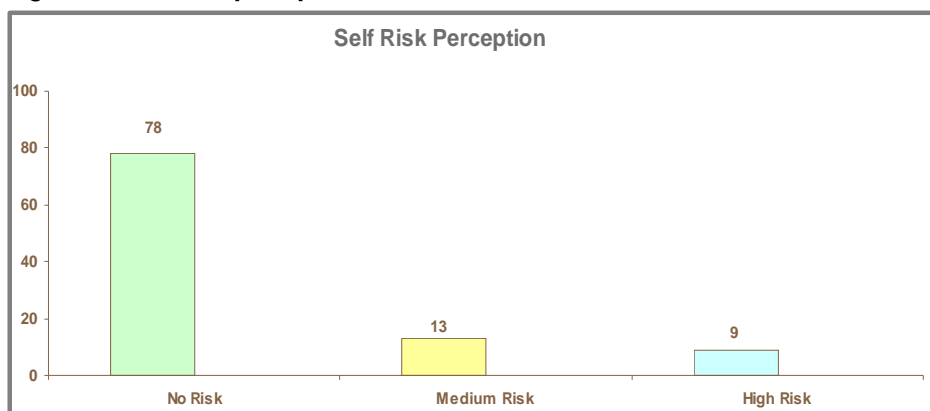
Beneficiaries' attitude towards safe behaviors

As shown in Figure 3.4, almost all of the beneficiaries agreed with the statement that 'Early marriage should not be supported' (95%). Most of the respondents felt that one should know his/ her HIV status to live life responsibly and that the right knowledge about HIV may save their life as well as their friends' (82% each).

3.5 Self risk perception

As depicted in Figure 3.5, a little less than four-fifths of the beneficiaries felt that they were at no risk of contracting HIV. Overall, less than one-tenth of the beneficiaries felt that they were at a high risk of contracting HIV.

Figure 3.5: Self risk perception of beneficiaries



As regards the peer educators, almost all of these respondents across all states were of the opinion that they were at no risk of HIV infection (186 out of 191). Interestingly, none of these respondents perceived themselves to be at high risk of contracting HIV infection.

CHAPTER 4

Participation in RRC activities

The present chapter provides a detailed account of involvement and participation of beneficiaries in the activities of the RRCs. Along with discussing the participation of beneficiaries in the activities, the chapter also presents perceived role and responsibilities of Peer Educators, stakeholders, RRC Coordinators and NGO Coordinators in facilitating the beneficiaries into the programme activities.

4.1 Participation of beneficiaries in RRC activities

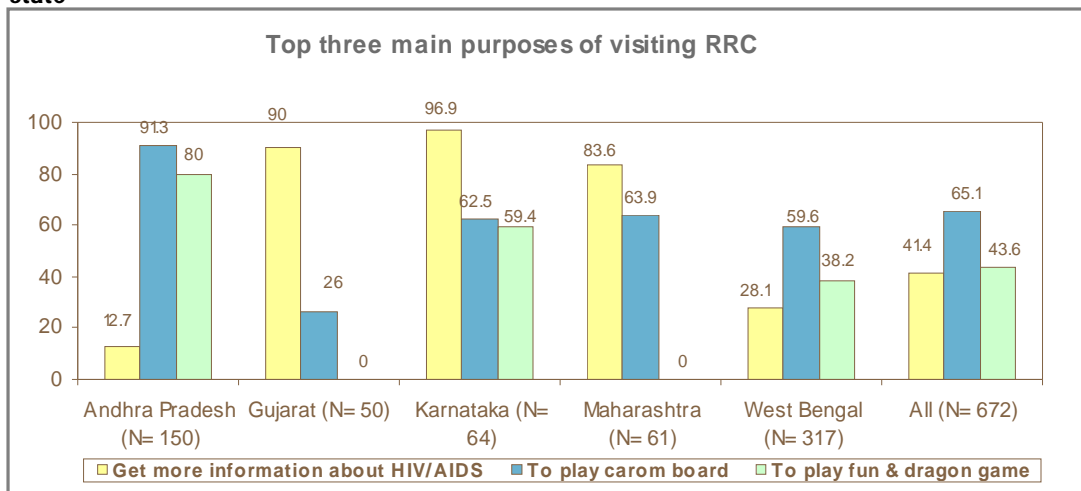
Purpose for which the beneficiaries visited RRCs

As presented in Figure 4.1 below, playing carom board (65%) followed by playing fun and dragon game (44%) and getting more information about HIV/ AIDS (41%) comprised the top three purposes of visiting the RRCs.

Analysis by study states revealed that, playing carom board was reported by highest proportion of beneficiaries in Andhra Pradesh (91%), followed by Maharashtra (64%), Karnataka (63%) and West Bengal (60%). This proportion was very low in Gujarat (26%). As in case of carom board, Fun and Dragon also seemed to be very popular in Andhra Pradesh and Karnataka with 80 and 59 percent of the beneficiaries having reported it to be the main purpose of visiting RRC respectively. In Gujarat and Maharashtra Fun and Dragon game was not supplied to RRCs, hence it has not appeared as the purpose behind beneficiaries visiting RRCs. High proportion of beneficiaries visiting RRCs with the purpose of getting more information about HIV/AIDS in Gujarat (90%), Karnataka (97%) and Maharashtra (84%) revealed their eagerness to know about the disease rather than playing games.

It may also be mentioned at this juncture that in Andhra Pradesh, the age of the beneficiaries was low compared to other states, and in West Bengal, the RRCs had been set up at youth clubs which were mainly formed to organize Durga Puja and other cultural events. Therefore in these two states getting information on HIV/ AIDS may not have been the main reason for visiting the RRC by many of these beneficiaries.

Figure 4.1: Percentage distribution of beneficiaries by top three purposes of visiting RRCs by state



4.2 Perceived roles and responsibilities of Peer Educators, RRC Co-ordinators, NGO Co-ordinators and other stakeholders

Peer Educators

Table 4.6 presents the top three perceived roles and responsibilities of peer educators. Overall, 86 percent of the peer educators felt that creating awareness about HIV/ AIDS in the community was their role/ responsibility as a peer educator. This percentage was highest across states in Gujarat, Karnataka and Maharashtra (100% each) and lowest in Andhra Pradesh (59%). The reason for such a response pattern in Andhra Pradesh was that the RRCs were functioning from NCLP schools and thus the peer educators (teachers) perceived their purview to be limited to the school children.

Table 4.6: Percentage distribution of peer educators by top three roles and responsibilities by state

	Andhra Pradesh		Gujarat		Karnataka		Maharashtra		West Bengal		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Create awareness about HIV/AIDS in the community	32	59.3	23	100.0	9	100.0	16	100.0	84	94.4	164	85.9
Educate youth about HIV testing facility	25	46.3	7	30.4	9	100.0	12	75.0	51	57.3	104	54.5
Educate youth about condom use	21	38.9	12	52.2	9	100.0	6	37.5	35	39.3	83	43.5
Total N	54		23		9		16		89		191	

* Total percentages more than 100% as multiple responses possible

More than half of the peer educators reported education of youth about HIV testing facility followed by education of youth about condom use (44%) as their role/ responsibility (Table 4.6).

Target group Peer Educators interacted with

As depicted in Table 4.7, most of the peer educators (83%) interacted with adolescents (10- 18 years). This percentage as expected was highest across states in Andhra Pradesh where the target group comprised mainly of adolescent children. About three- fourths of the peer educators (75%) interacted with young people between the age group of 19- 24 years under the programme. A little less than one- fifths of the peer educators also reported other target groups, mainly married couples, pregnant women/ lactating mothers etc

Table 4.7: Percentage distribution of peer educators by target respondents they interacted with under the RRC programme by state

	Andhra Pradesh		Gujarat		Karnataka		Maharashtra		West Bengal		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Adolescent (10-18 years)	53	98.1	13	56.5	3	33.3	12	75.0	77	86.5	158	82.7
Young people (19-24 years)	22	40.7	19	82.6	6	66.7	14	87.5	82	92.1	143	74.9
Others	1	1.9	13	56.4	0	0.0	6	37.6	16	17.9	36	18.8
Total N	54		23		9		16		89		191	

* Total percentages more than 100% as multiple responses possible

Overall, the average time spent by these respondents working as a peer educator was 10 hours in a week.

RRC coordinators

As already mentioned in the previous chapters, a total of 61 RRC coordinators were covered for the purpose of the study. The topmost roles and responsibilities as perceived by them included,

- Creating awareness about HIV/AIDS (51),
- Educating youth about HIV (41),
- Organizing group meetings on HIV/AIDS (33),
- Organizing rally on HIV/AIDS (21),
- Organizing various educational games (20), and
- Organizing other educational activities (18)

More than one-third (22) of the RRC coordinators were also involved in the supply and distribution of IEC material. They mainly distributed IEC material directly to young people and organize activities of the RRC like playing games (7), provided information to youth regarding these materials (7) and kept track of the material received (5).

Target group RRC coordinators interacted with

The RRC coordinators reportedly spent on an average about 13 hours per week in RRC activities and the target group that they usually interacted with were mainly young people between the age group of 19- 24 years (47) followed closely by adolescents between the age group of 10-18 years (46) and others like married couples and elders (12).

Stakeholders

As indicated in the previous chapters, overall a total of 82 stakeholders were covered for the study. Interestingly, more than half (46) of them felt that the RRC catered only to adolescents as their target group and less than one-third (26) felt it catered to all target groups. A little over one-fifth (19) perceived that the RRC programme catered to all young people.

Most of the stakeholders (67) had participated in the activities of the RRCs. These activities that they had been involved in included the following main activities:

- Providing support in providing HIV/ AIDS related information to young people (22),
- Lending help in conducting IEC activities at the RRC (10), and
- Motivating parents to send their children to the RRC (10)

CHAPTER 5

Experience of Beneficiaries and Peer Educators with IEC Materials

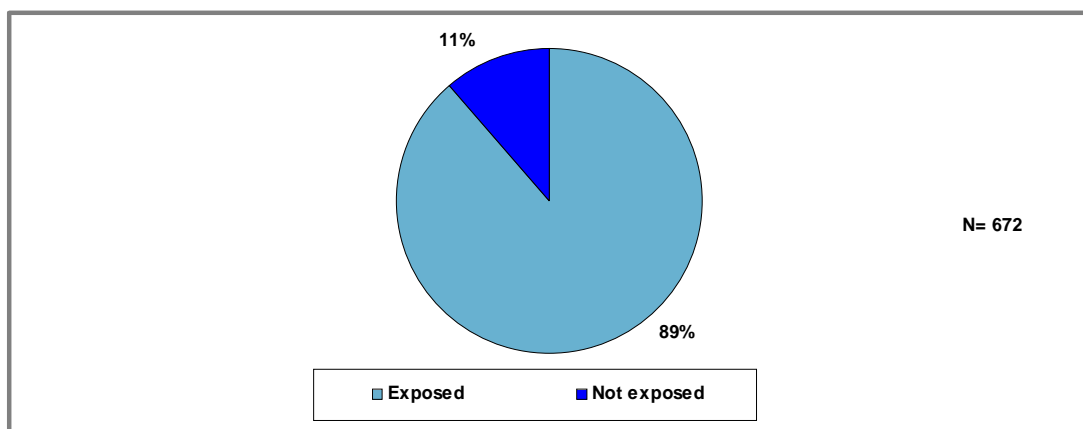
This chapter presents the exposure of the RRC beneficiaries (young people ever participated in RRC activities) and the Peer Educators to various IEC materials at the RRCs. The chapter also attempts to assess message recall, perceived relevance and appropriateness of the messages, difficulties encountered in understanding the messages and liking/disliking of the message.

5.1 Exposure of beneficiaries to IEC Materials at the RRCs

Exposure to any IEC Material supplied by UNICEF

Figure 5.1 presents the percentage distribution of the beneficiaries who were exposed to any of the IEC materials (four games and posters on young boys and young girls) supplied by UNICEF to the RRCs. Overall, 89 percent of the RRC beneficiaries contacted for the study reported that they had exposure to any IEC material supplied by UNICEF for young people.

Figure 5.1: Percentage distribution of beneficiaries by exposure to any IEC material supplied by UNICEF



As presented in Table 5.1, across states all the beneficiaries in Andhra Pradesh and Maharashtra and 89 percent of those in West Bengal had exposure to any IEC material. The corresponding percentage was relatively lower for Gujarat (57%) and Karnataka (79%).

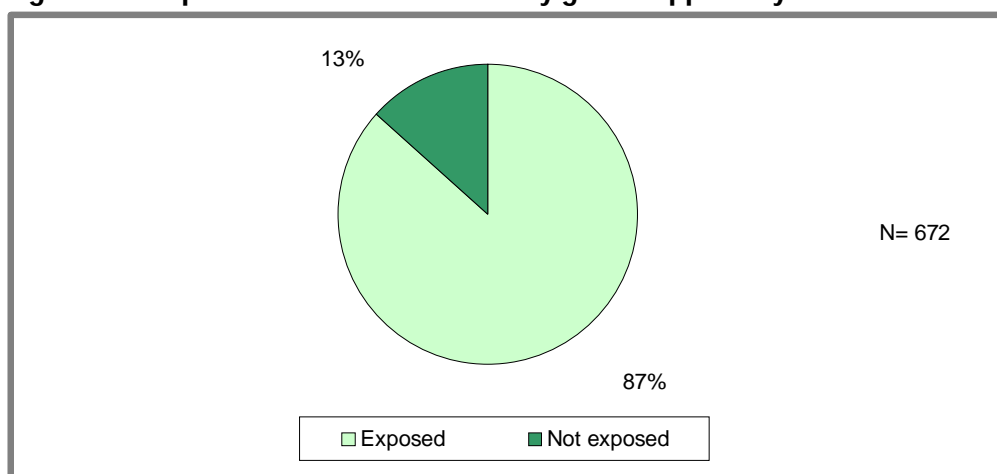
Table 5.1: Beneficiaries' exposure to any IEC material supplied by UNICEF

Exposure to and IEC Material	Andhra Pradesh		Gujarat		Karnataka		Maharashtra		West Bengal		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Exposed	150	100	35	57.4	63	78.8	61	100	286	89.4	595	88.5
Not Exposed			26	42.6	17	21.3			34	10.6	77	11.5
Total N	150		61		80		61		320		672	

Exposure to any Game supplied by UNICEF

The exposure of beneficiaries to any of the four games supplied by UNICEF (Carom boards, Fun and Dragon games, Playing cards and Memory Games) to the RRCs is presented in Figure 5.2. Overall, 87 percent of the RRC beneficiaries had exposure to any game supplied by UNICEF to the Red Ribbon Clubs.

Figure 5.2: Exposure of beneficiaries to any game supplied by UNICEF to RRCs



State-wise differentials have been presented in Table 5.2. Across states, all the beneficiaries in Andhra Pradesh, 93 percent in Maharashtra and nearly four-fifths in Karnataka and West Bengal had exposure to any game at the RRC. In Gujarat, where only Carom board was supplied, 57 percent of the beneficiaries reported exposure to any game at the RRC.

Table 5.2: Beneficiaries' exposure to any Game supplied by UNICEF

Exposure to and IEC Material	Andhra Pradesh		Gujarat		Karnataka		Maharashtra		West Bengal		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Exposed	150	100.0	35	57.4	63	78.8	57	93.4	278	86.9	583	86.8
Not Exposed			26	42.6	17	21.3	4	6.6	42	13.1	89	13.2
Total N	150		61		80		61		320		672	

Exposure of beneficiaries to any of the nine posters supplied by UNICEF

Figure 5.3 presents the exposure of beneficiaries to any of the posters supplied to RRCs by UNICEF. As depicted in the figure, overall about 87 percent of the beneficiaries were exposed to any of the nine posters supplied to RRCs by UNICEF. These posters were meant for various different target groups as follows:

- 1) Young people – boys
- 2) Young people – girls
- 3) Peer educators – boys
- 4) Peer educators – girls
- 5) Parents – mothers
- 6) Parents – fathers
- 7) Panchayats
- 8) Teachers – female
- 9) Teachers - male

Figure 5.3: Exposure of beneficiaries to any posters supplied by UNICEF to RRCs

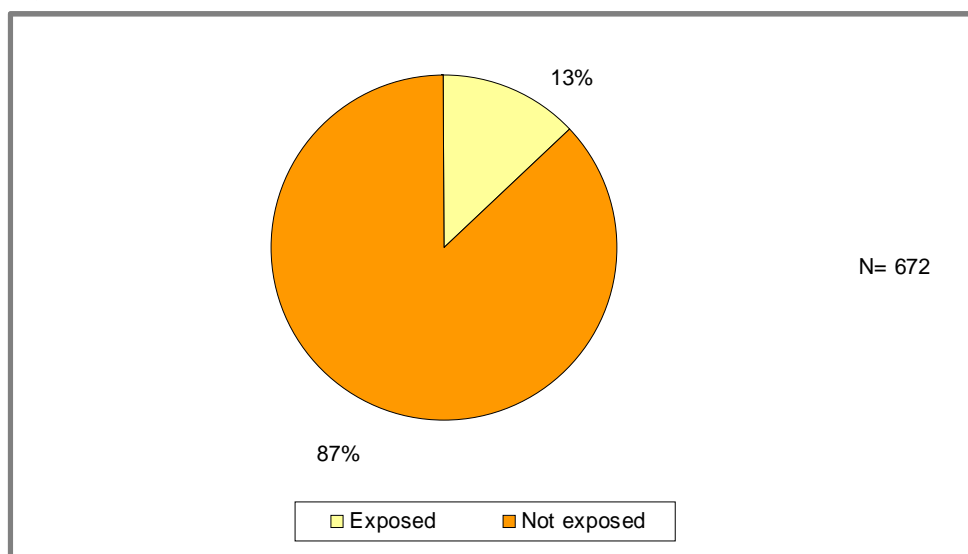


Table 5.3 presents the percentage distribution of beneficiaries across states, who were exposed to any of the nine posters supplied by UNICEF to the Red Ribbon Clubs. While this percentage was low across all the five states, it was relatively higher in the state of Maharashtra (57%) as compared to the other four.

Interestingly, in the state of West Bengal, there was no supply of these posters according to information received from UNICEF. However, upon visits to these RRCs in Purulia district, it emerged that there were some posters on HIV/ AIDS that had been supplied by UNICEF (as substantiated by UNICEF logo present on them) bearing the same logo of 'Knowledge is Power' as in the nine posters to be assessed. Details and samples of these posters were therefore taken by the field teams from ORG- CSR in order to prevent missing any information regarding the same. Pictures of these posters have been provided in the Annexure section of this report.

Also worth mentioning here is that in Gujarat, while information from UNICEF revealed that posters had been supplied, none of the 12 RRCs visited in Vadodara had any of these posters. This was substantiated through interviews with beneficiaries, peer educators, RRC coordinators as well as NGO coordinators and observations conducted at these RRCs.

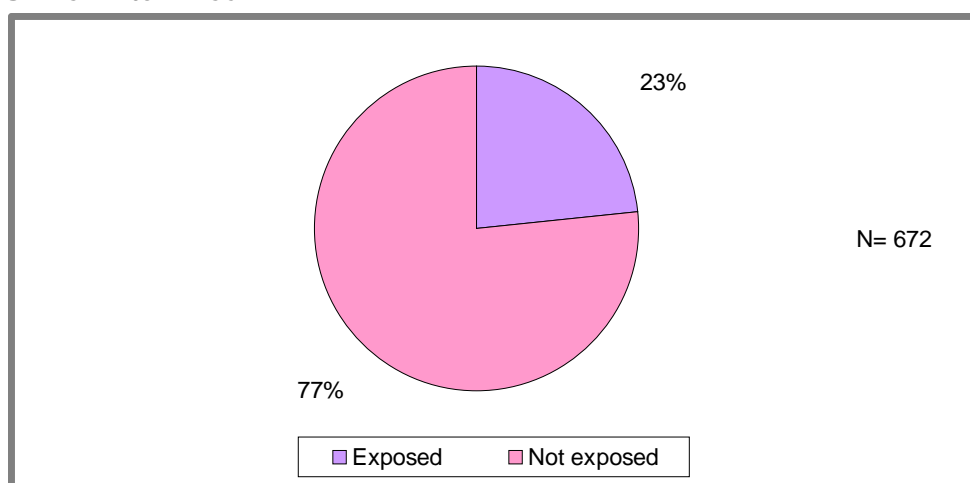
Table 5.3: Percentage distribution of beneficiaries who were exposed to any poster supplied by UNICEF at RRC by state

	Andhra Pradesh		Gujarat		Karnataka		Maharashtra		West Bengal		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Exposed	7	4.7			5	6.3	35	57.4	41	12.8	88	13.1
Not Exposed	143	95.3	61	100	75	93.8	26	42.6	276	87.2	584	86.9
Total	150		61		80		61		320		672	

Exposure of beneficiaries to any other IEC Material at the RRCs

Figure 5.4 presents the percentage distribution of the beneficiaries who had exposure to any other IEC materials (other than those supplied by UNICEF) at the RRCs. Nearly one-fourth of the beneficiaries had exposure to other IEC materials at the RRCs.

Figure 5.4: Exposure of beneficiaries to IEC material other than that supplied by UNICEF to RRCs



Across states, as depicted in Table 5.4, the beneficiaries who reported exposure to other IEC materials were mostly from Maharashtra (61%) and Gujarat (57%). Books, Posters and the Charts were some of the other IEC materials available at the RRCs.

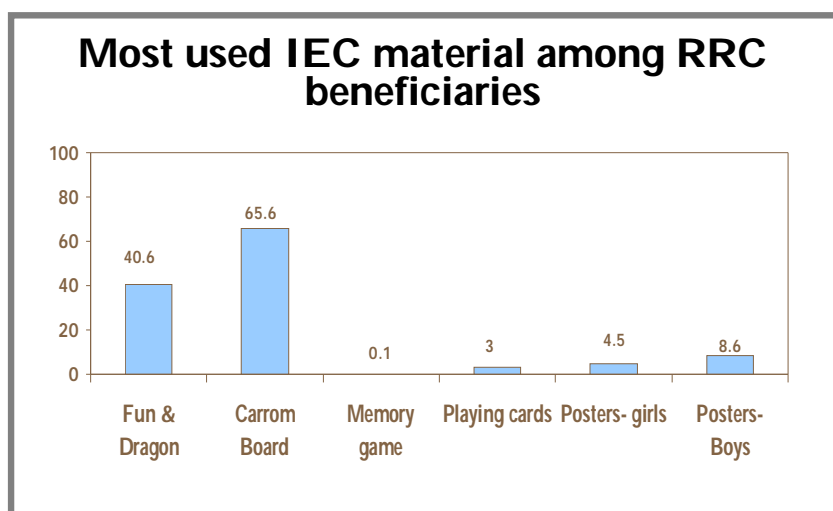
Table 5.4: Beneficiaries' exposure to any other IEC materials at the RRCs

Exposure to and IEC Material	Andhra Pradesh		Gujarat		Karnataka		Maharashtra		West Bengal		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Exposed	24	16.0	35	57.4	2	2.5	37	60.7	59	18.4	167	24.9
Not Exposed	126	84.0	26	42.6	78	97.5	24	39.3	261	81.6	505	75.1
Total	150		61		80		61		320		672	

Exposure to Specific IEC Materials

The exposure of beneficiaries to different IEC materials supplied by UNICEF to RRCs has been presented in Table 5.5. The most commonly used IEC materials at the RRCs was the carrom board (66%) followed by Fun and Dragon Game (41%). The use of Memory Game (0.1%), Playing Cards (3%), Poster on Young Girls (5%) and Poster on Young Boys (9%) was quite limited at the RRCs.

The use of carrom board was reported in all the five states. As compared to other states the use of carrom board at the RRC was more common in Andhra Pradesh and Maharashtra (89% each) followed by West Bengal (59%). In Gujarat and Karnataka 38 and 50 percent of the beneficiaries respectively reported the use of carrom board.



The use of Fun and Dragon Game was reported by the beneficiaries in the states of Andhra Pradesh (74%), Karnataka (49%) and West Bengal (38%). The Fun and Dragon Game was not available in any of the RRCs visited in Gujarat and Maharashtra.

The exposure to posters on young girls and young boys was reported mostly by the beneficiaries in Maharashtra.

Table 5.6 provides information on the recall of messages in the carom board among the beneficiaries who had ever played the carom board at the RRCs.

Almost all the beneficiaries (98%), who had exposure to carom board, could recall that the carom board at the RRC had messages relating to HIV/AIDS. Few of the beneficiaries who could not recall that the carom board contained messages on the carom board were mostly from Gujarat. It may be noted that the messages in the carom board available with some of the RRCs in Gujarat had either faded or were not visible.

Overall, 7 to 29 percent of the beneficiaries having exposure to the carom board could recall the messages spontaneously. Compared to all the states, the recall of different messages in the carom board was much better among beneficiaries in Andhra Pradesh.

The top three messages that the beneficiaries could recall spontaneously were:

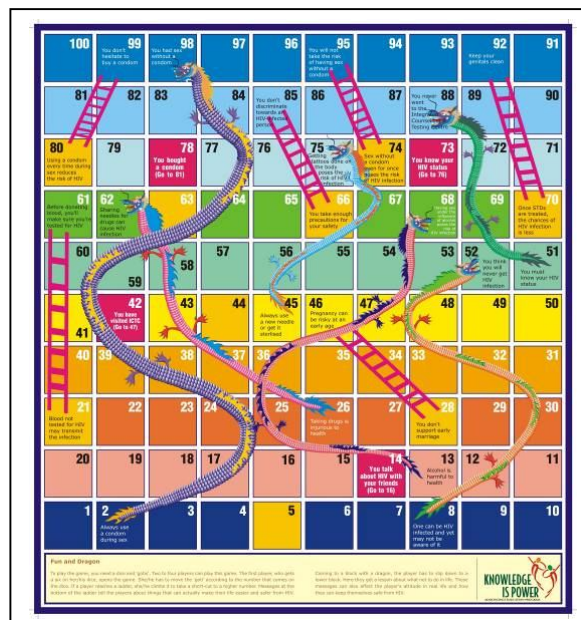
- Sharing needles while taking intravenous drugs can lead to HIV infection (28.6%)
- Sex with more than one partner can lead to HIV infection (24.5%)
- Having sex without condom even once can lead to HIV (23.4%)

Table 5.6: Spontaneous Recall of Messages in the Carom Board

Particulars	Andhra Pradesh	Gujarat	Karnataka	West Bengal	Maharashtra	All
% aware of messages related to HIV/AIDS in the game	100.0	69.6	100.0	99.5	100.0	98.2
Messages						
Sharing needles while taking intravenous drugs can lead to HIV infection	39.6	17.4	62.5	21.6	5.6	28.6
You can shake hands , sit along with and share food with an HIV positive person with out any fear	21.1	4.3	87.5	14.7	7.4	21.5
Being faithful to your partner can protect you from HIV infection	11.9	17.4	77.5	17.4	7.4	20.0
Sex with more than one partner can lead to HIV infection	16.4	13.0	52.5	31.1	5.6	24.5
Visit antenatal clinic for proper counselling, medication and to know your HIV status	7.5	-	22.5	4.7	3.7	6.8
An HIV positive mother can pass on the infection to her child at the time of birth	16.4	17.4	27.5	16.3	3.7	15.9
Having sex without condom even once can lead to HIV	25.4	8.7	55.0	22.1	5.6	23.4
If not treated sexually transmitted diseases increase the risk of getting HIV infection	15.7	-	45.0	8.4	-	12.5
Total played Carom Board	134	23	40	190	54	441

Fun and Dragon

The game of Fun and Dragon had a provision for maximum of four players at a time. The first player getting a 'six' on the dice opened game. The player who reaches 'ladder', climbed to take short cut to the higher number. The player who reaches 'snake' had to climb down to a lower block where its tail ended. The messages on safer behavior at the bottom as well as top of ladder were explained by peer educator. The player who reached 'snake' had to climb down to a lower block where its tail ended. The messages on 'what not to do' were present on top as well as bottom block. Many a times the beneficiaries were expected to read messages themselves and clarify doubts with peer educator.



As discussed earlier, the exposure to Fun and Dragon Game was reported by beneficiaries in the states of Andhra Pradesh, Karnataka and West Bengal. Table 5.7 presents information on the recall of messages in Fun & Dragon game among the beneficiaries who had ever played this game at the RRCs. Almost all the beneficiaries (99%), who had exposure to Fun & Dragon game mentioned that the Fun & Dragon game had messages relating to HIV/AIDS.

Overall, 11 to 37 percent of the beneficiaries having exposure to the fun and dragon could recall the messages spontaneously.

The top three messages that the beneficiaries could recall spontaneously were:

- Sharing needles for drugs can cause HIV infection (37%)
- Before donating blood you will make sure you are tested for HIV (37%)
- Always use a new needle or get it sterilized (37%)

Table 5.7: Spontaneous Recall of Messages in Fun & Dragon Game

Messages	Andhra Pradesh	Karnataka	West Bengal	All
% aware of messages related to HIV/AIDS in the game	100.0	100.0	99.2	99.6
Messages				
One should not hesitate to buy a condom	30.6	97.4	19.5	35.2
One should not take the risk of having sex without a condom	24.3	97.4	13.8	30.0
One should keep genitals clean	9.0	61.5	11.4	17.6
One should not discriminate towards a HIV infected person	19.8	82.1	6.5	22.7
Using a condom every time during sex reduces the risk of HIV	10.8	87.2	12.2	22.3
Getting tattoos done on the body poses the risk of HIV infection	27.0	41.0	1.6	17.6
Sex with out condom even for once poses the risk of HIV infection	12.6	53.8	7.3	16.1
Before donating blood you will make sure you are tested for HIV	47.7	64.1	17.9	36.6
Sharing needles for drugs can cause HIV infection	67.6	38.5	9.8	37.4
One should take enough precautions for his/her safety	17.1	61.5	2.4	16.8
Having sex under the influence of alcohol poses risk of HIV infection	11.7	51.3	1.6	12.8
Once the STDs are treated the chances of HIV infection is less	6.3	51.3	1.6	10.6
One must know his/her HIV status	18.9	69.2	6.5	20.5
Always use a new needle or get it sterilised	45.9	71.8	21.1	36.6
Pregnancy can be risky at an early age	22.5	74.4	8.1	23.4
Blood not tested for HIV may transmit the infection	47.7	82.1	6.5	34.1
Taking drugs is injurious to health	6.3	59.0	1.6	11.7
One should not support early marriage	20.7	82.1	9.8	24.5
Alcohol is harmful to health	10.8	61.5	5.7	15.8
Always use a condom during sex	18.0	87.2	13.8	26.0
One can be HIV infected and yet may not be aware of it	9.0	74.4	-	14.3
Total played fun & dragon game	111	39	123	273

5.3 Opinion of the beneficiaries on IEC Materials

The opinion on the carom board game was sought from all the beneficiaries who had ever played the carom board at the RRC. The responses presented in Table 5.8 shows that over three-fifths of the beneficiaries liked the game. The proportion of beneficiaries liking the game varied between 89 to 95 percent across all the states excepting Andhra Pradesh where only 46 percent of the beneficiaries liked the game.

Almost all the beneficiaries perceived the pictorials/visuals used in the in the carom board as appropriate and appealing. The written materials in the game were also perceived to be appropriate as well as appealing by almost all the beneficiaries.

Table 5.8 further shows that 70 percent of the beneficiaries perceived that they were better informed about HIV/AIDS after seeing the messages in carom game. These beneficiaries were mostly from the states of Karnataka (95%), West Bengal (93%) and Maharashtra (89%).

Table 5.8: Opinion of the beneficiaries on the Carom Board

	A.P.	Gujarat	Karnataka	Maharashtra	W.B.	All
% Liked the Carom Board	45.5	88.9	95.0	96.3	91.2	77.6
% Who Perceived the messages relevant for themselves	74.6	55.6	87.5	94.4	94.0	86.4
% perceived the pictorials/visuals used in the game as appropriate	96.3	100.0	100.0	96.3	98.4	97.6
% perceived the written materials in the game as appropriate	86.6	100.0	95.0	100.0	93.4	92.4
% perceived the pictorials/visuals used in the game as appealing	100.0	100.0	100.0	100.0	98.4	99.3
% perceived the written materials in the game as appealing	91.8	100.0	100.0	100.0	96.7	95.9
% better informed about HIV/AIDS after seeing the messages in carom game	26.9	22.2	95.0	88.9	93.4	70.2

Overall 29 percent of the beneficiaries gave suggestions to make the carom board game more effective. The most commonly mentioned suggestions to make the carom board game more effective were "Size of carom board should be larger", "Number of carom boards at the RRC should be increased" and "Messages should be in the form of slogans". While the first two suggestions were given by the beneficiaries in West Bengal the third suggestion was mostly given by beneficiaries in Andhra Pradesh.

Table 5.9: Suggestion of the beneficiaries to make the carom board game more effective

Particulars	A.P.	Guj.	Kar.	Mah.	W.B.	All
% Gave suggestions to make the carom board game more effective	3.0	11.1	2.5	22.2	57.1	29.1
Suggestions given to make the game more effective						
Messages should be in the form of slogans	75.0	100.0		16.7	14.4	17.2
Need to get more info about AIDS.				25.0	1.9	4.1
Need its language easy, understandable and simple.	25.0			25.0	5.8	8.2
Number of carom boards should be increased					33.7	28.7
Need more involvement so that all youth can participate					9.6	8.2
Size of carom board should be larger					35.6	30.3
Others			100	33.2	17.4	18.8

Table 5.10 provides information on opinion of the beneficiaries on the Fun and Dragon game. As discussed earlier, exposure to Fun and Dragon game was reported in the states of Andhra Pradesh, Karnataka and West Bengal. Most of the beneficiaries (87% to 93%) who had played the game in these three states they liked the game in general. Over 90 percent of the beneficiaries in Andhra Pradesh and West Bengal and 82 percent of those in Karnataka Perceived that the messages in the game were relevant for themselves. Almost all the beneficiaries perceived that the pictorials /visuals used in the game as appropriate and appealing. The written materials in the game were also perceived to be appropriate and appealing by most of the beneficiaries (over 90%) who had played the game.

Seventy six to eighty eight percent of the beneficiaries in the three states reported that they had discussed the messages in Fun & Dragon Game with others. Against 95 percent and 89 percent of the beneficiaries in Karnataka and West Bengal respectively 41 percent of those in Andhra Pradesh felt that they were better informed about HIV/AIDS after seeing the messages in Fun & Dragon Game.

Table 5.10 Opinion of the beneficiaries about the Fun and Dragon Game

	A.P.	Karnataka	W.B.	All
% Liked the Fun & Dragon Game	87.4	92.3	92.9	90.5
% Who Perceived the messages relevant for themselves	82.0	92.3	92.0	87.8
% perceived the pictorials /visuals used in the game as appropriate	99.1	97.4	97.3	98.1
% perceived the written materials in the game as appropriate	90.1	97.4	89.4	90.9
% perceived the pictorials /visuals used in the game as appealing	100.0	100.0	100.0	100.0
% perceived the written materials in the game as appealing	93.7	100.0	96.5	95.8
% Discussed the messages in Fun & Dragon Game with others	88.3	84.6	76.1	82.5
% better informed about HIV/AIDS after seeing the messages in Fun & Dragon Game	40.5	94.9	88.5	69.2

5.4 Perception of the Peer Educators on Games Supplied by UNICEF

The perception of peer educators on each of the four games supplied by UNICEF is presented in this section. The findings are as follows.

Carom Board

Almost all the peer educators covered in the five states reported that they had ever played/facilitated the carom board game at the RRC. Overall 45 percent of them had received training for facilitation of the game and 53% had received instructions on how to play the game. The peer educators receiving training as well as instruction materials were mostly from the states of Karnataka Maharashtra and Gujarat. Most of the peer educators (93%) did not face any problem in understanding the messages in the game. More than 90% of the peer educators liked the game and perceived the messages to be relevant for the target groups. One third of the peer educators gave suggestions like "More information on HIV/ AIDS should be given in the carom board", "Separate carom boards should be supplied for boys and girls" and "Messages should be given on carom coins"

Fun & Dragon Game

As discussed in the beneficiary section the Fun & Dragon Game was available in the RRCs covered in the states of Karnataka, Andhra Pradesh and West Bengal. Among the peer educators, over four-fifth in Andhra Pradesh and West Bengal and two-thirds in Karnataka reported that they had ever played/facilitated the game at the RRC. All the peer educators in Karnataka, 54 percent in West Bengal and 28 percent in Andhra Pradesh mentioned that they had received training for facilitation of the game. Across states 89 , 54 and 42 percent of the peer educators in Karnataka , West Bengal and Andhra Pradesh respectively had received instructions on how to play the game. Overall, a few of the peer educators (10%) faced any problem in understanding the messages in the carom board. All most all the peer educators (95%) liked the game and found the messages relevant for the target groups. The suggestions like "Font size of the written materials should be increased" and "More number of coins should be provided" were given by the peer educators for further improvement in the carom board.

Memory Game

The availability of memory game was reported by 7 peer educators in West Bengal and 1 peer educator in Karnataka. Of these 8 had received training for facilitation of the game and 7 had received instructions on how to play the game. Most of the peer educators (93%) did not face any problem in understanding the messages in the game. Seven peer educators liked the game and 6 found the messages relevant for the target groups. Four 4 peer educators suggested that there should be more information on HIV/ AIDS in the memory game.

Playing cards

Playing/facilitating of the playing cards was reported by 22 peer educators in West Bengal in 6 in Andhra Pradesh and 1 in Karnataka. Among the 12 had received some training on facilitation of the game and 19 had received instructions on how to play the game. Overall, one-tenth of the peer educators faced any problem in understanding the messages in the carom board. Twenty

seven peer educators liked the game. All the peer educators perceived that the messages in the playing cards are relevant for the target groups. "Font size of the written materials should be increased" , "Supply of materials should be increased" and "Cards should have plastic cover" were some of the suggestions given by peer educators for further improvement in the playing cards.

CHAPTER 6

Exposure of other stakeholders to IEC materials

Taking the discussion from the previous chapter further, the present chapter attempts to provide an understanding into the exposure of other stakeholders to the IEC materials supplied by UNICEF to Red Ribbon Clubs. These stakeholders are other than the beneficiaries and peer educators. The chapter begins by addressing in brief the exposure and opinion of RRC coordinators, followed by that of stakeholders like Sarpanch, teachers, ANM, AWW etc and then the NGO coordinators.

6.1 Exposure and opinion of RRC Coordinators on IEC materials

Table 6.1 presents the exposure and opinion of RRC coordinators regarding the IEC materials. Almost all the RRC coordinators had been exposed to Carom Board (55) followed by Fun and Dragon game (38). Their exposure to Playing cards (27) and Memory game (14) was relatively low. Worth mentioning here is that receipt of memory game was reported only from Purulia in West Bengal and not from any other district/state covered in the study.

Almost all the RRC coordinators who had been exposed to carom boards, approved it and liked the messages given therein. These messages were found to be relevant for the target group by almost all (Table 6.1). A few of them found some difficulties in using the game. These difficulties were with regard to the small pockets where it became difficult for the beneficiaries to take out the carom coins (called '*gotis*') and lack of supply of powder for smooth sliding of the coins. About 19 of them gave suggestions, main being "More information should be given on the board", "Size of the board should be bigger so that the font size of the messages can be made bigger".

In case of the Fun and Dragon game to which second highest number of RRC coordinators was exposed after carom board, all of them approved of and liked the messages and also felt that these messages were relevant for the target group. One-third of them gave suggestions for improvements of the game, main ones being, "The language of the messages should be simple" and that "There should be a separate room just for female beneficiaries to play the game". This could be a result of shyness/ discomfort felt by female beneficiaries in playing the game with HIV messages in front of the opposite sex (Table 6.1).

Similar pattern was observed in case of both playing cards as well as memory games. All the RRC coordinators who were exposed to these games approved of the messages therein and liked the same (Table 6.1). They also felt that the messages were relevant for the target group and while none of these respondents found anything difficult in playing cards, a few of them found difficulties in understanding the instructions for the memory game. The suggestions for playing cards included, "Usage of more pictorials" and "Usage

of colloquial language instead of literal translations of messages”. For memory game, the suggestions included “Bigger font size and simpler instructions for playing the game”.

Table 6.1: RRC coordinators’ exposure to and opinion about IEC materials (N= 61)

	Carom Board	Fun and Dragon Game	Playing Cards	Memory Game
Exposed to IEC material	<ul style="list-style-type: none"> • 55 (not available in Karnataka) 	<ul style="list-style-type: none"> • 38 (not available in Maharashtra and Gujarat) 	<ul style="list-style-type: none"> • 27 (not supplied to Vadodara) 	<ul style="list-style-type: none"> • 14 (only reported from Purulia)
Approve of messages	<ul style="list-style-type: none"> • Almost all (54) 	<ul style="list-style-type: none"> • All (38) 	<ul style="list-style-type: none"> • All 27 	<ul style="list-style-type: none"> • All 14
Liking and Relevance of messages for TG	<ul style="list-style-type: none"> • Almost all (54) liked the game overall & felt that messages were relevant 	<ul style="list-style-type: none"> • All (38) 	<ul style="list-style-type: none"> • All 	<ul style="list-style-type: none"> • 13 liked the game overall and felt it was relevant
Difficulties in using material	<ul style="list-style-type: none"> • Only 6 <ul style="list-style-type: none"> - Powder not supplied - Small pockets 	<ul style="list-style-type: none"> • Only 1 <ul style="list-style-type: none"> - Storage and maintenance of materials 	<ul style="list-style-type: none"> • None 	<ul style="list-style-type: none"> • 3 encountered some difficulty <ul style="list-style-type: none"> - Not easily understandable
Suggestions to improve game	<ul style="list-style-type: none"> • 19 gave suggestions <ul style="list-style-type: none"> - More information on the board suggested - Size of the board should be bigger - Bigger font size should be used - Language of messages should be simpler 	<ul style="list-style-type: none"> • 13 gave suggestions <ul style="list-style-type: none"> - Language of the messages should be simple - Separate room just for female beneficiaries to play the game 	<ul style="list-style-type: none"> • 9 gave suggestions <ul style="list-style-type: none"> - More pictorials should be used - Messages should be simpler 	<ul style="list-style-type: none"> • 4 gave suggestions <ul style="list-style-type: none"> - Bigger font size required - Instructions should be simpler

The exposure of RRC coordinators to the posters was limited as was also among other target groups covered for the purpose of the study. As shown in Table 6.2,

Table 6.2: RRC coordinators’ exposure to and opinion about IEC materials

	Posters – All 9
Exposure to posters	<ul style="list-style-type: none"> • In the range of 6 to 18 reported to have seen the posters (mostly on young girls and young boys)
Appropriateness, appeal and relevance	<ul style="list-style-type: none"> • Almost all found the posters <ul style="list-style-type: none"> • appropriate, • appealing and • Relevant
Difficulties	<ul style="list-style-type: none"> • Only 1- 2 reported encountering any difficulty

posters with young boys (18) and young girls (17) were seen by maximum number of these RRC coordinators.

Almost all of these RRC coordinators found these posters appropriate, appealing as well as relevant and only a few (1- 2) reported any difficulty in displaying/ using the posters.

6.2 Exposure and opinion of Stakeholders on IEC materials

The general perception of stakeholders included in the study (like Sarpanch, AWW and teachers) regarding the IEC materials at the RRCs were mainly that these (IEC materials) are very good source of information about HIV/ AIDS (16) and these are an interesting way of learning especially for the young generation (20).

The stakeholders were mainly asked regarding their exposure and opinion on the specific posters that were meant for them specifically as a target group. However, as seen among other categories of respondents as well, the exposure to posters was found to be relatively low compared to other IEC materials at the RRC and therefore, the exposure of stakeholders to posters was also minimal. Another major reason for this was that the involvement of these stakeholders in the RRC programme was also found to be quite limited.

CHAPTER 7

Conclusions and Recommendations

The present chapter attempts to provide conclusions and recommendations based on the findings that have emerged from the study.

- ❑ RRCs functioned from varied locations such as schools, youth clubs, PHCs, RRC Coordinators' homes, Peer Educators' homes etc. in different states. This resulted in RRCs drawing target groups with varying age groups and marital status as beneficiaries. This has had profound reflection on the opinions and suggestions obtained from the beneficiaries. It is suggested that the program should have a defined target group and appropriate guidelines for formation of RRCs at the grass roots level. In the absence of a crisp definition of young people for the RRC program evaluated through the present study, it was noticed that the term 'young people' was interpreted differently by different states, eg. School going children were the main beneficiaries of the program in Andhra Pradesh. It is suggested that prior to re-launching the program, UNICEF should hold stakeholder consultation and work out a crisp definition for the target beneficiaries, which indicates the age group as well as their educational status whether school/college going or out of school. Some of the suggestions for the target groups that can be defined for the program are, either school going children or school drop outs or college going students etc and also in terms of age group, i.e. adolescents or young adults (18- 25 years) etc. Defining a target group in such a way would help in planning the messages to be given that are relevant for that target group. It is strongly recommended that children below the age group of 12 years are excluded from the program.
- ❑ Supply of IEC materials is not uniform across all the study states. Among all the IEC materials, the supply of Carrom Board and Fun & Dragon game was fairly good in all the states except for Gujarat where only Carrom Boards were supplied. The supply also had been more or less one time during the entire program period. This has had a reflection on the exposure of beneficiaries to the IEC materials. The exposure of beneficiaries to these two games is very high and to the other games and materials limited. The program may introduce a mechanism where supply at regular interval (quarterly or half yearly) is followed.
- ❑ The popularity of Carrom Board and Fun and Dragon was very high even in the centres where all the other IEC materials were also supplied. Both these games had been very effective as most messages therein were recalled, understood, felt relevant and liked by the respondents. Another reason for these games to be liked could be because these are originally popular as well as socially acceptable. Therefore, while these two games should be utilized/ retained for further such interventions, efforts can be made to use more such popular, socially acceptable games to ensure usage of the same at the community level. For example, playing cards is associated with gambling in many Indian communities and thus a pilot exercise can be conducted in different states to gain an insight into the popular and socially acceptable games as these may vary from state to state. Thereafter these games can be designed as an IEC material to spread knowledge regarding HIV/ AIDS.
- ❑ The messages in all the IEC materials were largely felt to be relevant by the beneficiaries except in Andhra Pradesh where the RRCs were located in schools and as such catered to children around 14 years of age. The children felt that the messages were more for youth. This shortcoming can be addressed if the target group for the IEC materials is defined

appropriately and having similar type of locations across states. The program may also plan to modify or include age-specific messages depending on the age groups it is catering to.

- ❑ The visuals as well as pictorials were largely found appealing as well as appropriate. Main suggestions for increasing effectiveness are:
 - Separate rooms to play for males and females
 - More supply of IEC materials, especially those of the popular games like Carrom Boards and Fun & Dragon
 - Introducing more pictorials in Carrom boards.
 - Provision for protective plastic cover for all the games to increase their durability
 - Use of simpler and colloquial language
- ❑ The study shows that by and large the IEC materials have been successful in achieving its goals in terms of increasing the knowledge of beneficiaries with regard to awareness regarding HIV/AIDS, modes of transmission and preventive measures, inculcating positive attitude towards those affected and promoting safe behaviors. However, the awareness of beneficiaries regarding ICTCs and ICTCs as the place for getting HIV tested was low. The program may think of including ICTC-specific messages in the IEC materials. Another important point to be noted here is that the impact of IEC material in terms of beneficiaries' knowledge regarding HIV/ AIDS and their positive attitude regarding discrimination against people affected with HIV/ AIDS can not be completely attributed to these IEC materials at RRCs in absence of any baseline information available regarding the same.
- ❑ There is a pertinent need to address the gender disparity seen by medium of this study by making efforts to increase the number of females as peer educators.

Apart from the above conclusions and recommendations regarding the IEC materials, the study also revealed some realities regarding the program which would be helpful in revival of the program in future. These have been provided below:

- ❑ The RRCs should be infrastructurally well defined in terms of provision of building/ room(s) etc as running of RRCs from homes of peer educators/ RRC coordinators etc may limit the reach of the program.
- ❑ It emerged that many of the peer educators had not received training and among those who had, the issues covered were different in different trainings. Thus uniform protocols across all states for mandatory training of peer educators are strongly recommended.
- ❑ Another mandate of the peer educators should be maintenance of registers of beneficiaries availing the services of the Red Ribbon Clubs.
- ❑ Monitoring of the RRC programme must be made essential so oversee and ensure smooth functioning of the same
- ❑ There should be specific instructions for change of players in each game to prevent monotony.
- ❑ There should be an honorarium given to the peer educators identified for the program to maintain their motivation levels
- ❑ As is already being done in some states, collaboration with SACS should be sought in implementing the RRC program. This would be helpful in optimum utilization of resources as well as better planning.

Annexure I: Research Tools

ASSESSMENT OF EFFECTIVENESS OF IEC MATERIAL AT RED RIBBION CLUBS

(A Study Sponsored by UNICEF)

SCHEDULE FOR YOUNG PEOPLE/ BENEFICIARIES

Schedule Number

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IDENTIFICATION							
STATE	Karnataka Andhra Pradesh Maharashtra West Bengal Gujarat	1 2 3 4 5	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
DISTRICT	Raichur Guntur Sangli Purulia Baroda	1 2 3 4 5	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>				
TYPE OF SETTLEMENT	Rural Urban	1 2	<input type="checkbox"/> <input type="checkbox"/>				
NAME OF RRC _____							
SCHEDULE NUMBERR	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>						
TYPE OF RESPONDENT	Female Male	1 2	<input type="checkbox"/> <input type="checkbox"/>				
Interview Date	Date	Month	Year				
	_____	_____	_____				
RESULT OF INTERVIEW			<input type="checkbox"/>				
Result codes: Completed 1; Partially completed 2; Refused 3; Locked / Respondent not available for the interview 4							
_____ Name and code of the Investigator		<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>			_____ Signature of the Investigator		
Name	Spot Checked By	Office Edited By	Keyed By				
Date	_____	_____	_____				

CONFIDENTIALITY AND CONSENT

Namaste! My name is ----- and I am working for ORG Centre for Social Research. We are conducting a survey for UNICEF to assess the effectiveness of IEC material display at Red Ribbon Clubs. In this regard we will interview you for about 45 minutes. We will not record your name anywhere. Your participation is voluntary and you can choose not to answer questions on any issue if you are not comfortable. We will not tell anyone about the interview besides using it for our research. We would greatly appreciate your participation in this survey.

Do you agree to participate in the interview? Yes 1 No 2

SECTION 1: GENERAL INFORMATION

S. No.	Question	Responses	Code	Skip to
101	What is your current age?	Age in completed years _____ <input type="text"/> <input type="text"/> Don't Know/Can't say97		
102	Social Category/ Caste	Scheduled Caste	1	
		Scheduled Tribe	2	
		Other Backward Caste	3	
		Others (Specify)_____	7	
103	Are you currently studying?	Yes	1	
		No	2	
104	What has been your highest level of educational attainment?	Illiterate	1	
		Literate with non formal education	2	
		1 - 5th	3	
		6 - 8th	4	
		9 -10th	5	
		11 - 12th	6	
		Technical Education (Diploma)	7	
		Graduate and above	8	
105	What has been your highest level of educational attainment of your mother?	Illiterate	1	
		Literate with non formal education	2	
		1 - 5th	3	
		6 - 8th	4	
		9 -10th	5	
		11 - 12th	6	
		Technical Education (Diploma)	7	
		Graduate and above	8	
106	What has been your highest level of educational attainment of your father?	Illiterate	1	
		Literate with non formal education	2	
		1 - 5th	3	
		6 - 8th	4	
		9 -10th	5	
		11 - 12th	6	
		Technical Education (Diploma)	7	
		Graduate and above	8	

SECTION 2: AWARENESS ABOUT AND PARTICIPATION IN RED RIBBION CLUBS

S. No.	Question	Responses	Code	Skip to
201	Are you aware about existence of Red Ribbon Clubs RRCs in your area?	Yes No	1 2	
202	Are you a member of any Red Ribbon Club in your area?	Yes No	1 2	
203	Have you ever visited RRC / participated in any activities of the RRC?	Yes No	1 2	→Q.206
204	How many times have you visited RRC/participate in the activities of RRC?	Number of times _____		
205	When was the last time you visited RRC?	Number of days back visited/ participated in RRC_____		
206	Do you know anybody in your area who organizes group discussion or activities or games related to HIV/AIDS?	Yes No	1 2	→Q.208
207	Who organizes the group discussions/ activities/games related to HIV/AIDS?	_____ _____ _____ _____		
208	Have you ever participated in any group discussion or activities or games related to HIV/AIDS?	Yes No	1 2	→Q.210
209	When was the last time you attended in any group discussion or participated in any activity?	Number of days back_____		
210	INS: ASK IF CODE "1-VISITED RRC" IN Q.203 --- ELSE SKIP TO SECTION.4 What was the purpose of visiting RRC?	Get more information about HIV/AIDS To play carom board To play fun & dragon game To play memory game To play card game To get poster For medical assistance To procure condom Get information about ICTC centre Others	01 02 03 04 05 06 07 08 09 77	
211	Do you recall of seeing any IEC material at the RRC ?	Yes No	1 2	→Q.301

S. No.	Question	Responses	Code	Skip to
212	What IEC materials have you seen at the RRC ?	Books Posters Charts Pamphlets VCDs/CDs Playing cards Carom board Fun and Dragon Game Memory game Handbills Hoardings Songs and jingles Teasers Training manuals Others (Specify) _____	01 02 03 04 05 06 07 08 09 10 11 12 13 14 77	

SECTION 3: AWARENESS & PERCEPTION REGARDING IEC MATERIALS AT RRCs

A	Fun and Dragon Game			
A.301	Have you ever seen any Fun and Dragon Game at the Red Ribbon Club?	Yes No	1 2	→B. 301
A.302	Have you ever played the Fun and Dragon Game at the Red Ribbon Club?	Yes No	1 2	→B. 301
A.303	How frequently do you play the Fun and Dragon Game at the Red Ribbon Club?	Number of days in a Month _____ Less frequently/Occasionally 99	<input type="text"/>	
A.304	When did you last play the Fun and Dragon Game at the Red Ribbon Club?	Number of days back _____	<input type="text"/>	
A.305	Did the Fun and Dragon Game have any message related to HIV/AIDS?	Yes No	1 2	
A.306	Message Recall and understanding	Could you recall any messages conveyed through this Game? Spontaneous 1 Prompted 2 No 3 If No → Skip to next message	Could you understand the message? Yes 1 No 2	If No, what did you find difficult in understanding the message? Language not clear 1 Difficult wordings 2 Lacks clarity 3 Meaning not clear 4 Others (Specify) 7
1	One should not hesitate to buy a condom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	One should not take the risk of having sex without a condom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3	One should keep genitals clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4	One should not discriminate towards a HIV infected person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	Using a condom every time during sex reduces the risk of HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6	Getting tattoos done on the body poses the risk of HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7	Sex with out condom even for once poses the risk of HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8	Before donating blood you will make sure you are tested for HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9	Sharing needles for drugs can cause HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10	One should take enough precautions for his/her safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11	Having sex under the influence of alcohol poses the risk of HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12	Once the STDs are treated the chances of HIV infection is less	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13	One must know his/her HIV status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14	Always use a new needle or get it sterilised	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15	Pregnancy can be risky at an early age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16	Blood not tested for HIV may transmit the infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17	Taking drugs is injurious to health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18	One should not support early marriage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19	Alcohol is harmful to health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20	Always use a condom during sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21	One can be HIV infected and yet may not be aware of it	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A.307	Can you tell us whether you liked, or disliked the Fun and Dragon Game with the messages on HIV/AIDS?		Liked	Dis-liked	DK
		Display of messages	1	2	3
		Contents of the messages	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
		Overall	1	2	3
A.308	Do you think the Fun and Dragon Game with messages on HIV/AIDS is relevant to a person of your age?	Yes		1	→Q.A.309
No		2			

A.308 a	Why do you think the messages conveyed through this game are relevant to a person of your age?	<hr/> <hr/> <hr/> <hr/>		
A.309	Why do you think the messages conveyed through this game are not relevant to a person of your age?	<hr/> <hr/> <hr/> <hr/>		
A.310	Do you feel that the visuals/pictorials used in the game are appropriate?	Yes No	1 2	→Q.A.312
A.311	Why do you feel that the visuals /pictorials used in the game are not appropriate?	<hr/> <hr/> <hr/> <hr/>		
A.312	Do you feel that the written materials used in the game are appropriate?	Yes No	1 2	→Q.A.314
A.313	Why do you feel that the written materials used in the game are not appropriate?	<hr/> <hr/> <hr/> <hr/>		
A.314	Do you feel that the visuals/pictorials used in the game are appealing?	Yes No	1 2	→Q.A.316
A.315	Why do you feel that the visuals /pictorials used in the game are not appealing?	<hr/> <hr/> <hr/> <hr/>		
A.316	Do you feel that the written materials used in the game are appealing?	Yes No	1 2	→Q.A.318
A.317	Why do you feel that the written materials used in the game are not appealing?	<hr/> <hr/> <hr/> <hr/>		
A.318	Have you discussed the messages conveyed in the game with any body?	Yes No	1 2	→Q.A.320

A.319	With whom you discussed the messages conveyed in the game?	Parents Other family members/relatives Friends Peer educators RRC coordinators Health workers Teacher Panchayat members Others (Specify)_____	01 02 03 04 05 06 07 08 77	
A.320	Do you feel that you are better informed about HIV/AIDS after seeing the messages in the Fun and Dragon Game?	Yes No	1 2	
A.321	Do you like to give any suggestion to make the game more effective?	Yes No	1 2	→Q.B.301
A.322	What suggestions would you like to give to make the game more effective?	<hr/> <hr/> <hr/> <hr/> <hr/>		
B	Carom Board			
B.301	Have you ever seen any Carom Board at the Red Ribbon Club?	Yes No	1 2	→C.301
B.302	Have you ever played the Carom Board at the Red Ribbon Club?	Yes No	1 2	→C.301
B.303	How frequently do you play the Carom Board at the Red Ribbon Club?	Number of days in a Month _____ Less frequently/Occasionally	<input type="text"/> <input type="text"/> 99	
B.304	When did you last play the Carom Board at the Red Ribbon Club?	Number of days back _____	<input type="text"/> <input type="text"/>	
B.305	Did the Carom Board at the RRC have any message related to HIV/AIDS?	Yes No	1 2	
B.306	Message Recall and understanding	Could you recall any messages conveyed through this Game? Spontaneous 1 Prompted 2 No 3 If No → Skip to next message	Could you understand the message? Yes 1 No 2	If No, what did you find difficult in understanding the message? Language not clear 1 Difficult wordings 2 Lacks clarity 3 Meaning not clear 4 Others (Specify) 7
1	Sharing needles while taking intravenous drugs can lead to HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	One can shake hands , sit along with and share food with an HIV positive person with out any fear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3	Being faithful to your partner can protect you from HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4	Sex with more than one partner can lead to HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5	Visit antenatal clinic for proper counselling, medication and to know your HIV status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6	An HIV positive mother can pass on the infection to her child at the time of birth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7	Having sex without condom even once can lead to HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8	If not treated sexually transmitted diseases increase the risk of getting HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
B.307	Can you tell us whether you liked, or disliked the Carom Board with messages on HIV/AIDS?		Liked	Dis-liked	DK		
		Display of messages	1	2	3		
		Contents of the messages	1	2	3		
		Number of messages	1	2	3		
		Pictorials	1	2	3		
		Presentation style	1	2	3		
		Overall	1	2	3		
B.308	Do you think the Carom Board with messages on HIV/AIDS is relevant to a person of your age?				Yes No	1 2	→Q.B.309
B.308a	Why do you think the messages conveyed through this game are relevant to a person of your age?	<hr/> <hr/> <hr/> <hr/> <hr/>					
B.309	Why do you think the messages conveyed through this game are not relevant to a person of your age?	<hr/> <hr/> <hr/> <hr/> <hr/>					
B.310	Do you feel that the visuals/pictorials used in the game are appropriate ?				Yes No	1 2	→Q.B.312
B.311	Why do you feel that the visuals /pictorials used in the game are not appropriate?	<hr/> <hr/> <hr/> <hr/> <hr/>					

B.312	Do you feel that the written materials used in the game are appropriate ?	Yes No	1 2	→Q.B.314
B.313	Why do you feel that the written materials used in the game are not appropriate?	<hr/> <hr/> <hr/> <hr/> <hr/>		
B.314	Do you feel that the visuals/pictorials used in the game are appealing?	Yes No	1 2	→Q.B.316
B.315	Why do you feel that the visuals /pictorials used in the game are not appealing?	<hr/> <hr/> <hr/> <hr/> <hr/>		
B.316	Do you feel that the written materials used in the game are appealing ?	Yes No	1 2	→Q.B.318
B.317	Why do you feel that the written materials used in the game are not appealing?	<hr/> <hr/> <hr/> <hr/> <hr/>		
B.318	Have you discussed the messages conveyed in the game with any body?	Yes No	1 2	→Q.B.320
B.319	With whom you discussed the messages conveyed in the game?	Parents Other family members/relatives Friends Peer educators RRC coordinators Health workers Teacher Panchayat members Others (Specify)_____	1 2 3 4 5 6 7 8 9	
B.320	Do you feel that you are better informed about HIV/AIDS after seeing the messages in the Carom Board?	Yes No	1 2	
B.321	Do you like to give any suggestion to make the game more effective?	Yes No	1 2	→Q.C.301
B.322	What suggestions would you like to give to make the game more effective?	<hr/> <hr/> <hr/> <hr/> <hr/>		
C	Memory Game			
C.301	Have you ever seen any Memory Game at the Red Ribbon Club ?	Yes No	1 2	→D.301

C.302	Have you ever played the Memory Game at the Red Ribbon Club ?	Yes No	1 2	→D.301
C.303	How frequently do you play the Memory Game at the Red Ribbon Club?	Number of days in a Month _____ Less frequently/Occasionally	<input type="text"/> <input type="text"/> 99	
C.304	When did you last play the Memory Game at the Red Ribbon Club?	Number of days back _____	<input type="text"/> <input type="text"/>	
C.305	Did the Memory Game had any message related to HIV/AIDS?	Yes No	1 2	
C.306	Message Recall and understanding	Could you recall any messages conveyed through this Game? Spontaneous 1 Prompted 2 No 3 If No → Skip to next message	Could you understand the message? Yes 1 No 2	If No, what did you find difficult in understanding the message ? Language not clear 1 Difficult wordings 2 Lacks clarity 3 Meaning not clear 4 Others (Specify) 7
1	Having sex without a condom even once can lead to HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	An HIV positive mother can pass on the infection to her child during childbirth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	An HIV positive person can also lead a normal life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Pregnancy at an early stage is harmful for the body	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Sex without a condom is the greatest cause of HIV transmission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	The right knowledge about HIV may save your life as well as your friends'	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Always using a new syringe or one that has been thoroughly sterilized by boiling will protect you from HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	You can get information on HIV and AIDS at Integrated Counselling and Testing Centres	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Get sexually transmitted diseases treated to protect yourself from HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Only when treated for HIV, blood is safe for transfusion. HIV can spread through infected blood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Know your HIV status to live your life responsibly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12	With love and concern, we can help an HIV positive person lead a normal life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13	With help of medicines, proper nutrition and exercise, an HIV positive person can lead a normal life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14	Having sex under the influence of alcohol places you at risk of HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15	A tattoo done with infected needle can lead to HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16	Know your HIV status . You can find Integrated Counselling and Testing Centres at government hospitals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17	You protect yourself from HIV infection if you use a condom every time during sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18	If untreated, sexually transmitted diseases increase the chance of HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19	HIV can strike anyone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20	HIV doesn't spread through touching each other or social interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21	You can get HIV infection if you share needles for injecting drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22	Using a condom every time during sex can protect you from HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23	Blood not tested for HIV can cause HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24	It can take 8- 12 years for an HIV infected person to develop AIDS symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C.307	Can you tell us whether you liked, or disliked the Memory Game with the messages on HIV/AIDS?		Liked	Dis-liked	DK
		Display of messages	1	2	3
		Contents of the messages	1	2	3
		Number of messages	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
		Overall	1	2	3

C.308	Do you think the Memory Game with messages on HIV/AIDS is relevant to a person of your age?	Yes No	1 2	→Q.C.309
C.308 a	Why do you think the messages conveyed through this game are relevant to a person of your age?	<hr/> <hr/> <hr/> <hr/> <hr/>		
C.309	Why do you think the messages conveyed through this game are not relevant to a person of your age?	<hr/> <hr/> <hr/> <hr/> <hr/>		
C.310	Do you feel that the visuals/pictorials used in the game are appropriate ?	Yes No	1 2	→Q.C.312
C.311	Why do you feel that the visuals /pictorials used in the game are not appropriate?	<hr/> <hr/> <hr/> <hr/> <hr/>		
C.312	Do you feel that the written materials used in the game are appropriate ?	Yes No	1 2	→Q.C.314
C.313	Why do you feel that the written materials used in the game are not appropriate?	<hr/> <hr/> <hr/> <hr/> <hr/>		
C.314	Do you feel that the visuals/pictorials used in the game are appealing ?	Yes No	1 2	→Q.C.316
C.315	Why do you feel that the visuals /pictorials used in the game are not appealing?	<hr/> <hr/> <hr/> <hr/> <hr/>		
C.316	Do you feel that the written materials used in the game are appealing ?	Yes No	1 2	→Q.C.318
C.317	Why do you feel that the written materials used in the game are not appealing?	<hr/> <hr/> <hr/> <hr/> <hr/>		
C.318	Have you discussed the messages conveyed in the game with any body ?	Yes No	1 2	→Q.C.320

C.319	With whom you discussed the messages conveyed in the game ?	Parents 1 Other family members/relatives 2 Friends 3 Peer educators 4 RRC coordinators 5 Health workers 6 Teacher 7 Panchayat members 8 Others (Specify)_____ 9		
C.320	Do you feel that you are better informed about HIV/AIDS after seeing the messages in the Memory Game?	Yes 1 No 2		
C.321	Do you like to give any suggestion to make the game more effective ?	Yes 1 No 2		→Q.D.301
C.322	What suggestions would you like to give to make the game more effective?	_____ _____ _____ _____		
D	Playing Cards			
D.301	Have you ever seen Playing Cards at the Red Ribbon Club ?	Yes 1 No 2		→E.301
D.302	Have you ever played with the Playing Cards at the Red Ribbon Club?	Yes 1 No 2		→E.301
D.303	How frequently do you play the Playing Cards at the Red Ribbon Club?	Number of days in a Month _____ Less frequently/Occasionally	<input type="text"/> <input type="text"/> 99	
D.304	When did you last play the Playing Cards at the Red Ribbon Club?	Number of days back_____	<input type="text"/> <input type="text"/>	
D.305	Did the Playing Cards had any message related to HIV/AIDS?	Yes 1 No 2		
D.306	Message Recall and understanding	Could you recall any messages conveyed through this Game? Spontaneous 1 Prompted 2 No 3 If No → Skip to next message	Could you understand the message? Yes 1 No 2	If No, what did you find difficult in understanding the message? Language not clear 1 Difficult wordings 2 Lacks clarity 3 Meaning not clear 4 Others (Specify) 7
1	You know your HIV status, Visit the integrated testing and counselling centre at the Government hospital near you.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Having sex with out a condom even once poses the risk of HIV infection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3	A person who looks healthy can also be HIV infected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4	If not treated, sexually transmitted diseases increase risk of getting HIV infection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
D.307	Can you tell us whether you liked, or disliked the Playing Cards with the messages on HIV/AIDS?		Liked	Dis-liked	DK	
		Display of messages	1	2	3	
		Contents of the messages	1	2	3	
		Number of messages	1	2	3	
		Pictorials	1	2	3	
		Presentation style	1	2	3	
		Overall	1	2	3	
D.308	Do you think the Playing Cards with messages on HIV/AIDS is relevant to a person of your age?		Yes No	1 2	→D.309	
D.308 a	Why do you think the messages conveyed through Playing Cards are relevant to a person of your age?	<hr/> <hr/> <hr/> <hr/> <hr/>				
D.309	Why do you think the messages conveyed through Playing Cards are not relevant to a person of your age?	<hr/> <hr/> <hr/> <hr/> <hr/>				
D.310	Do you feel that the visuals/pictorials used in the Playing Cards are appropriate ?		Yes No	1 2	→Q.D. 312	
D.311	Why do you feel that the visuals /pictorials used in the Playing Cards are not appropriate?	<hr/> <hr/> <hr/> <hr/> <hr/>				
D.312	Do you feel that the written materials used in the Playing Cards are appropriate ?		Yes No	1 2	→Q.D. 314	
D.313	Why do you feel that the written materials used in the Playing Cards are not appropriate?	<hr/> <hr/> <hr/> <hr/> <hr/>				
D.314	Do you feel that the visuals/pictorials used in the Playing Cards are appealing ?		Yes No	1 2	→Q.D. 316	

D.315	Why do you feel that the visuals /pictorials used in the Playing Cards are not appealing?	_____		
D.316	Do you feel that the written materials used in the Playing Cards are appealing ?	Yes No	1 2	→Q.D. 318
D.317	Why do you feel that the written materials used in the Playing Cards are not appealing?	_____		
D.318	Have you discussed the messages conveyed in the Playing Cards with any body ?	Yes No	1 2	→Q.D. 320
D.319	With whom you discussed the messages conveyed in the Playing Cards?	Parents Other family members/relatives Friends Peer educators RRC coordinators Health workers Teacher Panchayat members Others (Specify)_____	1 2 3 4 5 6 7 8 9	
D.320	Do you feel that you are better informed about HIV/AIDS after seeing the messages in the Playing Cards?	Yes No	1 2	
D.321	Do you like to give any suggestion to make the Playing Cards more effective ?	Yes No	1 2	→Q.E.301
D.322	What suggestions would you like to give to make the Playing Cards more effective?	_____		
E	Poster on Young Girls (TO BE ASKED TO THE GIRLS SELECTED FOR THE STUDY)			
E.301	Have you ever seen the poster on HIV with a "Young Girl"?	Spontaneously mentioned Mentioned after prompting Mentioned after aiding Not mentioned	1 2 3 4	→ Q.F.301
E.302	How many times have you seen this poster?	Number of times _____		
E.303	Where did you see this poster?	At the RRC At the School Displayed in the village Other location (specify)_____	1 2 3 7	

E.304	According to you what message(s) were conveyed through this poster? RECORD SPONTANEOUS MESSAGES FIRST, THEN READ EACH MESSAGE NOT MENTIONED SPONTANEOUSLY	RECALL OF MESSAGES		
		Spontaneous	Prompted	
			Yes	No
	Let us talk about HIV	1	2	3
Correct knowledge can save our lives	1	2	3	
Knowledge is power	1	2	3	

E.305	What aspects of the poster did you find appropriate/ not appropriate and appealing/ not appealing (READ OUT EACH RESPONSE OPTION)	Various aspects	Whether appropriate		Whether appealing	
			Yes	No	Yes	No
		The photos on the poster	1	2	1	2
		Look of the poster	1	2	1	2
		Colour scheme	1	2	1	2
		Wordings	1	2	1	2
		Presentation of the poster	1	2	1	2
		Language	1	2	1	2
		Message Conveyed	1	2	1	2
		Clarity of Message	1	2	1	2
Overall	1	2	1	2		

E.306	Do you think the messages conveyed through this poster were relevant to a person of your age?	Yes No	1 2	→E.308
E.307	Why do you feel that the poster is not relevant to a person of your age?	<hr/> <hr/> <hr/> <hr/>		
E.308	Have you discussed the messages conveyed in the poster with any body?	Yes No	1 2	→E.310
E.309	With whom you discussed the messages conveyed in the poster?	Parents Other family members Friends Peer educators RRC coordinators Health workers Teacher Panchayat members Others (Specify)_____	01 02 03 04 05 06 07 08 77	
E.310	Did you acquire more information on HIV after seeing the poster?	Yes No	1 2	
E.311	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2	→F.301

E.312	What suggestions would you like to give to make the poster more effective?	_____		

F	Poster on Young Boys (TO BE ASKED TO THE BOYS SELECTED FOR THE STUDY)			
F.301	Have you ever seen the poster on HIV with a "Young Boy"?	Spontaneously mentioned Mentioned after prompting Mentioned after aiding Not mentioned	1 2 3 4	→Skip to Section 4
F.302	How many times have you seen this poster?	Number of times _____		
F.303	Where did you see this poster?	At the RRC At the School Displayed in the village Other location specify)_____	1 2 3 7	

F.304	According to you what message(s) were conveyed through this poster? RECORD SPONTANEOUS MESSAGES FIRST, THEN READ EACH MESSAGE NOT MENTIONED SPONTANEOUSLY	RECALL OF MESSAGES					
		Spontaneous	Prompted				
			Yes	No			
		Let us talk about HIV	1	2	3		
Correct knowledge can save our lives	1	2	3				
Knowledge is power	1	2	3				
F.305	What aspects of the poster did you find appropriate/ not appropriate and appealing/ not appealing (READ OUT EACH RESPONSE OPTION)	Various aspects	Whether appropriate		Whether appealing		
			Yes	No	Yes	No	
		The photos on the poster	1	2	1	2	
		Look of the poster	1	2	1	2	
		Colour scheme	1	2	1	2	
		Wordings	1	2	1	2	
		Presentation of the poster	1	2	1	2	
		Language	1	2	1	2	
		Message Conveyed	1	2	1	2	
		Clarity of Message	1	2	1	2	
Overall	1	2	1	2			
F.306	Do you think the messages conveyed through this poster were relevant to a person of your age?	Yes No	1 2		→Skip to F.308		
F.307	Why do you feel that the poster is not relevant to a person of your age?	<hr/> <hr/> <hr/> <hr/> <hr/>					

F.308	Have you discussed the messages conveyed in the Playing Cards with any body?	Yes No	1 2	→Skip to F.310
F.309	With whom you discussed the messages conveyed in the Playing Cards?	Parents Other family members Friends Peer educators RRC coordinators Health workers Teacher Panchayat members Others (Specify)_____	01 02 03 04 05 06 07 08 77	
F.310	Did you acquire more information on HIV after seeing the poster?	Yes No	1 2	
F.311	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2	→Skip to Section4
F.312	What suggestions would you like to give to make the poster more effective?	<hr/> <hr/> <hr/> <hr/>		

SECTION 4: KNOWLEDGE & ATTITUDE ABOUT HIV/AIDS

S. No.	Question	Responses	Code	Skip to
401	Have you ever heard of HIV?	Yes No No Response	1 2 3	
402	Have you ever heard of AIDS?	Yes No No Response	1 2 3	
403	Can a person get HIV/AIDS by getting injections with a needle that has been already used by someone else who is infected?	Yes No No Response	1 2 3	
404	Can people get HIV/AIDS from an infected blood transfusion?	Yes No No Response	1 2 3	
405	Can a pregnant woman infected with HIV or AIDS transmit the virus to her unborn child?	Yes No No Response	1 2 3	
406	Can people get HIV/AIDS through sexual contact?	Yes No No Response	1 2 3	
407	Do you think that sex with more than one partner can lead to HIV infection?	Yes No No Response	1 2 3	

S. No.	Question	Responses			Code	Skip to
408	Do you think that a person suffering from sexually transmitted infections has a high chance of HIV/AIDS exposure?	Yes No No Response			1 2 3	
409	Do you think that a healthy-looking person can also transmit HIV/AIDS?	Yes No No Response			1 2 3	
410	Can a person get HIV/AIDS by sharing a meal with someone who is infected?	Yes No No Response			1 2 3	
411	Can HIV/AIDS spread through touching each other or social interaction ?	Yes No No Response			1 2 3	
412	Can people protect themselves from HIV/AIDS by having one uninfected faithful sex partner?	Yes No No Response			1 2 3	
413	Have you ever heard of or seen a condom?	Yes No No Response			1 2 3	
414	Can people protect themselves from HIV/AIDS by using a condom every time they have sex?	Yes No No Response			1 2 3	
415	Do we have any medicine that can cure a HIV/AIDS patient?	Yes No No Response			1 2 3	
416	Have you ever heard of Integrated Testing and Counselling Centers (ICTC)	Yes No No Response			1 2 3	
417	Can any body test his/her HIV status at the Integrated Testing and Counselling Centers (ICTC)?	Yes No No Response			1 2 3	
418	Do you agree or disagree with the following statements	Agree	Neither agree nor disagree	Disagree	Don't know	
i	Sex without a condom is the greatest cause of HIV transmission	1	2	3	4	
ii	Using a condom every time during sex reduces the risk of HIV	1	2	3	4	
iii	Sex with out condom even for once poses the risk of HIV infection	1	2	3	4	
iv	Having sex under the influence of alcohol poses the risk of HIV infection	1	2	3	4	
v	Before donating blood one should make sure that he/she is tested for HIV	1	2	3	4	
vi	A tattoo done with infected needle can lead to HIV infection	1	2	3	4	

S. No.	Question	Responses			Code	Skip to
vii	One should always use a new needle or get it sterilised	1	2	3	4	
viii	HIV can strike anyone	1	2	3	4	
ix	It can take 8- 12 years for an HIV infected person to develop AIDS symptoms	1	2	3	4	
x	One should not have any discrimination towards a HIV infected persons	1	2	3	4	
xi	One can be HIV infected and yet may not be aware of it	1	2	3	4	
xii	An HIV positive person can also lead a normal life	1	2	3	4	
xiii	With love and concern, we can help an HIV positive person lead a normal life	1	2	3	4	
xiv	The right knowledge about HIV may save your life as well as your friends'	1	2	3	4	
xv	One should know his/her HIV status to live life responsibly	1	2	3	4	
xvi	You can get information on HIV and AIDS at Integrated Counselling and Testing Centres	1	2	3	4	
xvii	Pregnancy can be risky at an early age	1	2	3	4	
xviii	Taking drugs is injurious to health	1	2	3	4	
xix	We should not support early marriage	1	2	3	4	
419	How much are you at risk of contracting HIV/AIDS? Would you say: no risk at all, medium risk or high risk?	No Risk At All Medium Risk High Risk			1 2 3	

THANK AND TERMINATE THE INTERVIEW

ASSESSMENT OF EFFECTIVENESS OF IEC MATERIAL AT RED RIBBION CLUBS

(A Study Sponsored by UNICEF)

SCHEDULE FOR PEER EDUCATORS

Schedule Number

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IDENTIFICATION			
STATE	Karnataka Andhra Pradesh Maharashtra West Bengal Gujarat	1 2 3 4 5	<input type="checkbox"/>
DISTRICT	Raichur Guntur Sangli Purulia Baroda	1 2 3 4 5	<input type="checkbox"/> <input type="checkbox"/>
TYPE OF SETTLEMENT	Rural Urban	1 2	<input type="checkbox"/>
NAME OF RRC _____			
SCHEDULE NUMBERR _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
NAME OF THE PEER EDUCATOR _____			
TYPE OF RESPONDENT	Female Male	1 2	<input type="checkbox"/>
Interview Date _____	Date _____	Month _____	Year _____
RESULT OF INTERVIEW Result codes: Completed 1; Partially completed 2; Refused 3; Locked / Respondent not available for the interview 4			<input type="checkbox"/>
_____ Name and code of the Investigator		<input type="checkbox"/> <input type="checkbox"/>	_____ Signature of the Investigator
Name Date	Spot Checked By _____ _____	Office Edited By _____ _____	Keyed By _____ _____

CONFIDENTIALITY AND CONSENT

Namaste! My name is ----- and I am working for ORG Centre for Social Research. We are conducting a survey for UNICEF to assess the effectiveness of IEC material display at Red Ribbon Clubs. In this regard we will interview you for about 45 minutes. We will not record your name anywhere. Your participation is voluntary and you can choose not to answer questions on any issue if you are not comfortable. We will not tell anyone about the interview besides using it for our research. We would greatly appreciate your participation in this survey.

Do you agree to participate in the interview? Yes 1 No 2

SECTION 1: BACKGROUND INFORMATION

S. No.	Question	Responses	Code	Skip to
101	What is your current age?	Age in completed years _____ <input type="text"/> <input type="text"/> Don't Know/Can't say97		
102	Social Category/ Caste	Scheduled Caste	1	
		Scheduled Tribe	2	
		Other Backward Caste	3	
		Others (Specify)_____	7	
103	What has been your highest level of educational attainment?	Illiterate Literate with non formal education 1 - 5th 6 - 8th 9 -10th 11 - 12th Technical Education (Diploma) Graduate and above	1 2 3 4 5 6 7 8	

SECTION 2: INFORMATION ABOUT RRC

S. No.	Question	Responses	Code	Skip to
201	Since when are you working as peer educator with RRC?	_____months		
202	How did you come to know about this service?	Self initiative	1	
		Motivated by friend	2	
		Ad in the newspaper	3	
		Panchayati member informed about it	4	
		NGO working in our area	5	
		Others (specify)_____	7	

S. No.	Question	Responses	Code	Skip to
203	How were you selected as peer educator? Multiple Response Possible	Fulfilling the criterion of the program Popularity in the community Knowledge regarding HIV/AIDS Informed by Some body/ Influential person in the area Others (Specify)_____	1 2 3 4 5	
204	Have you been provided any training related to RRC?	Yes No	1 2	→214
205	When did you receive the training as peer-educator?	_____ Months back		
206	Where did you receive the training?	PHC Training Centre Panchayat Office Other (Specify)_____	1 2 3 7	
207	What was the duration of training	_____ days		
208	What were the topics covered during the training? INS: Multiple Response Possible	Knowledge about HIV/AIDS Spread of HIV/AIDS Preventive measures for HIV/AIDS Effective usage of IEC material Counselling Referral services Roles and Responsibilities of peer educator Aims and objectives of program Others (specify) _____	01 02 03 04 05 06 07 08 77	
209	Did you find the training useful?	Yes No	1 2	→211
210	Why do you say so?	_____ _____ _____ _____		} →212
211	If yes, how the training was helpful? INS: Multiple Response Possible	Acquired better knowledge on HIV/AIDS Learnt skills for rapport building Learnt skills for generating community support Learnt skills to organize group discussions Learnt skills for IEC/Counselling Developed leadership skills Developed new contacts Others (specify) _____	01 02 03 04 05 06 07 77	
212	Do you need any additional training?	Yes No	1 2	→214
213	On what issues do you need additional trainings?	_____ _____ _____ _____		

S. No.	Question	Responses	Code	Skip to
214	What are your roles and responsibility as the peer-educator? INS: Multiple Response Possible	Create awareness about HIV/AIDS in the community Educate youth about HIV testing facility Educate youth about condom use Educate youth about early treatment about STI Organize group meetings on HIV/AIDS Organize rally on HIV/AIDS Organise puppet show on HIV/AIDS Organise other educational activity Other (Specify)_____	01 02 03 04 05 06 07 08 77	
215	From where do you function?	Own home Rented building Panchayat office Other (Specify)_____	1 2 2 7	
216	How much time do you spend in a week as peer-educator?	_____ hours per week		
217	Who are the target population with whom you have to interact or work with? INS: Multiple Response Possible	Adolescent (10-18 years) Young people (19-24 years) Married couples Elders Other (Specify)_____	1 2 3 4 7	
Availability and Supply of Material				
218	Have you been provided any IEC material?	Yes No	1 2	
219	What type of IEC materials have been provided to you? INS: Multiple Response Possible	Books Posters Charts Pamphlets CDs Playing cards Carom board Fun and Dragon Game Memory game Handbills Hoardings Songs and jingles Teasers Training manuals Others (Specify) _____	01 02 03 04 05 06 07 08 09 10 11 12 13 14 77	
228	From where do you receive the supply of IEC material?	Health facilities in the area NGO responsible for the RRC Other NGO Other Peer-Educator Others (specify)_____	1 2 3 4 7	
229	Is the material supplied to you directly or you have to collect it?	Material supplied Have to collect the material	1 2	→233

S. No.	Question	Responses	Code	Skip to
230	What is the frequency of supply of IEC material?	Fortnightly Monthly Bimonthly Quarterly Half yearly Yearly Other (Specify)	1 2 3 4 5 6 7	
231	Is the material supplied to you in sufficient quantity?	Yes No	1 2	→A301
232	Why do you say so? INS: Multiple Response Possible	_____ _____ _____ _____		} → A301
233	How frequently you collect the material?	Fortnightly Monthly Bimonthly Quarterly Half yearly Yearly	1 2 3 4 5 6	
234	Do you receive the required material as per the request?	Yes No	1 2	→A301
235	If no, why do you say so? INS: Multiple Response Possible	Material not available at the time of request Required quantity not available when required No time to collect the material Others (specify)_____	1 2 3 7	

SECTION 3: AWARENESS & PERCEPTION REGARDING IEC MATERIALS AT RRCs

A	Fun and Dragon Game			
301	Have you ever seen any Fun and Dragon Game at the Red Ribbon Club?	Yes No	1 2	→322
302	Have you received any training to facilitate other people to play the Fun and Dragon game?	Yes No	1 2	
303	Have you received any instructions to play the Fun and Dragon game?	Yes No	1 2	
304	Have you ever played/facilitated the Fun and Dragon Game at the Red Ribbon Club?	Yes No	1 2	→307

305	How frequently do you play/facilitate the Fun and Dragon Game at the Red Ribbon Club?	Number of days in a Month _____ Less frequently/Occasionally 99	<input type="text"/>	<input type="text"/>	
306	When did you last play/conduct the Fun and Dragon Game at the Red Ribbon Club?	Number of days back _____	<input type="text"/>	<input type="text"/>	
307	Did the Fun and Dragon Game have any message related to HIV/AIDS?	Yes No	1 2		
308	Message Recall and understanding	Could you recall any messages conveyed through this Game? Spontaneous 1 Prompted 2 No 3 If No → Skip to next message	Could you understand the message? Yes 1 No 2	If No, what did you find difficult in understanding the message? Language not clear 1 Difficult wordings 2 Lacks clarity 3 Others (Specify) 7	
1	One should not hesitate to buy a condom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2	One should not take the risk of having sex without a condom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	One should keep genitals clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4	One should not discriminate towards a HIV infected person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	Using a condom every time during sex reduces the risk of HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6	Getting tattoos done on the body poses the risk of HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7	Sex with out condom even for once poses the risk of HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8	Before donating blood you will make sure you are tested for HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9	Sharing needles for drugs can cause HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10	One should take enough precautions for his/her safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11	Having sex under the influence of alcohol poses the risk of HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12	Once the STDs are treated the chances of HIV infection is less	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13	One must know his/her HIV status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14	Always use a new needle or get it sterilised	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15	Pregnancy can be risky at an early age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

16	Blood not tested for HIV may transmit the infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
17	Taking drugs is injurious to health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
18	One should not support early marriage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
19	Alcohol is harmful to health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
20	Always use a condom during sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
21	One can be HIV infected and yet may not be aware of it	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
309	Can you tell us whether you liked, or disliked the Fun and Dragon Game with the messages on HIV/AIDS?		Liked	Dis-liked	DK	
		Display of messages	1	2	3	
		Contents of the messages	1	2	3	
		Pictorials	1	2	3	
		Presentation style	1	2	3	
		Overall	1	2	3	
310	Do you think the Fun and Dragon Game with messages on HIV/AIDS is relevant for the target groups for which it is designed?		Yes No	1 2	→312	
311	Why do you think the messages conveyed through this game are relevant?	<hr/> <hr/> <hr/> <hr/>			} →313	
312	Why do you think the messages conveyed through this game are not relevant?	<hr/> <hr/> <hr/> <hr/>				
313	Have you discussed the messages conveyed in the game with any body?		Yes No	1 2	→315	
314	With whom you discussed the messages conveyed in the game? MULTIPLE RESPONSE POSSIBLE		Parents Family members/relatives Young boys/girls Friends Other Peer educators RRC coordinators Health workers Teacher Panchayat members Others (Specify)_____	01 02 03 04 05 06 07 08 09 77		
315	Do you feel that you are better informed about HIV/AIDS after seeing the messages in the Fun and Dragon Game?		Yes No	1 2		

316	Do you find any difficulty in explaining /influencing beneficiaries about the messages in the game?	Yes No	1 2	→318
317	What difficulties do you encounter in explaining /influencing beneficiaries about the messages in the game?	_____		

318	Do you face any other problem with respect to this game ?	Yes No	1 2	→320
319	What other problems do you encounter with respect to this game ?	_____		

320	Do you like to give any suggestion to make the game more effective?	Yes No	1 2	→322
321	What suggestions would you like to give to make the game more effective?	_____		

B	Carom Board			
322	Have you ever seen any Carom Board at the Red Ribbon Club?	Yes No	1 2	→340
323	Have you received any training to facilitate other people to play the Carom Board?	Yes No	1 2	
324	Have you received any instructions to play the Carom Board?	Yes No	1 2	
324a	Have you ever played/facilitated the Carom Board at the Red Ribbon Club?	Yes No	1 2	→324d
324b	How frequently do you play/facilitate the Carom Board at the Red Ribbon Club?	Number of days in a Month _____ Less frequently/Occasionally		
324c	When did you last play the Carom Board at the Red Ribbon Club?	Number of days back _____		
324d	Did the Carom Board at the RRC have any message related to HIV/AIDS?	Yes No	1 2	

325	Message Recall and understanding	<p>Could you recall any messages conveyed through this Game?</p> <p>Spontaneous 1 Prompted 2 No 3</p> <p>If No → Skip to next message</p>	<p>Could you understand the message?</p> <p>Yes 1 No 2</p>	<p>If No, what did you find difficult in understanding the message?</p> <p>Language not clear 1 Difficult wordings 2 Lacks clarity 3 Readability 4 Others (Specify) 7</p>			
1	Sharing needles while taking intravenous drugs can lead to HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2	One can shake hands , sit along with and share food with an HIV positive person with out any fear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3	Being faithful to your partner can protect you from HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4	Sex with more than one partner can lead to HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5	Visit antenatal clinic for proper counselling, medication and to know your HIV status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6	An HIV positive mother can pass on the infection to her child at the time of birth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7	Having sex without condom even once can lead to HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8	If not treated sexually transmitted diseases increase the risk of getting HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
326	Can you tell us whether you liked, or disliked the Carom Board with messages on HIV/AIDS?		Liked	Dis-liked	DK		
	Display of messages	1	2	3			
	Contents of the messages	1	2	3			
	Number of messages	1	2	3			
	Pictorials	1	2	3			
	Presentation style	1	2	3			
	Overall	1	2	3			
327	Do you think the Carom Board with messages on HIV/AIDS is relevant to the target groups for which it is designed?		Yes	No	1	2	→328 →329

328	Why do you think the messages conveyed through this game are relevant to a person of your age?	_____		
329	Why do you think the messages conveyed through this game are not relevant to a person of your age?	_____		
330	Have you discussed the messages conveyed in the game with any body?	Yes No	1 2	→332
331	With whom you discussed the messages conveyed in the game? MULTIPLE RESPONSE POSSIBLE	Parents Family members/relatives Young boys/girls Friends Other Peer educators RRC coordinators Health workers Teacher Panchayat members Others (Specify)_____	01 02 03 04 05 06 07 08 09 77	
332	Do you feel that you are better informed about HIV/AIDS after seeing the messages in the Carom Board?	Yes No	1 2	
333	Do you find any difficulty in explaining /influencing beneficiaries about the messages in the game?	Yes No	1 2	→335
334	What difficulties do you encounter in explaining /influencing beneficiaries about the messages in the game?	_____		
335	Do you face any other problem with respect to this game ?	Yes No	1 2	→338
337	What other problems do you encounter with respect to this game ?	_____		
338	Do you like to give any suggestion to make the game more effective?	Yes No	1 2	→340
339	What suggestions would you like to give to make the game more effective?	_____		
C	Memory Game			
340	Have you ever seen any Memory Game at the Red Ribbon Club ?	Yes No	1 2	→359

340 a	Have you received any training to facilitate other people to play the Memory Game?	Yes No	1 2	
341	Have you received any instructions to play the Memory Game?	Yes No	1 2	
342	Have you ever played/facilitated the Memory Game at the Red Ribbon Club ?	Yes No	1 2	→345
343	How frequently do you play/facilitate the Memory Game at the Red Ribbon Club?	Number of days in a Month _____ Less frequently/Occasionally	<input type="text"/> 99	
344	When did you last play/conduct the Memory Game at the Red Ribbon Club?	Number of days back _____	<input type="text"/>	
345	Did the Memory Game had any message related to HIV/AIDS?	Yes No	1 2	
	Message Recall and understanding	Could you recall any messages conveyed through this Game? Spontaneous 1 Prompted 2 No 3 If No → Skip to next message	Could you understand the message? Yes 1 No 2	If No, what did you find difficult in understanding the message ? Language not clear 1 Difficult wordings 2 Lacks clarity 3 Others (Specify) 7
1	Having sex without a condom even once can lead to HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	An HIV positive mother can pass on the infection to her child during childbirth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	An HIV positive person can also lead a normal life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Pregnancy at an early stage is harmful for the body	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Sex without a condom is the greatest cause of HIV transmission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	The right knowledge about HIV may save your life as well as your friends'	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Always using a new syringe or one that has been thoroughly sterilized by boiling will protect you from HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8	You can get information on HIV and AIDS at Integrated Counselling and Testing Centres	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Get sexually transmitted diseases treated to protect yourself from HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Only when treated for HIV, blood is safe for transfusion. HIV can spread through infected blood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Know your HIV status to live your life responsibly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	With love and concern, we can help an HIV positive person lead a normal life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	With help of medicines, proper nutrition and exercise, an HIV positive person can lead a normal life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	Having sex under the influence of alcohol places you at risk of HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	A tattoo done with infected needle can lead to HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16	Know your HIV status . You can find Integrated Counselling and Testing Centres at government hospitals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17	You protect yourself from HIV infection if you use a condom every time during sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18	If untreated, sexually transmitted diseases increase the chance of HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19	HIV can strike anyone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20	HIV doesn't spread through touching each other or social interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21	You can get HIV infection if you share needles for injecting drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22	Using a condom every time during sex can protect you from HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23	Blood not tested for HIV can cause HIV infection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24	It can take 8- 12 years for an HIV infected person to develop AIDS symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

346	Can you tell us whether you liked, or disliked the Memory Game with the messages on HIV/AIDS?		Liked	Dis-liked	DK	
		Display of messages	1	2	3	
		Contents of the messages	1	2	3	
		Number of messages	1	2	3	
		Pictorials	1	2	3	
		Presentation style	1	2	3	
		Overall	1	2	3	
347	Do you think the Memory Game with messages on HIV/AIDS is relevant the target groups for which it is designed?		Yes No	1 2		→349
348	Why do you think the messages conveyed through this game are relevant to a person of your age?	<hr/> <hr/> <hr/> <hr/> <hr/>				} →350
349	Why do you think the messages conveyed through this game are not relevant to a person of your age?	<hr/> <hr/> <hr/> <hr/>				
350	Have you discussed the messages conveyed in the game with any body ?		Yes No	1 2		→352
351	With whom you discussed the messages conveyed in the game ? MULTIPLE RESPONSE POSSIBLE		Parents Family members/relatives Young boys/girls Friends Other Peer educators RRC coordinators Health workers Teacher Panchayat members Others (Specify)_____	01 02 03 04 05 06 07 08 09 77		
352	Do you feel that you are better informed about HIV/AIDS after seeing the messages in the Memory Game?		Yes No	1 2		
353	Do you find any difficulty in explaining /influencing beneficiaries about the messages in the game?		Yes No	1 2		
354	What difficulties do you encounter in explaining /influencing beneficiaries about the messages in the game?	<hr/> <hr/> <hr/> <hr/>				
355	Do you face any other problem with respect to this game ?		Yes No	1 2		→357

356	What other problems do you encounter with respect to this game ?	_____		
357	Do you like to give any suggestion to make the game more effective ?	Yes No	1 2	→359
358	What suggestions would you like to give to make the game more effective?	_____		
D	Playing Cards			
359	Have you ever seen Playing Cards at the Red Ribbon Club ?	Yes No	1 2	→379
360	Have you received any training to facilitate other people to play the Playing Cards?	Yes No	1 2	
361	Have you received any instructions to play the Playing Cards?	Yes No	1 2	
362	Have you ever played/facilitated playing the Playing Cards at the Red Ribbon Club?	Yes No	1 2	→365
363	How frequently do you play/facilitate the Playing Cards at the Red Ribbon Club?	Number of days in a Month _____ Less frequently/Occasionally	<input type="text"/> 99	
364	When did you last play/conduct the Playing Cards at the Red Ribbon Club?	Number of days back _____	<input type="text"/>	
365	Did the Playing Cards had any message related to HIV/AIDS?	Yes No	1 2	
	Message Recall and understanding	Could you recall any messages conveyed through this Game? Spontaneous 1 Prompted 2 No 3 If No → Skip to next message	Could you understand the message? Yes 1 No 2	If No, what did you find difficult in understanding the message ? Language not clear 1 Difficult wordings 2 Lacks clarity 3 Others (Specify) 7
1	You know your HIV status, Visit the integrated testing and counselling center at the Government hospital near you.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Having sex with out a condom even once poses the risk of HIV infection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	A person who looks healthy can also be HIV infected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4	If not treated, sexually transmitted diseases increase risk of getting HIV infection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
366	Can you tell us whether you liked, or disliked the Playing Cards with the messages on HIV/AIDS?		Liked	Dis-liked	DK
		Display of messages	1	2	3
		Contents of the messages	1	2	3
		Number of messages	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
		Overall	1	2	3
367	Do you think the Playing Cards with messages on HIV/AIDS is relevant the target groups for which it is designed?		Yes No	1 2	→369
368	Why do you think the messages conveyed through Playing Cards are relevant?	<hr/> <hr/> <hr/> <hr/>			} →370
369	Why do you think the messages conveyed through Playing Cards are not relevant?	<hr/> <hr/> <hr/> <hr/>			
370	Have you discussed the messages conveyed in the Playing Cards with any body ?		Yes No	1 2	→372
371	With whom you discussed the messages conveyed in the Playing Cards ? MULTIPLE RESPONSE POSSIBLE		Parents Family members/relatives Young boys/girls Friends Other Peer educators RRC coordinators Health workers Teacher Panchayat members Others (Specify)_____	01 02 03 04 05 06 07 08 09 77	
372	Do you feel that you are better informed about HIV/AIDS after seeing the messages in the Playing Cards?		Yes No	1 2	
373	Do you find any difficulty in explaining /influencing beneficiaries about the messages in the game?		Yes No	1 2	

374	What difficulties do you encounter in explaining /influencing beneficiaries about the messages in the game?	_____		
375	Do you face any other problem with respect to this game ?	Yes	1	→377
		No	2	
376	What other problems do you encounter with respect to this game ?	_____		
377	Do you like to give any suggestion to make the Playing Cards more effective ?	Yes	1	→379
		No	2	
378	What suggestions would you like to give to make the Playing Cards more effective?	_____		
E	Poster on Young Boys (TO BE ASKED TO PEER EDUCATOR - BOYS)			
379	Have you ever seen the poster on HIV with a "Young Boy"?	Spontaneously mentioned	1	→ 393
		Mentioned after prompting	2	
		Mentioned after aiding	3	
		Not mentioned	4	
380	How many times have you seen this poster?	Number of times _____		
381	Where did you see this poster?	At the RRC	1	
		At the School	2	
	Multiple Response Possible	Displayed in the village	3	
		Other location (specify)_____	7	

382	According to you what message(s) were conveyed through this poster? RECORD SPONTANEOUS MESSAGES FIRST, THEN READ EACH MESSAGE NOT MENTIONED SPONTANEOUSLY	RECALL OF MESSAGES		
		Spontaneous	Prompted	
			Yes	No
		Let us talk about HIV	1	2
Correct knowledge can save our lives	1	2	3	
Knowledge is power	1	2	3	

383	What aspects of the poster did you find appropriate/ not appropriate and appealing/ not appealing (READ OUT EACH RESPONSE OPTION)	Various aspects	Whether appropriate		Whether appealing	
			Yes	No	Yes	No
		The photos on the poster	1	2	1	2
		Look of the poster	1	2	1	2
		Colour scheme	1	2	1	2
		Wordings	1	2	1	2
		Presentation of the poster	1	2	1	2
		Language	1	2	1	2
		Message Conveyed	1	2	1	2
		Clarity of Message	1	2	1	2
Overall	1	2	1	2		
384	Do you think the messages conveyed through this poster were relevant the target groups for which it is designed?	Yes No		1 2		→ 385
384b	Why do you feel that the poster is relevant for the target groups for which it is designed?	<hr/> <hr/> <hr/> <hr/>			} → 386	
385	Why do you feel that the poster is not relevant for the target groups for which it is designed?	<hr/> <hr/> <hr/> <hr/>				
386	Have you discussed the messages conveyed in the poster with any body?		Yes No	1 2		→ 388

387	With whom you discussed the messages? MULTIPLE RESPONSE POSSIBLE	Parents Family members/relatives Young boys/girls Friends Other Peer educators RRC coordinators Health workers Teacher Panchayat members Others (Specify)_____	01 02 03 04 05 06 07 08 09 77	
388	Did you acquire more information on HIV after seeing the poster?	Yes No	1 2	
389	Do you face any other problem with respect to this poster ?	Yes No	1 2	→391
390	What other problems do you encounter with respect to this poster ?	_____ _____ _____ _____		
391	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2	→393
392	What suggestions would you like to give to make the poster more effective?	_____ _____ _____ _____		
F	Poster on Young Girls (TO BE ASKED TO (TO BE ASKED TO PEER EDUCATOR - GIRLS)			
393	Have you ever seen the poster on HIV with a "Young Girl"?	Spontaneously mentioned Mentioned after prompting Mentioned after aiding Not mentioned	1 2 3 4	→ 3007
394	How many times have you seen this poster?	Number of times _____		
395	Where did you see this poster?	At the RRC At the School Displayed in the village Other location specify)_____	1 2 3 7	
396	According to you what message(s) were conveyed through this poster? RECORD SPONTANEOUS MESSAGES FIRST, THEN READ EACH MESSAGE NOT MENTIONED SPONTANEOUSLY	RECALL OF MESSAGES		
		Spontaneous	Prompted	
			Yes No	
	Let us talk about HIV	1	2 3	
	Correct knowledge can save our lives	1	2 3	
	Knowledge is power	1	2 3	

397	What aspects of the poster did you find appropriate/ not appropriate and appealing/ not appealing (READ OUT EACH RESPONSE OPTION)	Various aspects	Whether appropriate		Whether appealing		
			Yes	No	Yes	No	
		The photos on the poster	1	2	1	2	
		Look of the poster	1	2	1	2	
		Colour scheme	1	2	1	2	
		Wordings	1	2	1	2	
		Presentation of the poster	1	2	1	2	
		Language	1	2	1	2	
		Message Conveyed	1	2	1	2	
		Clarity of Message	1	2	1	2	
	Overall	1	2	1	2		
398	Do you think the messages conveyed through this poster were relevant for the target groups for which it is designed?	Yes No	1 2				→399
398a	Why do you feel that the poster is relevant for the target groups for which it is designed?	<hr/> <hr/> <hr/> <hr/> <hr/>				} →3000	
399	Why do you feel that the poster is not relevant for the target groups for which it is designed?	<hr/> <hr/> <hr/> <hr/>					
3000	Have you discussed the messages conveyed in the poster with any body?	Yes No		1 2			→3002
3001	With whom you discussed the messages conveyed in the poster? MULTIPLE RESPONSE POSSIBLE	Parents		01			
		Family members/relatives		02			
		Young boys/girls		03			
		Friends		04			
		Other Peer educators		05			
		RRC coordinators		06			
		Health workers		07			
		Teacher		08			
		Panchayat members		09			
		Others (Specify)_____		77			
3002	Did you acquire more information on HIV after seeing the poster?	Yes No		1 2			
3003	Do you face any problem with respect to this poster ?	Yes No		1 2			→3005

3004	What problems do you encounter with respect to this poster ?	<hr/> <hr/> <hr/> <hr/>					
3005	Do you like to give any suggestion to make the poster more effective?	Yes	1	→3007			
		No	2				
3006	What suggestions would you like to give to make the poster more effective?	<hr/> <hr/> <hr/> <hr/>					
G	Poster on Peer Educator - Boys (TO BE ASKED TO PEER EDUCATOR - BOYS)						
3007	Have you ever seen the poster on HIV with a "Peer Educator - Boy"?	Spontaneously mentioned	1	→ 3021			
		Mentioned after prompting	2				
		Mentioned after aiding	3				
		Not mentioned	4				
3008	How many times have you seen this poster?	Number of times _____					
3009	Where did you see this poster?	At the RRC	1				
		At the School	2				
		Displayed in the village	3				
		Other location (specify)_____	7				
3010	According to you what message(s) were conveyed through this poster? RECORD SPONTANEOUS MESSAGES FIRST, THEN READ EACH MESSAGE NOT MENTIONED SPONTANEOUSLY	RECALL OF MESSAGES					
		Spontaneous	Prompted				
			Yes	No			
		If we the youth know about HIV infection, we can save the whole generation.	1	2	3		
	Knowledge is power	1	2	3			
3011	What aspects of the poster did you find appropriate/ not appropriate and appealing/ not appealing (READ OUT EACH RESPONSE OPTION)	Various aspects	Whether appropriate		Whether appealing		
			Yes	No	Yes	No	
		The photos on the poster	1	2	1	2	
		Look of the poster	1	2	1	2	
		Colour scheme	1	2	1	2	
		Wordings	1	2	1	2	
		Presentation of the poster	1	2	1	2	
		Language	1	2	1	2	
		Message Conveyed	1	2	1	2	
Clarity of Message	1	2	1	2			

		Overall	1	2	1	2	
3012	Do you think the messages conveyed through this poster were relevant for the target groups for which it is designed?	Yes No			1 2		→3013
3012 a	Why do you feel that the poster is relevant for the target groups for which it is designed?	<hr/> <hr/> <hr/>					} →3014
3013	Why do you feel that the poster is not relevant for the target groups for which it is designed?	<hr/> <hr/> <hr/>					
3014	Have you discussed the messages conveyed in the poster with any body?		Yes No		1 2		→3016
3015	With whom you discussed the messages? MULTIPLE RESPONSE POSSIBLE		Parents Family members/relatives Young boys/girls Friends Other Peer educators RRC coordinators Health workers Teacher Panchayat members Others (Specify)_____		01 02 03 04 05 06 07 08 09 77		
3016	Did you acquire more information on HIV after seeing the poster?		Yes No		1 2		
3017	Do you face any problem with respect to this poster ?		Yes No		1 2		→ 3019
3018	What problems do you encounter with respect to this poster ?	<hr/> <hr/> <hr/> <hr/>					
3019	Do you like to give any suggestion to make the poster more effective?		Yes No		1 2		→3021
3020	What suggestions would you like to give to make the poster more effective?	<hr/> <hr/> <hr/> <hr/>					} →3038
H	Poster on Peer Educator - Girls (TO BE ASKED TO PEER EDUCATOR - GIRLS)						
3021	Have you ever seen the poster on HIV with a "Peer Educator - Girl"?		Spontaneously mentioned Mentioned after prompting Mentioned after aiding Not mentioned		1 2 3 4		→ 3038
3022	How many times have you seen this poster?	Number of times _____					

3023	Where did you see this poster?	At the RRC At the School Displayed in the village Other location specify)_____	1 2 3 7				
3024	According to you what message(s) were conveyed through this poster? RECORD SPONTANEOUS MESSAGES FIRST, THEN READ EACH MESSAGE NOT MENTIONED SPONTANEOUSLY	RECALL OF MESSAGES					
		Spontaneous	Prompted				
			Yes	No			
	Let us spread the right information , we the youth can control HIV infection	1	2	3			
	Knowledge is power	1	2	3			
3025	What aspects of the poster did you find appropriate/ not appropriate and appealing/ not appealing (READ OUT EACH RESPONSE OPTION)	Various aspects	Whether appropriate		Whether appealing		
			Yes	No	Yes	No	
		The photos on the poster	1	2	1	2	
		Look of the poster	1	2	1	2	
		Colour scheme	1	2	1	2	
		Wordings	1	2	1	2	
		Presentation of the poster	1	2	1	2	
		Language	1	2	1	2	
		Message Conveyed	1	2	1	2	
		Clarity of Message	1	2	1	2	
Overall	1	2	1	2			
3026	Do you think the messages conveyed through this poster were relevant for the target groups for which it is designed?	Yes No	1 2		→3027		
3026a	Why do you feel that the poster is relevant for the target groups for which it is designed?	<hr/> <hr/> <hr/> <hr/> <hr/>			} →3028		
3027	Why do you feel that the poster is not relevant for the target groups for which it is designed?	<hr/> <hr/> <hr/> <hr/>					
3028	Have you discussed the messages conveyed in the poster with any body?	Yes No	1 2	→3030			

3029	With whom you discussed the messages? MULTIPLE RESPONSE POSSIBLE	Parents Family members/relatives Young boys/girls Friends Other Peer educators RRC coordinators Health workers Teacher Panchayat members Others (Specify)_____	01 02 03 04 05 06 07 08 09 77	
3030	Did you acquire more information on HIV after seeing the poster?	Yes No	1 2	
3031	Do you face any problem with respect to this poster?	Yes No	1 2	→ 3036
3032	What problems do you encounter with respect to this poster?	<hr/> <hr/> <hr/> <hr/> <hr/>		
3036	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2	→ 3038
3037	What suggestions would you like to give to make the poster more effective?	<hr/> <hr/> <hr/> <hr/> <hr/>		
3038	Do you need any additional IEC materials for carrying out the job of peer educator?	Yes No	1 2	→ 401
3039	Please provide the details of the IEC materials required			
		Materials Required	Key topics to be covered	Number required
	1			
	2			
	3			
	4			
	5			

SECTION 4: KNOWLEDGE & ATTITUDE ABOUT HIV/AIDS

S. No.	Question	Responses	Code	Skip to
401	Have you ever heard of HIV?	Yes No No Response	1 2 3	
402	Have you ever heard of AIDS?	Yes No No Response	1 2 3	

S. No.	Question	Responses	Code	Skip to
403	Can a person get HIV/AIDS by getting injections with a needle that has been already used by someone else who is infected?	Yes No No Response	1 2 3	
404	Can people get HIV/AIDS from an infected blood transfusion?	Yes No No Response	1 2 3	
405	Can a pregnant woman infected with HIV or AIDS transmit the virus to her unborn child?	Yes No No Response	1 2 3	
406	Can people get HIV/AIDS through sexual contact?	Yes No No Response	1 2 3	
407	Do you think that sex with more than one partner can lead to HIV infection?	Yes No No Response	1 2 3	
408	Do you think that a person suffering from sexually transmitted infections has a high chance of HIV/AIDS exposure?	Yes No No Response	1 2 3	
409	Do you think that a healthy-looking person can also transmit HIV/AIDS?	Yes No No Response	1 2 3	
410	Can a person get HIV/AIDS by sharing a meal with someone who is infected?	Yes No No Response	1 2 3	
411	Can HIV/AIDS spread through touching each other or social interaction?	Yes No No Response	1 2 3	
412	Can people protect themselves from HIV/AIDS by having one uninfected faithful sex partner?	Yes No No Response	1 2 3	
413	Have you ever heard of or seen a condom?	Yes No No Response	1 2 3	
414	Can people protect themselves from HIV/AIDS by using a condom every time they have sex?	Yes No No Response	1 2 3	
415	Do we have any medicine that can cure a HIV/AIDS patient?	Yes No No Response	1 2 3	
416	Have you ever heard of Integrated Testing and Counselling Centers (ICTC)	Yes No No Response	1 2 3	
417	Can any body test his/her HIV status at the Integrated Testing and Counselling Centers (ICTC)?	Yes No No Response	1 2 3	
418	Do you agree or disagree with the following statements	Agree Neither agree nor disagree Disagree	Don't know	

S. No.	Question	Responses			Code	Skip to
i	Sex without a condom is the greatest cause of HIV transmission	1	2	3	4	
ii	Using a condom every time during sex reduces the risk of HIV	1	2	3	4	
iii	Sex with out condom even for once poses the risk of HIV infection	1	2	3	4	
iv	Having sex under the influence of alcohol poses the risk of HIV infection	1	2	3	4	
v	Before donating blood one should make sure that he/she is tested for HIV	1	2	3	4	
vi	A tattoo done with infected needle can lead to HIV infection	1	2	3	4	
vii	One should always use a new needle or get it sterilised	1	2	3	4	
viii	HIV can strike anyone	1	2	3	4	
ix	It can take 8- 12 years for an HIV infected person to develop AIDS symptoms	1	2	3	4	
x	One should not have any discrimination towards a HIV infected persons	1	2	3	4	
xi	One can be HIV infected and yet may not be aware of it	1	2	3	4	
xii	An HIV positive person can also lead a normal life	1	2	3	4	
xiii	With love and concern, we can help an HIV positive person lead a normal life	1	2	3	4	
xiv	The right knowledge about HIV may save your life as well as your friends'	1	2	3	4	
xv	One should know his/her HIV status to live life responsibly	1	2	3	4	
xvi	You can get information on HIV and AIDS at Integrated Counselling and Testing Centres	1	2	3	4	
xvii	Pregnancy can be risky at an early age	1	2	3	4	
xviii	Taking drugs is injurious to health	1	2	3	4	
xix	We should not support early marriage	1	2	3	4	
419	How much are you at risk of contracting HIV/AIDS? Would you say: no risk at all, medium risk or high risk?	No Risk At All Medium Risk High Risk			1 2 3	

THANK AND TERMINATE THE INTERVIEW

STUDY ON ASSESSMENT OF EFFECTIVENESS OF IEC MATERIALS AT RED RIBBON CLUBS

(A Study Sponsored by UNICEF)

SCHEDULE FOR RRC COORDINATORS

Schedule Number

IDENTIFICATION				
STATE	Karnataka	1	<input type="checkbox"/>	
	Andhra Pradesh	2		
	Maharashtra	3		
	West Bengal	4		
	Gujarat	5		
DISTRICT	Raichur	1	<input type="checkbox"/> <input type="checkbox"/>	
	Guntur	2		
	Sangli	3		
	Purulia	4		
	Baroda	5		
TYPE OF SETTLEMENT	Rural	1	<input type="checkbox"/>	
	Urban	2		
NAME OF RRC _____				
SCHEDULE NUMBERR _____				
NAME OF THE RRC COORDINATOR _____				
TYPE OF RESPONDENT	Female	1	<input type="checkbox"/>	
	Male	2		
Interview Date	Date	Month	Year	
_____	_____	_____	_____	
RESULT OF INTERVIEW			<input type="checkbox"/>	
Result codes: Completed 1; Partially completed 2; Refused 3; Locked / Respondent not available for the interview 4				
_____		<input type="text"/> <input type="text"/>	_____	
Name and code of the Investigator			Signature of the Investigator	

Namaste! My name is ----- and I am working for ORG Centre for Social Research. We are conducting a survey for UNICEF to assess the effectiveness of IEC material display at Red Ribbon Clubs. In this regard we will interview you for about 45 minutes. Your participation is voluntary and you can choose not to answer questions on any issue if you are not comfortable. We will not tell anyone about the interview besides using it for our research. We would greatly appreciate your participation in this survey.

Do you agree to participate in the interview? Yes 1 No 2

SECTION 1: BACKGROUND INFORMATION

S. No.	Question	Responses	Code	Skip to
101	What is your current age?	Age in completed years _____ <input type="text"/> <input type="text"/> Don't Know/Can't say97		
102	Religion	Hindu	1	
		Muslim	2	
		Sikh	3	
		Christian	4	
		Jain	5	
		Others (specify)_____	7	
103	Social Category/ Caste	Scheduled Caste	1	
		Scheduled Tribe	2	
		Other Backward Caste	3	
		Others (Specify)_____	7	
104	What has been your highest level of educational attainment?	Illiterate	1	
		Literate with non formal education	2	
		1 - 5th	3	
		6 - 8th	4	
		9 -10th	5	
		11 - 12th	6	
		Technical Education (Diploma)	7	
		Graduate and above	8	

SECTION 2: INFORMATION ABOUT RRC

S. No.	Question	Responses	Code	Skip to
201	Since how long this RRC is functioning?	_____Years		
202	What activities are being carried	Establish Abstinence Club/enrolling	01	

S. No.	Question	Responses	Code	Skip to
	out by this RRC ?	student members Identify and train peer educators Sensitization program for teachers Sensitization program for parents Inter personal counselling Identify students who are practicing risk behaviors/risk sites Referral and follow-up for ICTC services Referral and follow-up for treatment for RTI/STI Identify and provide ToT on traditional media and street theatre Formation of sub groups/cultural team Conducting street play, exhibitions, slide shows, video shows, etc. Distribution and Display of IEC materials Generate support from public/parents Others 1 (Specify) _____ Others 2 (Specify) _____ Others 3 (Specify) _____	02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	
203	Since when are you working as RRC coordinator?	_____ months		
204	Have you been provided any training before or after joining the RRC?	Yes No	1 2	
205	Where did you receive the training?	PHC Training Centre Panchayat Office Other (Specify) _____	1 2 3 7	
206	What was the duration of training	_____ days		
207	What were the topics covered during the training? INS: Multiple Response Possible	Knowledge about HIV/AIDS Spread of HIV/AIDS Preventive measures for HIV/AIDS Effective usage of IEC material Counselling Referral services Roles of RRC coordinator Aims and objectives of program Others (specify) _____	01 02 03 04 05 06 07 08 77	
208	Did you find the training useful?	Yes No	1 2	→210

S. No.	Question	Responses	Code	Skip to
209	If yes, how the training was useful? INS: Multiple Response Possible	Better insight about HIV/AIDS Learnt skills for rapport building Learnt skills for resource mobilization Learnt skills to organize group activities Learnt skills for counselling Insight on running the RRC Developed leadership skills Developed new contacts Others (specify) _____	01 02 03 04 05 06 07 08 77	
210	Do you need any additional training?	Yes No	1 2	→212
211	On what issues do you need additional trainings?	_____ _____ _____		
212	What are your roles and responsibilities as the RRC Coordinator? INS: Multiple Response Possible	Cerate awareness about HIV/AIDS Educate youth about HIV Organize group meetings on HIV/AIDS Organize rally on HIV/AIDS Organise puppet show on HIV/AIDS Organise other educational activity Organise various educational games Other (Specify) _____	01 02 03 04 05 06 07 77	
213	From where do you function?	Own home Rented building Panchayat office Other (Specify) _____	1 2 3 7	
214	How much time in a week do you spend as RRC coordinator?	_____ hours		
215	Who are the target population with whom you have to interact or work with? INS: Multiple Response Possible	Adolescent (10-18 years) Young people (19-24 years) Married couples Elders Other (Specify) _____	1 2 3 4 7	

SECTION 3 : AVAILABILTY AND SUPPLY OF IEC MATERIALS AT THE RRCS

301	Has your RRC been provided the following IEC materials?								
	IEC Material	302 Whether supplied Yes 1, No 2	303 Month and year of receipt of first supply. (mm/yy)				304 Whether available at RRC Yes 1, No 2	305 If yes, whether use the material Yes 1, No 2	306 If not used , reason for non use
1	Carom board with messages on HIV								
2	Fun & Dragon game with messages on HIV								
3	Memory game with messages on HIV								
4	Playing cards with messages on HIV								
5	Posters with a young boy								
6	Posters with a young girl								
7	Posters with a peer educator boy								
8	Posters with a peer educator girl								
9	Posters with a father of a young boy								
10	Posters with a mother of a young girl								
11	Posters with a male teacher								
12	Posters with a female teacher								
13	Posters with a gram Pradhan								

307	Are all the above IEC materials supplied to the RRC are adequate ?	Yes No	1 2	→ 309
308	Which of the IEC materials are not adequate ? (MULTIPLE RESPONSES POSSIBLE)	Carom board Fun & Dragon game Memory game Playing cards Posters with a young boy Posters with a young girl Posters with a peer educator boy Posters with a peer educator girl Posters with a father of a young boy Posters with a mother of a young girl Posters with a male teacher Posters with a female teacher Posters with a gram Pradhan	01 02 03 04 05 06 07 08 09 10 11 12 13	
309	Did you receive the IEC materials within the reasonable time?	Yes No	1 2	→311
310	Why do you feel so?	_____		

311	Did you receive the materials in good condition?	Yes No	1 2	
312	Are you any way involved in supply and distribution of IEC materials?	Yes No	1 2	→314
313	If yes, what role do you play?	_____		

314	Do you encounter any problem in supply/receipt of IEC materials?	Yes No	1 2	→316
315	What problems do you encounter?	Do not receive enough numbers Do not receive in time Are of poor quality Are destroyed/crumpled Have to get it collected/does not reach ICTC/PPTCT Do not get it in the desired language Too many formalities to get IEC material Any other	1 2 3 4 5 6 7 8 9	
316	Do you have storage facility for IEC material?	Yes No	1 2	→318
317	Is the storage facility adequate?	Yes No	1 2	→319
318	How do you manage the storage of IEC materials ?	_____		

319	What are your suggestions to improve the supply chain of IEC materials?	<hr/> <hr/> <hr/> <hr/>	
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SECTION 4: PERCEPTIONS REGARDING THE IEC MATERIALS

A. CAROM BOARD

S. No.	Question	Responses	Code	Skip to	
401	Have you seen the carom board with messages on HIV/AIDS ?	Yes	1	→ 411	
		No	2		
402	Do you think messages conveyed in the carom board are relevant for the young boys/girls ?	Yes No	1 2	→ 404	
403	Why do you think that the messages are not relevant?	<hr/> <hr/> <hr/> <hr/>			
404	Do you approve the messages conveyed through the carom board ?	Yes No	1 2	→ 406	
405	Could you please specify the messages which you do not approve?	<hr/> <hr/> <hr/> <hr/>			
406	Can you tell us whether you liked, or disliked the Carom Board with the messages on HIV/AIDS?	Aspects	Liked	Dis-liked	DK
		Display of messages	1	2	3
		Contents of the messages	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
		Overall	1	2	3
407	Do you encounter any difficulty in using the carom board with messages on HIV/AIDS?	Yes No	1 2	→409	
408	What difficulties did you encounter?	<hr/> <hr/> <hr/> <hr/>			

409	Do you like to give any suggestion to make the game more effective?	Yes No	1 2	→411
410	What suggestions would you like to give to make the game more effective?	<hr/> <hr/> <hr/>		

B. FUN & DRAGON GAME

S. No.	Question	Responses	Code	Skip to
411	Have you seen the "Fun & Dragon Game" with messages on HIV/AIDS?	Yes	1	→ 421
		No	2	

412	Do you think messages conveyed in the Fun & Dragon Game are relevant for the young boys/girls?	Yes No	1 2	→ 414	
413	Why do you think that the messages are not relevant?	<hr/> <hr/> <hr/>			
414	Do you approve the messages conveyed through the Fun & Dragon Game?	Yes No	1 2	→ 416	
415	Could you please specify the messages which you do not approve?	<hr/> <hr/> <hr/>			
416	Can you tell us whether you liked, or disliked the Fun and Dragon Game with the messages on HIV/AIDS?	Aspects	Liked	Dis-liked	DK
		Display of messages	1	2	3
		Contents of the messages	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
		Overall	1	2	3
417	Do you encounter any difficulty in using the Fun & Dragon Game with messages on HIV/AIDS?	Yes No	1 2	→419	
418	What difficulties did you encounter?	<hr/> <hr/> <hr/>			

419	Do you like to give any suggestion to make the game more effective?	Yes No	1 2	→421
420	What suggestions would you like to give to make the game more effective?	<hr/> <hr/> <hr/>		

B. MEMORY GAME

S. No.	Question	Responses	Code	Skip to
421	Have you seen the "Memory Game" with messages on HIV/AIDS ?	Yes	1	→ 431
		No	2	

422	Do you think messages conveyed in the Memory Game are relevant for the young boys/girls?	Yes No	1 2	→ 424	
423	Why do you think that the messages are not relevant?	<hr/> <hr/> <hr/>			
424	Do you approve the messages conveyed through the Memory Game?	Yes No	1 2	→ 426	
425	Could you please specify the messages which you do not approve?	<hr/> <hr/>			
426	Can you tell us whether you liked, or disliked the Memory Game with the messages on HIV/AIDS?	Aspects	Liked	Dis-liked	DK
		Display of messages	1	2	3
		Contents of the messages	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
		Overall	1	2	3
427	Do you encounter any difficulty in using the Memory Game with messages on HIV/AIDS?	Yes No	1 2	→429	
428	What difficulties did you encounter?	<hr/> <hr/> <hr/>			
429	Do you like to give any suggestion to make the game more effective?	Yes No	1 2	→431	

430	What suggestions would you like to give to make the game more effective?	_____	_____	_____
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B. PLAYING CARDS

S. No.	Question	Responses	Code	Skip to	
431	Have you seen the "Playing Cards" with messages on HIV/AIDS ?	Yes	1	→ 441	
		No	2		
432	Do you think messages conveyed in the Playing Cards are relevant for the young boys/girls ?	Yes No	1 2	→ 434	
433	Why do you think that the messages are not relevant?	_____	_____	_____	
434	Do you approve the messages conveyed through the Playing Cards?	Yes No	1 2	→ 436	
435	Could you please specify the messages which you do not approve?	_____	_____	_____	
436	Can you tell us whether you liked, or disliked the Playing Cards with the messages on HIV/AIDS?	Aspects	Liked	Dis-liked	DK
		Display of messages	1	2	3
		Contents of the messages	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
		Overall	1	2	3
437	Do you encounter any difficulty in using the Playing Cards with messages on HIV/AIDS?	Yes No	1 2	→439	
438	What difficulties did you encounter?	_____	_____	_____	
439	Do you like to give any suggestion to make the game more effective?	Yes No	1 2	→441	

440	What suggestions would you like to give to make the game more effective?	<hr/> <hr/> <hr/>	
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B. POSTERS WITH A YOUNG BOY

S. No.	Question	Responses	Code	Skip to
441	Have you seen the "Posters with a Young Boy" with messages on HIV/AIDS?	Yes	1	→ 451
		No	2	

442	Do you think messages conveyed in the poster is relevant for the young boys?	Yes No	1 2	→ 444	
443	Why do you think that the message is not relevant?	<hr/> <hr/> <hr/>			
444	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 446	
445	Could you please specify the message which you do not approve?	<hr/> <hr/> <hr/>			
446	Can you tell us whether you liked, or disliked the poster?	Aspects	Liked	Dis-liked	DK
		Character on the poster	1	2	3
		Look of the poster	1	2	3
		Colour scheme	1	2	3
		Wordings	1	2	3
		Message Conveyed	1	2	3
		Clarity of Message	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
		Overall	1	2	3

447	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No	1 2	→449
448	What difficulties did you encounter?	_____		
449	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2	→451
450	What suggestions would you like to give to make the poster more effective?	_____		

B. POSTERS WITH A YOUNG GIRL

S. No.	Question	Responses	Code	Skip to	
451	Have you seen the "Posters with a Young Girl" with messages on HIV/AIDS?	Yes	1	→ 461	
		No	2		
452	Do you think messages conveyed in the poster is relevant for the young girls?	Yes No	1 2	→ 454	
453	Why do you think that the message is not relevant?	_____			
454	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 456	
455	Could you please specify the message which you do not approve?	_____			
456	Can you tell us whether you liked, or disliked the poster?	Aspects	Liked	Dis-liked	DK
		Character on the poster	1	2	3
		Look of the poster	1	2	3
		Colour scheme	1	2	3
		Wordings	1	2	3
		Message Conveyed	1	2	3
		Clarity of Message	1	2	3

		Pictorials	1	2	3	
		Presentation style	1	2	3	
		Overall	1	2	3	
457	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No	1 2			→459
458	What difficulties did you encounter?	_____				
459	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2			→461
460	What suggestions would you like to give to make the poster more effective?	_____				

B. POSTERS WITH A PEER EDUCATOR BOY

S. No.	Question	Responses	Code	Skip to	
461	Have you seen the "Posters with a peer educator boy" with messages on HIV/AIDS?	Yes No	1 2	→ 471	
462	Do you think messages conveyed in the poster is relevant for the peer educator boys?	Yes No	1 2	→ 464	
463	Why do you think that the message is not relevant?	_____			
464	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 466	
465	Could you please specify the message which you do not approve?	_____			
466	Can you tell us whether you liked, or disliked the poster?	Aspects	Liked	Dis-liked	DK
		Character on the poster	1	2	3
		Look of the poster	1	2	3
		Colour scheme	1	2	3

		Wordings	1	2	3		
		Message Conveyed	1	2	3		
		Clarity of Message	1	2	3		
		Pictorials	1	2	3		
		Presentation style	1	2	3		
		Overall	1	2	3		
467	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No	1 2			→469	
468	What difficulties did you encounter?	<hr/> <hr/> <hr/>					
469	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2			→471	
470	What suggestions would you like to give to make the poster more effective?	<hr/> <hr/> <hr/>					

B. POSTERS WITH A PEER EDUCATOR GIRL

S. No.	Question	Responses	Code	Skip to	
471	Have you seen the "Posters with a peer educator girl" with messages on HIV/AIDS ?	Yes No	1 2	→ 481	
472	Do you think messages conveyed in the poster is relevant for the peer educator girls ?	Yes No	1 2	→ 474	
473	Why do you think that the message is not relevant?	<hr/> <hr/> <hr/>			
474	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 476	
475	Could you please specify the message which you do not approve?	<hr/> <hr/> <hr/>			

476	Can you tell us whether you liked, or disliked the poster?	Aspects	Like	Dis-liked	DK	
		Character on the poster	1	2	3	
		Look of the poster	1	2	3	
		Colour scheme	1	2	3	
		Wordings	1	2	3	
		Message Conveyed	1	2	3	
		Clarity of Message	1	2	3	
		Pictorials	1	2	3	
		Presentation style	1	2	3	
		Overall	1	2	3	
477	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No	1 2			→479
478	What difficulties did you encounter?	_____				
479	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2			→481
480	What suggestions would you like to give to make the poster more effective?	_____				

B. POSTERS WITH FATHER OF A YOUNG BOY

S. No.	Question	Responses	Code	Skip to
481	Have you seen the "Posters with father of a young boy " with messages on HIV/AIDS ?	Yes	1	→ 491
		No	2	
482	Do you think messages conveyed in the poster is relevant for the father of young boys ?	Yes No	1 2	→ 484
483	Why do you think that the message is not relevant?	_____		
484	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 486

485	Could you please specify the message which you do not approve?	<hr/> <hr/> <hr/>			
486	Can you tell us whether you liked, or disliked the poster?	Aspects	Liked	Dis-liked	DK
		Character on the poster	1	2	3
		Look of the poster	1	2	3
		Colour scheme	1	2	3
		Wordings	1	2	3
		Message Conveyed	1	2	3
		Clarity of Message	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
		Overall	1	2	3
487	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No	1 2		→489
488	What difficulties did you encounter?	<hr/> <hr/> <hr/>			
489	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2		→491
490	What suggestions would you like to give to make the poster more effective?	<hr/> <hr/> <hr/>			

B. POSTERS WITH MOTHER OF A YOUNG GIRL

S. No.	Question	Responses	Code	Skip to
491	Have you seen the "Poster with mother of a young girl " with messages on HIV/AIDS ?	Yes	1	→ 4001
		No	2	
492	Do you think messages conveyed in the poster is relevant for the mother of young girls ?	Yes No	1 2	→ 494

493	Why do you think that the message is not relevant?	<hr/> <hr/> <hr/>				
494	Do you approve the message conveyed through the Poster?	Yes	1		→ 496	
		No	2			
495	Could you please specify the message which you do not approve?	<hr/> <hr/> <hr/>				
496	Can you tell us whether you liked, or disliked the poster?	Aspects	Liked	Dis-liked	DK	
		Character on the poster	1	2	3	
		Look of the poster	1	2	3	
		Colour scheme	1	2	3	
		Wordings	1	2	3	
		Message Conveyed	1	2	3	
		Clarity of Message	1	2	3	
		Pictorials	1	2	3	
		Presentation style	1	2	3	
		Overall	1	2	3	
497	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes	1		→499	
		No	2			
498	What difficulties did you encounter?	<hr/> <hr/> <hr/>				
499	Do you like to give any suggestion to make the poster more effective?	Yes	1		→400 1	
		No	2			
4000	What suggestions would you like to give to make the poster more effective?	<hr/> <hr/> <hr/>				

B. POSTERS WITH A MALE TEACHER

S. No.	Question	Responses	Code	Skip to	
4001	Have you seen the "Posters with a male teacher" with messages on HIV/AIDS?	Yes	1	→ 4011	
		No	2		
4002	Do you think messages conveyed in the poster is relevant for the male teachers?	Yes No	1 2	→ 4004	
4003	Why do you think that the message is not relevant?	<hr/> <hr/> <hr/> <hr/>			
4004	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 4006	
4005	Could you please specify the message which you do not approve?	<hr/> <hr/> <hr/> <hr/>			
4006	Can you tell us whether you liked, or disliked the poster?	Aspects	Like d	Dis- liked	DK
		Character on the poster	1	2	3
		Look of the poster	1	2	3
		Colour scheme	1	2	3
		Wordings	1	2	3
		Message Conveyed	1	2	3
		Clarity of Message	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
		Overall	1	2	3
4007	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No	1 2	→4009	
4008	What difficulties did you encounter?	<hr/> <hr/> <hr/>			

4009	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2	→401 1
4010	What suggestions would you like to give to make the poster more effective?	_____		

B. POSTERS WITH A FEMALE TEACHER

S. No.	Question	Responses	Code	Skip to
4011	Have you seen the "Posters with a female teacher" with messages on HIV/AIDS ?	Yes No	1 2	→ 4021

4012	Do you think messages conveyed in the poster is relevant for the female teachers ?	Yes No	1 2	→ 4014	
4013	Why do you think that the message is not relevant?	_____			

4014	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 4016	
4015	Could you please specify the message which you do not approve?	_____			

4016	Can you tell us whether you liked, or disliked the poster?	Aspects	Li ke d	Dis- li ked	DK
		Character on the poster	1	2	3
		Look of the poster	1	2	3
		Colour scheme	1	2	3
		Wordings	1	2	3
		Message Conveyed	1	2	3
		Clarity of Message	1	2	3
		Pictorials	1	2	3

		Presentation style	1	2	3	
		Overall	1	2	3	
4017	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No	1 2			→4019
4018	What difficulties did you encounter?	_____				
4019	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2			→4021
4020	What suggestions would you like to give to make the poster more effective?	_____				

B. POSTERS WITH A GRAM PRADHAN

S. No.	Question	Responses	Code	Skip to	
4021	Have you seen the "Posters with a gram Pradhan" with messages on HIV/AIDS ?	Yes No	1 2	→ 4031	
4022	Do you think messages conveyed in the poster is relevant for the gram pradhans/village leaders ?	Yes No	1 2	→ 4024	
4023	Why do you think that the message is not relevant?	_____			
4024	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 4026	
4025	Could you please specify the message which you do not approve?	_____			
4026	Can you tell us whether you liked, or disliked the poster?	Aspects	Li ke d	Dis- li ked	DK
		Character on the poster	1	2	3
		Look of the poster	1	2	3
		Colour scheme	1	2	3
		Wordings	1	2	3

		Message Conveyed	1	2	3	
		Clarity of Message	1	2	3	
		Pictorials	1	2	3	
		Presentation style	1	2	3	
		Overall	1	2	3	
4027	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No	1 2			→4029
4028	What difficulties did you encounter?	_____				
4029	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2			→501
4030	What suggestions would you like to give to make the poster more effective?	_____ _____ _____ _____				

SECTION 5. AVAILABILITY OF OTHER IEC MATERIAL AND NEED FOR ADDITIONAL IEC MATERIALS

S. No.	Question	Responses	Code	Skip to
501	Other than the material shown to you is there any other material on HIV/AIDS at the RRC?	Yes	1	→504
		No	2	
502	What are the other IEC materials available at the RRC?			
	Type of material	Key Target Group for which it is intended *	Key Topics Covered	
1				
2				
3				
4				
5				
6				
7				
8				

503	What did you <u>like/dislike</u> about these materials?	Liked 1. _____ 2. _____ 3. _____ 4. _____ Dislik ed 1. _____ 2. _____ 3. _____ 4. _ _____		
504	Do you need additional IEC materials at the RRCs	Yes No	1 2	→601
	Type of materials Needed	Key Target Group for which it is needed *	Key Topics to Be Covered	

Codes * Young boys 1 Young girls 2 Parents of young boys 3 School teachers 4 Peer educators 5 RRC coordinators 6 General public 7 Others (Specify)

SECTION 6: OPINION ON IMPACT OF IEC MATERIAL ON THE BENEFICIARIES

S. No.	Question	Responses	Code	Skip to
601	Do you think that any of the IEC material received/available/used at this RRC has had any kind of impact on the intended target groups?	Yes	1	→ 603
		No	2	
602	If yes, how/why do you think that there has been an impact?	_____		

603	If no, why do you think that the IEC material has made no impact?	_____		

THANK AND TERMINATE THE INTERVIEW

STUDY ON ASSESSMENT OF EFFECTIVENESS OF IEC MATERIALS AT RED RIBBON CLUBS
 (A Study Sponsored by UNICEF)

OBSERVATION CHECKLIST OF RRCs

Schedule Number

IDENTIFICATION			
STATE	Karnataka	1	<input type="checkbox"/>
	Andhra Pradesh	2	
	Maharashtra	3	
	West Bengal	4	
	Gujarat	5	
DISTRICT	Raichur	1	<input type="checkbox"/> <input type="checkbox"/>
	Guntur	2	
	Sangli	3	
	Purulia	4	
	Baroda	5	
TYPE OF SETTLEMENT	Rural	1	<input type="checkbox"/>
	Urban	2	
NAME OF RRC	_____		
Address of the RRC	_____		
Name of the NGO looking after the RRC	_____		
Date of Observation	Date	Month	Year
	_____	_____	_____
RESULT OF INTERVIEW			
Result codes: Completed 1, Partially completed 2, Refused/Denied 3, Locked 4			
_____	<input type="checkbox"/> <input type="checkbox"/>	_____	
Name Observer		Signature of the Observer	

1 Location and other details of RRCs

S. No.	Question	Observation	Code
1.1	Month and Year of formation of RRC	Month <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
1.2	Location of the RRC	Residence of the RRC coordinator Residence of the Peer Educator NGO premises Panchayat office School premises Anganwadi centers Others (Specify)	1 2 3 4 5 6 7 8
1.3	Whether there is separate room exclusively for the RRC	Yes No	1→1.5 2
1.4	If no separate room for RRC, where RRC activities are undertaken?		
1.5	Whether there is separate room for organizing IEC activities ?	Yes No	1→1.7 2
1.6	If no separate room for IEC activities, where such activities are?		
1.7	Working days of the RRC ?	Days Monday..... Tuesday..... Wednesday..... Thursday..... Friday..... Saturday..... Sunday..... Govt. Holidays... No specific days	1 2 3 4 5 6 7 8 9
1.8	Timing of RRC (Railway time) Code 9999 if no specific timings	Opens at Closes at	Hr Mnt <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
1.9	Number of beneficiaries enrolled at the RRC (Observe from records)	Number enrolled _____ If no records available, ask from RRC coordinator/ peer educator	
1.9a.	Number of beneficiaries present on the day of observation	Number present _____	

2. Availability and use of IEC materials at RRCs (in Nos.) (INST. Observe personally)

S. No.	Type of IEC material	Total Number Available (Please count)	Number Used/ Displayed (Please count)	Number kept in store (Please count)
1	Carom board			
2	Fun & Dragon game			
3	Memory game			
4	Playing cards			
5	Posters with a young boy			
6	Posters with a young girl			
7	Posters with a peer educator boy			
8	Posters with a peer educator girl			
9	Posters with a father of a young boy			
10	Posters with a mother of a young girl			
11	Posters with a male teacher			
12	Posters with a female teacher			
13	Posters with a gram Pradhan			
	Other IEC Materials (Specify)			
1				
2				
3				
4				
5				
6				
7				

3. Shortfall of IEC material (INST. Please discuss regarding the shortfall with the in charge of the RRC)

S. No.	Type of IEC material	Total short fall (in numbers)	Reason of short fall
1	Carom board		
2	Fun & Dragon game		
3	Memory game		
4	Playing cards		
5	Posters with a young boy		
6	Posters with a young girl		
7	Posters with a peer educator boy		
8	Posters with a peer educator girl		

S. No.	Type of IEC material	Total short fall (in numbers)	Reason of short fall
9	Posters with a father of a young boy		
10	Posters with a mother of a young girl		
11	Posters with a male teacher		
12	Posters with a female teacher		
13	Posters with a gram Pradhan		

4. **Storage facility of IEC materials at the RRCs (INST. Observe personally)**

S. No.	Question	Observation	Code		Skip to
4.1	Type of storage facility	In a separate store room	1		
		In the same RRC room	3		
		Any other arrangement (Specify _____)	7		
4.2	Conditions of the storage of IEC materials (please observe)	Condition	Yes	No	
		Sufficient space	1	2	
		Sufficient light inside	1	2	
		Proper ventilation	1	2	
		Proper cleanliness	1	2	
		No Pests inside	1	2	
		No seepage on the wall	1	2	
		Any other (Specify _____)	1	2	

6. **Observation of IEC materials displayed (INST. Observe personally the condition and positioning of IEC material)**

S. No.	Type of IEC material	Condition (Multiple Response)				Place of position (Multiple Response)						
		Torn.....1	Faded in colour.....2	Jumbled up.....3	Crumpled4	Good Condition.....5	Any other (specify)...7	Not displayed8	Inside RRC.....1	Outside RRC Premises.....2	Placed on the table.....5	Any other (specify).....7
1	Posters with a young boy											
2	Posters with a young girl											
3	Posters with a peer educator boy											
4	Posters with a peer educator girl											
5	Posters with a father of a young boy											

S. No.	Type of IEC material	Condition (Multiple Response)				Place of position (Multiple Response)						
		Torn.....1	Faded in colour.....2	Jumbled up.....3	Crumpled4	Good Condition.....5	Any other (specify)...7	Not displayed8	Inside RRC.....1	Outside RRC Premises.....2	Placed on the table.....5	Any other (specify).....7
6	Posters with a mother of a young girl											
7	Posters with a male teacher											
8	Posters with a female teacher											
9	Posters with a gram Pradhan											
	Other IEC Materials (Specify)											
11												
12												
13												
14												
15												

7. Any other observation with reference to

7.1 Storage

.....

7.2 Condition of IEC material

.....

7.3 Receipt/Adequacy of IEC material

.....

7.4 Positioning of Display of IEC material

.....

STUDY ON ASSESSMENT OF EFFECTIVENESS OF IEC MATERIALS AT RED RIBBON CLUBS

(A Study Sponsored by UNICEF)

SCHEDULE FOR NGO COORDINATORS

Schedule Number

--	--	--

IDENTIFICATION			
STATE	Karnataka	1	<input type="checkbox"/>
	Andhra Pradesh	2	
	Maharashtra	3	
	West Bengal	4	
	Gujarat	5	
DISTRICT	Raichur	1	<input type="checkbox"/>
	Guntur	2	
	Sangli	3	
	Purulia	4	
	Baroda	5	
TYPE OF SETTLEMENT	Rural	1	<input type="checkbox"/>
	Urban	2	
NAME OF NGO _____			
ADDRESS OF NGO _____			
YEAR OF ESTABLISHMENT OF THE NGO _____			
SCHEDULE NUMBERR _____			<input type="checkbox"/>
NAME OF THE NGO COORDINATOR _____			
TYPE OF RESPONDENT	Female	1	<input type="checkbox"/>
	Male	2	
Interview Date	Date	Month	Year
_____		_____	_____
Name of the Interviewer		Signature of the Interviewer	

Namaste! My name is ----- and I am working for ORG Centre for Social Research. We are conducting a survey for UNICEF to assess the effectiveness of IEC material display at Red Ribbon Clubs. In this regard we will interview you for about 45 minutes. Your participation is voluntary and you can choose not to answer questions on any issue if you are not comfortable. We will not tell anyone about the interview besides using it for our research. We would greatly appreciate your participation in this survey.

Do you agree to participate in the interview? Yes 1 No 2

SECTION 1: INFORMATION ABOUT NGO

S. No.	Question	Responses	Code	Skip to
101	Since how long you are working as the NGO coordinator with this NGO ?	_____Years		
102	What are your key roles and responsibilities ?	_____ _____ _____ _____		
103	Have you been provided any training related to Red Ribbon Clubs before or after joining the NGO?	Yes No	1 2	→109
104	Where did you receive this training?	_____ _____ _____ _____		
105	What was the duration of this training	_____ days		
106	What were the topics covered during this training? INS: Multiple Response Possible	_____ _____ _____ _____		
107	Did you find this training useful?	Yes No	1 2	→109

S. No.	Question	Responses	Code	Skip to
108	If yes, how was the training useful? INS: Multiple Response Possible	Better insight about HIV/AIDS Learnt skills for rapport building Learnt skills for resource mobilization Learnt skills to organize group activities Learnt skills for counselling Insight for monitoring and supervision Developed leadership skills Developed new contacts Others (specify) _____	01 02 03 04 05 06 07 08 77	
109	Do you need any additional training?	Yes No	1 2	→212
110	On what issues do you need additional trainings?	_____ _____ _____ _____ _____		
111	Since when the RRCs have been formed in your area.	_____ Months		
112	How many RRCs have been formed in your area.			
113	How many RRCs are currently functional in your area?			
114	From where does the RRCs usually function?	_____ _____ _____ _____ _____		
115	How many RRC Coordinators have been deployed by your NGO?	Number Required _____ Number in Position _____		
116	How many RRC Coordinators received trainings on or after joining the RRCs?	No received trainings _____		
117	Who are the target population with whom the RRCs work with? INS: Multiple Response Possible	Adolescent (10-18 years) Young people (19-24 years) Married couples Elders Other (Specify) _____	1 2 3 4 7	

S. No.	Question	Responses	Code	Skip to
118	What are the major activities carried out by the RRCs?	Establish Abstinence Club/enrolling students Identify and train peer educators Sensitization program for teachers Sensitization program for parents Inter personal counselling Identify students practicing risk behaviors Identify risk sites Referral and follow-up for ICTC services Referral and follow-up for treatment for RTI/STI Identify and provide ToT on traditional media and street theatre Formation of sub groups/cultural team Conducting street play, exhibitions, slide shows, video shows, etc. Distribution and Display of IEC materials Generate support from public/parents Others 1 (Specify)_____	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17	
		Others 2 (Specify)_____		
		Others 3 (Specify)_____		

SECTION 2 : AVAILABILTY AND SUPPLY OF IEC MATERIALS FOR RRCs

301	Has the following IEC materials been provided for the RRCs?									
	IEC Material	202 Whether supplied Yes 1, No 2	203 Month and year of receipt of first supply. (mm/yy)				204 Number of times supplied	205 Total quantity received	206 Quantity distributed to the RRCs	207 Quantity currently available
1	Carom board with messages on HIV									
2	Fun & Dragon game with messages on HIV									
3	Memory game with messages on HIV									
4	Playing cards with messages on HIV									
5	Posters with a young boy									
6	Posters with a young girl									
7	Posters with a peer educator boy									
8	Posters with a peer educator girl									
9	Posters with a father of a young boy									
10	Posters with a mother of a young girl									
11	Posters with a male teacher									
12	Posters with a female teacher									
13	Posters with a gram Pradhan									

208	Are all the above IEC materials supplied to the RRC are adequate ?	Yes No	1 2	→ 210
209	Which of the IEC materials are not adequate ? (MULTIPLE RESPONSES POSSIBLE)	Carom board Fun & Dragon game Memory game Playing cards Posters with a young boy Posters with a young girl Posters with a peer educator boy Posters with a peer educator girl Posters with a father of a young boy Posters with a mother of a young girl Posters with a male teacher Posters with a female teacher Posters with a gram Pradhan	01 02 03 04 05 06 07 08 09 10 11 12 13	
210	Did you receive the IEC materials within the reasonable time?	Yes No	1 2	→212
211	Why do you feel so?	<hr/> <hr/> <hr/> <hr/> <hr/>		
212	Did you receive the materials in good condition?	Yes No	1 2	
213	How do you procure the supply of the IEC materials ?	<hr/> <hr/> <hr/> <hr/>		
214	Do you always get the required supply of IEC materials ?	Yes No	1 2	→216
215	How do you manage in case the required number of IEC materials is not supplied ?	<hr/> <hr/> <hr/> <hr/>		
216	Are you any way involved in supply and distribution of IEC materials?	Yes No	1 2	→218
217	If yes, what role do you play?	<hr/> <hr/> <hr/> <hr/>		
218	Do you encounter any problem in supply of IEC materials?	Yes No	1 2	→220

219	What problems do you encounter?	Do not receive enough numbers Do not receive in time Are of poor quality Are destroyed/crumpled Have to get it collected/does not reach ICTC/PPTCT Do not get it in the desired language Too many formalities to get IEC material Any other.....	1 2 3 4 5 6 7 8 9	
220	Do you have storage facility for IEC material?	Yes No	1 2	→222
221	Is the storage facility adequate?	Yes No	1 2	
222	How do you manage the storage of IEC materials ?	_____		
223	How the IEC materials are distributed/supplied to the RRCs ?	_____		
224	Do you encounter any problem in distribution of the IEC materials to the RRCs	Yes No	1 2	→226
225	What problems are encountered in supply of the IEC materials to the RRCs.	_____		
226	What are your suggestions to improve the supply chain of IEC materials?	_____		

SECTION 3: PERCEPTIONS REGARDING THE IEC MATERIALS

A. CAROM BOARD

S. No.	Question	Responses	Code	Skip to
301	Have you seen the carom board with messages on HIV/AIDS ?	Yes	1	→ 311
		No	2	
302	Do you think messages conveyed in the carom board are relevant for the young boys/girls ?	Yes No	1 2	→ 304
303	Why do you think that the messages are not relevant?	_____		
304	Do you approve the messages conveyed through the carom board ?	Yes No	1 2	→ 306

305	Could you please specify the messages which you do not approve?	_____			
306	Can you tell us whether you liked, or disliked the Carom Board with the messages on HIV/AIDS?	Aspects	Liked	Dis-liked	DK
		Display of messages	1	2	3
		Contents of the messages	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
	Overall	1	2	3	
307	Do you encounter any difficulty in using the carom board with messages on HIV/AIDS?	Yes No	1 2		→309
308	What difficulties did you encounter?	_____			
309	Do you like to give any suggestion to make the game more effective?	Yes No	1 2		→311
310	What suggestions would you like to give to make the game more effective?	_____			

B. FUN & DRAGON GAME

S. No.	Question	Responses	Code	Skip to
311	Have you seen the "Fun & Dragon Game" with messages on HIV/AIDS?	Yes	1	→ 321
		No	2	
312	Do you think messages conveyed in the Fun & Dragon Game are relevant for the young boys/girls?	Yes No	1 2	→ 314
313	Why do you think that the messages are not relevant?	_____		
314	Do you approve the messages conveyed through the Fun & Dragon Game?	Yes No	1 2	→ 316
315	Could you please specify the messages which you do not approve?	_____		

316	Can you tell us whether you liked, or disliked the Fun and Dragon Game with the messages on HIV/AIDS?	Aspects	Liked	Dis-liked	DK
		Display of messages	1	2	3
		Contents of the messages	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
		Overall	1	2	3

317	Do you encounter any difficulty in using the Fun & Dragon Game with messages on HIV/AIDS?	Yes No	1 2	→319
318	What difficulties did you encounter?	_____		
319	Do you like to give any suggestion to make the game more effective?	Yes No	1 2	→321
320	What suggestions would you like to give to make the game more effective?	_____		

B. MEMORY GAME

S. No.	Question	Responses	Code	Skip to	
321	Have you seen the "Memory Game" with messages on HIV/AIDS?	Yes	1	→ 331	
		No	2		
322	Do you think messages conveyed in the Memory Game are relevant for the young boys/girls?	Yes No	1 2	→ 324	
323	Why do you think that the messages are not relevant?	_____			
324	Do you approve the messages conveyed through the Memory Game?	Yes No	1 2	→ 326	
325	Could you please specify the messages which you do not approve?	_____			
326	Can you tell us whether you liked, or disliked the Memory Game with the messages on HIV/AIDS?	Aspects	Like d	Dis- liked	DK
		Display of messages	1	2	3

		Contents of the messages	1	2	3	
		Pictorials	1	2	3	
		Presentation style	1	2	3	
		Overall	1	2	3	
327	Do you encounter any difficulty in using the Memory Game with messages on HIV/AIDS?	Yes No		1 2		→329
328	What difficulties did you encounter?	_____				
329	Do you like to give any suggestion to make the game more effective?	Yes No		1 2		→331
330	What suggestions would you like to give to make the game more effective?	_____				

B. PLAYING CARDS

S. No.	Question	Responses	Code	Skip to	
331	Have you seen the "Playing Cards" with messages on HIV/AIDS ?	Yes No	1 2	→ 341	
332	Do you think messages conveyed in the Playing Cards are relevant for the young boys/girls ?	Yes No	1 2	→ 334	
333	Why do you think that the messages are not relevant?	_____			
334	Do you approve the messages conveyed through the Playing Cards?	Yes No	1 2	→ 336	
335	Could you please specify the messages which you do not approve?	_____			
336	Can you tell us whether you liked, or disliked the Playing Cards with the messages on HIV/AIDS?	Aspects	Liked	Dis-liked	DK
		Display of messages	1	2	3
		Contents of the messages	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3

		Overall	1	2	3		
337	Do you encounter any difficulty in using the Playing Cards with messages on HIV/AIDS?	Yes No		1 2		→339	
338	What difficulties did you encounter?	_____					
339	Do you like to give any suggestion to make the game more effective?		Yes No	1 2		→341	
340	What suggestions would you like to give to make the game more effective?	_____					

B. POSTERS WITH A YOUNG BOY

S. No.	Question	Responses	Code	Skip to	
341	Have you seen the "Posters with a Young Boy" with messages on HIV/AIDS?	Yes No	1 2	→ 351	
342	Do you think messages conveyed in the poster is relevant for the young boys ?	Yes No	1 2	→ 344	
343	Why do you think that the message is not relevant?	_____			
344	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 346	
345	Could you please specify the message which you do not approve?	_____			
346	Can you tell us whether you liked, or disliked the poster?	Aspects	Liked	Dis-liked	DK
		Character on the poster	1	2	3
		Look of the poster	1	2	3
		Colour scheme	1	2	3
		Wordings	1	2	3
		Message Conveyed	1	2	3

		Clarity of Message	1	2	3	
		Pictorials	1	2	3	
		Presentation style	1	2	3	
		Overall	1	2	3	
347	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No		1 2		→349
348	What difficulties did you encounter?	<hr/> <hr/> <hr/> <hr/>				
349	Do you like to give any suggestion to make the poster more effective?	Yes No		1 2		→351
350	What suggestions would you like to give to make the poster more effective?	<hr/> <hr/> <hr/> <hr/>				

B. POSTERS WITH A YOUNG GIRL

S. No.	Question	Responses	Code	Skip to	
351	Have you seen the "Posters with a Young Girl" with messages on HIV/AIDS?	Yes No	1 2	→ 361	
352	Do you think messages conveyed in the poster is relevant for the young girls?	Yes No	1 2	→ 354	
353	Why do you think that the message is not relevant?	<hr/> <hr/> <hr/> <hr/>			
354	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 356	
355	Could you please specify the message which you do not approve?	<hr/> <hr/> <hr/> <hr/>			
356	Can you tell us whether you liked, or disliked the poster?	Aspects	Liked	Dis-liked	DK
		Character on the poster	1	2	3
		Look of the poster	1	2	3

		Colour scheme	1	2	3	
		Wordings	1	2	3	
		Message Conveyed	1	2	3	
		Clarity of Message	1	2	3	
		Pictorials	1	2	3	
		Presentation style	1	2	3	
		Overall	1	2	3	
357	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No		1 2		→359
358	What difficulties did you encounter?	_____				
359	Do you like to give any suggestion to make the poster more effective?	Yes No		1 2		→361
360	What suggestions would you like to give to make the poster more effective?	_____				

B. POSTERS WITH A PEER EDUCATOR BOY

S. No.	Question	Responses	Code	Skip to
361	Have you seen the "Posters with a peer educator boy" with messages on HIV/AIDS ?	Yes No	1 2	→ 371
362	Do you think messages conveyed in the poster is relevant for the peer educator boys ?	Yes No	1 2	→ 364
363	Why do you think that the message is not relevant?	_____		
364	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 366
365	Could you please specify the message which you do not approve?	_____		

366	Can you tell us whether you liked, or disliked the poster?	Aspects	Liked	Dis-liked	DK	
		Character on the poster	1	2	3	
		Look of the poster	1	2	3	
		Colour scheme	1	2	3	
		Wordings	1	2	3	
		Message Conveyed	1	2	3	
		Clarity of Message	1	2	3	
		Pictorials	1	2	3	
		Presentation style	1	2	3	
		Overall	1	2	3	
367	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No	1 2		→369	
368	What difficulties did you encounter?	_____ _____ _____ _____				
369	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2		→371	
370	What suggestions would you like to give to make the poster more effective?	_____ _____ _____ _____				

B. POSTERS WITH A PEER EDUCATOR GIRL

S. No.	Question	Responses	Code	Skip to
371	Have you seen the "Posters with a peer educator girl" with messages on HIV/AIDS ?	Yes	1	→ 381
		No	2	
372	Do you think messages conveyed in the poster is relevant for the peer educator girls ?	Yes No	1 2	→ 374
373	Why do you think that the message is not relevant?	_____ _____ _____		

374	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 376	
375	Could you please specify the message which you do not approve?	_____			
376	Can you tell us whether you liked, or disliked the poster?	Aspects	Liked	Dis-liked	DK
		Character on the poster	1	2	3
		Look of the poster	1	2	3
		Colour scheme	1	2	3
		Wordings	1	2	3
		Message Conveyed	1	2	3
		Clarity of Message	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
		Overall	1	2	3
377	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No	1 2	→379	
378	What difficulties did you encounter?	_____			
379	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2	→381	
380	What suggestions would you like to give to make the poster more effective?	_____			

B. POSTERS WITH FATHER OF A YOUNG BOY

S. No.	Question	Responses	Code	Skip to
381	Have you seen the "Posters with father of a young boy " with messages on HIV/AIDS ?	Yes	1	→ 391
		No	2	

382	Do you think messages conveyed in the poster is relevant for the father of young boys ?	Yes No	1 2	→ 384	
383	Why do you think that the message is not relevant?	<hr/> <hr/> <hr/>			
384	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 386	
385	Could you please specify the message which you do not approve?	<hr/> <hr/> <hr/>			
386	Can you tell us whether you liked, or disliked the poster?	Aspects	Liked	Dis-liked	DK
		Character on the poster	1	2	3
		Look of the poster	1	2	3
		Colour scheme	1	2	3
		Wordings	1	2	3
		Message Conveyed	1	2	3
		Clarity of Message	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
		Overall	1	2	3
387	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No	1 2	→389	
388	What difficulties did you encounter?	<hr/> <hr/> <hr/>			
389	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2	→391	
390	What suggestions would you like to give to make the poster more effective?	<hr/> <hr/> <hr/>			

B. POSTERS WITH MOTHER OF A YOUNG GIRL

S. No.	Question	Responses	Code	Skip to	
391	Have you seen the "Poster with mother of a young girl " with messages on HIV/AIDS ?	Yes	1	→ 3001	
		No	2		
392	Do you think messages conveyed in the poster is relevant for the mother of young girls ?	Yes No	1 2	→ 394	
393	Why do you think that the message is not relevant?	<hr/> <hr/> <hr/>			
394	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 396	
395	Could you please specify the message which you do not approve?	<hr/> <hr/> <hr/>			
396	Can you tell us whether you liked, or disliked the poster?	Aspects	Liked	Dis-liked	DK
		Character on the poster	1	2	3
		Look of the poster	1	2	3
		Colour scheme	1	2	3
		Wordings	1	2	3
		Message Conveyed	1	2	3
		Clarity of Message	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
		Overall	1	2	3
397	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No	1 2	→399	
		<hr/> <hr/> <hr/>			
398	What difficulties did you encounter?	<hr/> <hr/> <hr/>			
399	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2	→3001	

3000	What suggestions would you like to give to make the poster more effective?	_____	_____	_____
------	--	-------	-------	-------

B. POSTERS WITH A MALE TEACHER

S. No.	Question	Responses	Code	Skip to	
3001	Have you seen the "Posters with a male teacher" with messages on HIV/AIDS ?	Yes	1	→ 3011	
		No	2		
3002	Do you think messages conveyed in the poster is relevant for the male teachers ?	Yes No	1 2	→ 3004	
3003	Why do you think that the message is not relevant?	_____	_____	_____	
3004	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 3006	
3005	Could you please specify the message which you do not approve?	_____	_____	_____	
3006	Can you tell us whether you liked, or disliked the poster?	Aspects	Liked	Dis-liked	DK
		Character on the poster	1	2	3
		Look of the poster	1	2	3
		Colour scheme	1	2	3
		Wordings	1	2	3
		Message Conveyed	1	2	3
		Clarity of Message	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3
		Overall	1	2	3
3007	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No	1 2	→3009	

3008	What difficulties did you encounter?	_____		

3009	Do you like to give any suggestion to make the poster more effective?	Yes	1	→3011
		No	2	
3010	What suggestions would you like to give to make the poster more effective?	_____		

B. POSTERS WITH A FEMALE TEACHER

S. No.	Question	Responses	Code	Skip to	
3011	Have you seen the "Posters with a female teacher" with messages on HIV/AIDS ?	Yes	1	→ 3021	
		No	2		
3012	Do you think messages conveyed in the poster is relevant for the female teachers ?	Yes	1	→ 3014	
		No	2		
3013	Why do you think that the message is not relevant?	_____			

3014	Do you approve the message conveyed through the Poster?	Yes	1	→ 3016	
		No	2		
3015	Could you please specify the message which you do not approve?	_____			

3016	Can you tell us whether you liked, or disliked the poster?	Aspects	Liked	Dis-liked	DK
		Character on the poster	1	2	3
		Look of the poster	1	2	3
		Colour scheme	1	2	3
		Wordings	1	2	3
		Message Conveyed	1	2	3
		Clarity of Message	1	2	3
		Pictorials	1	2	3
		Presentation style	1	2	3

		Overall	1	2	3		
3017	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No		1 2		→3019	
3018	What difficulties did you encounter?	_____					
3019	Do you like to give any suggestion to make the poster more effective?		Yes No	1 2		→3021	
3020	What suggestions would you like to give to make the poster more effective?	_____					

B. POSTERS WITH A GRAM PRADHAN

S. No.	Question	Responses	Code	Skip to	
3021	Have you seen the "Posters with a gram Pradhan" with messages on HIV/AIDS ?	Yes	1	→ 3031	
		No	2		
3022	Do you think messages conveyed in the poster is relevant for the gram pradhans/village leaders ?	Yes No	1 2	→ 3024	
3023	Why do you think that the message is not relevant?	_____			
3024	Do you approve the message conveyed through the Poster?	Yes No	1 2	→ 3026	
3025	Could you please specify the message which you do not approve?	_____			
3026	Can you tell us whether you liked, or disliked the poster?	Aspects	Liked	Dis-liked	DK
		Character on the poster	1	2	3
		Look of the poster	1	2	3
		Colour scheme	1	2	3
		Wordings	1	2	3
		Message Conveyed	1	2	3

		Clarity of Message	1	2	3	
		Pictorials	1	2	3	
		Presentation style	1	2	3	
		Overall	1	2	3	
3027	Do you encounter any difficulty in using the poster messages on HIV/AIDS?	Yes No		1 2		→3029
3028	What difficulties did you encounter?	<hr/> <hr/> <hr/>				
3029	Do you like to give any suggestion to make the poster more effective?	Yes No		1 2		→401
3030	What suggestions would you like to give to make the poster more effective?	<hr/> <hr/> <hr/>				

SETION 4. AVAILABILITY OF OTHER IEC MATERIAL AND NEED FOR ADDITIONAL IEC MATERIALS

S. No.	Question	Responses	Code	Skip to
401	Other than the material shown to you is there any other material on HIV/AIDS for the RRCs?	Yes	1	→ 404
		No	2	
402	What are the other IEC materials available for the RRC?			
	Type of material	Key Target Group for which it is intended *	Key Topics Covered	
1				
2				
3				
4				
5				
6				
7				
8				
403	What did you like/dislike about these materials?	Liked 1. _____ 2. _____ 3. _____ 4. _____ Dislik ed 1. _____ 2. _____ 3. _____ 4. _____		

404	Do you need additional IEC materials for the RRCs	Yes No	1 2	→ 501
405	Type of materials Needed	Key Target Group for which it is needed *	Key Topics to Be Covered	

Codes * Young boys 1 Young girls 2 Parents of young boys 3 School teachers 4 Peer educators 5 RRC coordinators 6 General public 7 Others (Specify)

SECTION 5: OPINION ON IMPACT OF IEC MATERIAL ON THE BENEFICIARIES

S. No.	Question	Responses	Code	Skip to
501	Do you think that any of the IEC material received/available/used for the RRCs has had any kind of impact on the intended target groups?	Yes	1	→ 503
		No	2	
502	If yes, how/why do you think that there has been an impact?			
503	If no, why do you think that the IEC material has made no impact?			

THANK AND TERMINATE THE INTERVIEW

ASSESSMENT OF EFFECTIVENESS OF IEC MATERIAL AT RED RIBBION CLUBS

(A Study Sponsored by UNICEF)

SCHEDULE FOR STAKEHOLDER

Schedule Number

IDENTIFICATION			
STATE	Karnataka	1	<input type="checkbox"/>
	Andhra Pradesh	2	
	Maharashtra	3	
	West Bengal	4	
	Gujarat	5	
DISTRICT	Raichur	1	<input type="checkbox"/> <input type="checkbox"/>
	Guntur	2	
	Sangli	3	
	Purulia	4	
	Baroda	5	
TYPE OF SETTLEMENT	Rural	1	<input type="checkbox"/>
	Urban	2	
NAME OF RRC _____			
TYPE OF RESPONDENT	Teacher	1	<input type="checkbox"/>
	AWW	2	
	Panchayat member	4	
	Other (Specify)	5	
NAME OF RESPONDENT _____			
SCHEDULE NUMBERR			<input type="checkbox"/> <input type="checkbox"/>
Interview Date	Date	Month	Year
	_____	_____	_____
RESULT OF INTERVIEW			<input type="checkbox"/>
Result codes: Completed 1; Partially completed 2; Refused 3; Locked / Respondent not available for the interview 4			
_____ <input type="text"/> <input type="text"/>		_____	
Name and code of the Investigator		Signature of the Investigator	
Name	Spot Checked By	Office Edited By	Keyed By
_____	_____	_____	_____

Date	_____	_____	_____
------	-------	-------	-------

CONFIDENTIALITY AND CONSENT

Namaste! My name is ----- and I am working for ORG Centre for Social Research. We are conducting a survey for UNICEF to assess the effectiveness of IEC material display at Red Ribbon Clubs. In this regard we will interview you for about 45 minutes. We will not record your name anywhere. Your participation is voluntary and you can choose not to answer questions on any issue if you are not comfortable. We will not tell anyone about the interview besides using it for our research. We would greatly appreciate your participation in this survey.

Do you agree to participate in the interview? Yes 1 No 2

SECTION 1: GENERAL INFORMATION

S. No.	Question	Responses	Code	Skip to
101	What is your current age?	Age in completed years _____ <input type="text"/> <input type="text"/> Don't Know/Can't say97		
102	What is your religion	Hindu	1	
		Muslim	2	
		Sikh	3	
		Christian	4	
		Jain	5	
		Others (specify) _____	7	
103	Social category/ caste belong to?	Scheduled Caste	1	
		Scheduled Tribe	2	
		Other Backward Caste	3	
		Others (Specify) _____	7	
		No	2	
106	What is your education qualification?	Illiterate	1	
		Literate with non formal education	2	
		1 - 5th	3	
		6 - 8th	4	
		9 -10th	5	
		11 - 12th	6	
		Technical Education (Diploma)	7	
		Graduate and above	8	
107	What is your marital status?	Unmarried	1	
		Married	2	
		Divorced/separated	3	
		Widow/widower	4	
108	Since how long are you in this service?	_____ years		

SECTION 2: INFORMATION ABOUT RRC

S. No.	Question	Responses	Code	Skip to
201	Are you aware about Red Ribbon Club (RRC) functional in your area?	Yes No	1 2	
202	Since when is this RRC functioning?	Last one year Last two year Last three year Other (Specify)_____	1 2 3 7	
203	Does this RRC cater to all the target population of the community or to some specific target population?	All target population Caters only to adolescents Caters to youth Other (Specify)_____	1 2 3 7	
204	From where does the RRC function?	Own home Rented building Panchayat office Other (Specify)_____	1 2 2 7	
205	What types of activities are organized by the RRC?	Conduct group meetings with youth Conduct group meetings with others Organize rally Organize puppet shows Distribution of leaflets related to HIV/AIDS Distribution of booklets related to HIV/AIDS Conducts educational games Other (Specify)_____	01 02 03 04 05 06 07 08 77	
206	Are you involved in any of the activities of the RRC?	Yes No	1 2	→ 208
207	What role/activities do you support for the RRC?	_____ _____ _____ _____		
208	Since how long you are associated with the RRC ?	Months_____		
209	How much time do you spend for RRC activities in a week?	Hours per week_____		
210	Have you received any orientation/training on HIV/AIDS?	Yes No	1 2	→ 213
210a	What were the topics covered during the orientation? INS: Multiple Response Possible	Knowledge about HIV/AIDS Spread of HIV/AIDS Preventive measures for HIV/AIDS Effective usage of IEC material Counselling Referral services Roles and Responsibilities of peer educator Aims and objectives of program Others (specify) _____	01 02 03 04 05 06 07 08 77	

S. No.	Question	Responses			Code	Skip to
211	Did you find the orientation useful?	Yes No			1 2	
212	When was the last time such meeting(s) was organized?	Days back _____ Don't know			99	
213	Does the RRC have any IEC materials related to HIV/AIDS?	Yes No Don't Know			1 2 3	
214	Are you aware about the availability of the following IEC materials at the RRC ?					
215	IEC Material	Whether available at RRC Yes 1, No 2, DK 3	If yes, whether used at RRC Yes 1, No 2, DK 3	If no, what is the reason for not using the material?		
1	Carom board with messages on HIV			_____		
2	Fun & dragon game with messages on HIV			_____		
3	Memory game with messages on HIV			_____		
4	Playing cards with messages on HIV			_____		
5	Posters with a young boy			_____		
6	Posters with a young girl			_____		
7	Posters with a peer educator boy			_____		
8	Posters with a peer educator girl			_____		
9	Posters with a father of a young boy			_____		
10	Posters with a mother of a young girl			_____		
11	Posters with a male teacher			_____		
12	Posters with a female teacher			_____		
13	Posters with a gram pradhan			_____		
14	Any other 1 (Specify)_____			_____		
15	Any other 2 (Specify)_____			_____		
16	Any other 3 (Specify)_____			_____		

S. No.	Question	Responses	Code	Skip to
208	What is your general perception about the IEC materials used for the youths at the RRC?	_____ _____ _____ _____		

SECTION 3: AWARENESS & PERCEPTION REGARDING IEC MATERIALS

Poster on Male Teacher (TO BE ASKED MALE TEACHER SELECTED FOR THE STUDY)								
301	Have you ever seen the poster on HIV with a "Male Teacher"?	Spontaneously mentioned Mentioned after prompting Mentioned after aiding Not mentioned	1 2 3 4				→ 317	
302	How many times have you seen this poster?	Number of times _____						
303	Where did you see this poster?	At the RRC At the School Displayed in the village Other location (specify)_____	1 2 3 7					
304	According to you what message(s) were conveyed through this poster? RECORD SPONTANEOUS MESSAGES FIRST, THEN READ EACH MESSAGE NOT MENTIONED SPONTANEOUSLY	RECALL OF MESSAGES						
		Spontaneous	Prompted					
			Yes	No				
	We teachers have full responsibility to save children and community	1	2	3				
	Knowledge is power	1	2	3				
305	What aspects of the poster did you find appropriate/ not appropriate and appealing/ not appealing (READ OUT EACH RESPONSE OPTION)	Various aspects	Whether appropriate		Whether appealing			
			Yes	No	Yes	No		
		The photos on the poster	1	2	1	2		
		Look of the poster	1	2	1	2		
		Colour scheme	1	2	1	2		
		Wordings	1	2	1	2		
		Presentati on of the poster	1	2	1	2		
Language	1	2	1	2				
Message Conveyed	1	2	1	2				

		Clarity of Message	1	2	1	2		
		Overall	1	2	1	2		
306	Do you think the messages conveyed through this poster were relevant for you?	Yes No				1 2	→308	
307	Why do you feel that the poster is not relevant?	_____						
308	Have you discussed the messages conveyed in the poster with any body?	Yes No				1 2	→310	
309	With whom you discussed the messages?	Fellow teachers Family members/relatives Young boys/girls Friends Peer educators RRC coordinators Health workers Panchayat members Others (Specify)_____				01 02 03 04 05 06 07 08 77		
310	Did you acquire more information on HIV after seeing the poster?	Yes No				1 2		
311	Do you find any difficulty in understanding the message?	Yes No				1 2		
312	What difficulties did you encounter in understanding the messages in the poster?	_____						
313	Have you taken any action after seeing the poster ?							
314	What action has been taken by you after seeing the poster ?	_____						
315	Do you like to give any suggestion to make the poster more effective?	Yes No				1 2	→317	
316	What suggestions would you like to give to make the poster more effective?	_____						

Poster on Female Teacher (TO BE ASKED FEMALE TEACHER SELECTED FOR THE STUDY)					
317	Have you ever seen the poster on HIV with a "Female Teacher"?	Spontaneously mentioned Mentioned after prompting Mentioned after aiding Not mentioned		1 2 3 4	→ 333
318	How many times have you seen this poster?	Number of times _____			

319	Where did you see this poster?	At the RRC At the School Displayed in the village Other location (specify) _____	1 2 3 7			
320	According to you what message(s) were conveyed through this poster? RECORD SPONTANEOUS MESSAGES FIRST, THEN READ EACH MESSAGE NOT MENTIONED SPONTANEOUSLY	RECALL OF MESSAGES				
		Spontaneous	Prompted			
			Yes	No		
	Their life is meant to learn and play , they are safe if we teachers show the right way	1	2	3		
	Knowledge is power	1	2	3		
321	What aspects of the poster did you find appropriate/ not appropriate and appealing/ not appealing (READ OUT EACH RESPONSE OPTION)	Vari ous aspect s	Whether appropriate		Whether appealing	
			Yes	No	Yes	No
		The photos on the poster	1	2	1	2
		Look of the poster	1	2	1	2
		Colour scheme	1	2	1	2
		Wordings	1	2	1	2
		Presenta tion of the poster	1	2	1	2
		Langua ge	1	2	1	2
		Message Convey ed	1	2	1	2
		Clarity of Message	1	2	1	2
	Overall	1	2	1	2	
322	Do you think the messages conveyed through this poster were relevant for you?	Yes No		1 2	→324	
323	Why do you feel that the poster is not relevant?	_____				

324	Have you discussed the messages conveyed in the poster with any body?		Yes No	1 2	→326	

325	With whom you discussed the messages?	Fellow teachers Family members/relatives Young boys/girls Friends Peer educators RRC coordinators Health workers Panchayat members Others (Specify)_____	01 02 03 04 05 06 07 08 77	
326	Did you acquire more information on HIV after seeing the poster?	Yes No	1 2	
327	Do you find any difficulty in understanding the message?	Yes No	1 2	
328	What difficulties did you encounter in understanding the messages in the poster?	_____ _____ _____		
329	Have you taken any action after seeing the poster ?			
330	What action has been taken by you after seeing the poster ?	_____ _____ _____		
331	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2	→333
332	What suggestions would you like to give to make the poster more effective?	_____ _____ _____		
	Poster on Gram Pradhan/Panchayat (TO BE ASKED TO GRAM PRADHAN /PANCHAYAT MEMBER SELECTED FOR THE STUDY)			
333	Have you ever seen the poster on HIV with a "Gram Pradhan/Village Leader"?	Spontaneously mentioned Mentioned after prompting Mentioned after aiding Not mentioned	1 2 3 4	→ Terminate Interview
334	How many times have you seen this poster?	Number of times _____		
335	Where did you see this poster?	At the RRC At the School Displayed in the village Other location (specify)_____	1 2 3 7	
336	According to you what message(s) were conveyed through this poster? RECORD SPONTANEOUS MESSAGES	RECALL OF MESSAGES		
		Spontaneous	Prompted	

	FIRST, THEN READ EACH MESSAGE NOT MENTIONED SPONTANEOUSLY		Yes	No		
	If we elders want a safer generation , we should ensure complementary HIV education.	1	2	3		
	Knowledge is power	1	2	3		
337	What aspects of the poster did you find appropriate/ not appropriate and appealing/ not appealing (READ OUT EACH RESPONSE OPTION)	Vari ous aspect s	Whether appropriate		Whether appealing	
			Yes	No	Yes	No
		The photos on the poster	1	2	1	2
		Look of the poster	1	2	1	2
		Colour scheme	1	2	1	2
		Wordings	1	2	1	2
		Presenta tion of the poster	1	2	1	2
		Langua ge	1	2	1	2
		Message Convey ed	1	2	1	2
		Clarity of Message	1	2	1	2
		Overall	1	2	1	2
338	Do you think the messages conveyed through this poster were relevant for you?	Yes No			1 2	→340
339	Why do you feel that the poster is not relevant?	<hr/> <hr/> <hr/> <hr/>				
340	Have you discussed the messages conveyed in the poster with any body?		Yes No	1 2	→342	
341	With whom you discussed the messages?	Fellow teachers Family members/relatives Young boys/girls Friends Peer educators RRC coordinators Health workers Panchayat members Others (Specify)_____			01 02 03 04 05 06 07 08 77	
342	Did you acquire more information on HIV after seeing the poster?		Yes No	1 2		
343	Do you find any difficulty in understanding the message?		Yes No	1 2		

344	What difficulties did you encounter in understanding the messages in the poster?	_____ _____ _____ _____		
345	Have you taken any action after seeing the poster?			
346	What action has been taken by you after seeing the poster?	_____ _____ _____ _____		
347	Do you like to give any suggestion to make the poster more effective?	Yes No	1 2	→ Terminate Interview
348	What suggestions would you like to give to make the poster more effective?	_____ _____ _____ _____		

THANK AND TERMINATE THE INTERVIEW

***Annexure II:
Terms of Reference***

TERMS OF REFERENCE

Assessment of Effectiveness of IEC materials at Red Ribbon Clubs

16 September 2008

- Study (an investigation designed to improve knowledge on a particular topic)
- Survey (an assessment of the conditions of a particular group at a point in time)
- Evaluation (an assessment of an on-going or completed project, programme or policy)

1. Background

- Describe the overall context of the programme/issue to be researched

In 2007 Unicef developed four games and a set of nine posters for young people on HIV prevention.

The games were as follows:

9. Fun and Dragon (a variation of snakes and ladders)
10. Memory game (a card game)
11. Playing cards with HIV messages
12. Carrom boards with HIV messages

There were also nine posters addressed to different target groups as follows:

19. Young people – boys
20. Young people – girls
21. Peer educators – boys
22. Peer educators – girls
23. Parent – mothers
24. Parents – fathers
25. Panchayats
26. Teachers – female
27. Teachers - male

These materials were sent by Unicef to the Red Ribbon Clubs (RRCs) in the following states/districts:

Maharashtra: Chandrapur, Latur, Nandurbar, Sangli, Mumbai
Karnataka: Raichur, Mysore, Dharwad, Bangalore
AP: Medak, Guntur, Hyderabad
W.Bengal: Purulia, Murshidabad, Jalpaiguri
Gujarat: Baroda, Valsad, Surat (only carom boards were sent)

Unicef would like to conduct a study to understand the effectiveness of these materials, and any other materials that may be present in the RRCs visited, in increasing knowledge about HIV and AIDS, as well as in changing attitudes and behaviours.

2. Purpose of the Research Activity

- Explain why the research activity is necessary and how its findings will be used to inform programming or advance the knowledge base on this topic.

The study will provide valuable feedback to Unicef, NACO, SACS and other partners on the impact of the materials on knowledge, attitudes and behaviours, identify modifications needed, gaps and further material needs, as well as any supply chain management issues in materials actually reaching their destination and being used. This would guide further material development and use, as well as to resolve the supply chain management issues if they exist.

3. Scope of the Research Activity

- List the questions the research activity should answer.
 - In the case of an evaluation, UN standards suggest having questions related to Relevance, Efficiency, Effectiveness, Impact and Sustainability.
- Are the materials sent to the RRCs relevant for the target audience and purpose for which they were intended?
 - Are the materials being used?
 - Does the target audience consider them relevant for themselves?
- Are there other materials displayed/being used other than the ones mentioned in the Background section? What are they?
- Are the materials sent to the RRCs effective in communicating the intended messages?
 - Does the target audience understand and recall the messages sought to be communicated through the materials?
 - Does the target audience like/dislike the materials? What do they like/dislike?
 - Are the visuals and written matter in the materials appropriate and appealing to the target audience?
 - What are the target audience's suggestions to make the materials more effective?
- What is the impact of the materials sent to the RRCs?
 - Is the target audience better informed on the issues relating to HIV and AIDS?
 - Have they had any impact on self risk perception, attitude towards those infected and adoption of safe behaviours?
 - Have they talked to anyone about it/visited an ICTC?
- Is the supply chain management system in place efficient?
 - Did the materials reach the RRCs?
 - Did they reach in a reasonable time?
 - Did they reach in good condition?
 - Is there storage space available to store them?
 - Who is in charge of keeping them/putting them up/ensuring they are used?
- What are the material gaps?
 - On what issues and for which target audience are IEC materials required?
 - Are there any suggestions on content/appearance?

4. Methodology

- To the extent possible, detail out the nature of the research activity including:
 - Quantitative/qualitative/both

- Geographic focus
- Sample size
- Ethical considerations

The study would be a mix of quantitative and qualitative, using semi structured interviews which include both close ended and open ended questions. The materials have been sent to five states as in indicated in the background section. One district is being selected from each state for the study. Within each district the number of Red Ribbon Clubs to be included in the study has been decided keeping in mind the total number of RRCs in that district to which the materials were sent. Five boys and five girls would be interviewed in each RRC, at the RRC. A small observation study of materials available at the RRC and their use would also be done. All the available peer educators in the village (there are supposed to be four in each village) would be interviewed, as well as two stakeholders. These could be either the anganwadi worker, sarpanch,/sabhadipati or teacher, depending on their involvement in RRCs and their availability. In addition the NGO coordinators in each block (one per block) would also be interviewed. The numbers of each category to be interviewed are given in Annex 1.

A suitable time for the interviews would have to be determined in consultation with the concerned NGO. In some RRCs the peer educators hold a weekly meeting with the young people in the village and that could be a possible occasion for doing the interviews both of the peer educators as well as the clients (young people).

It is suggested that a pilot be done in three RRCs in one state, once the research instruments are developed, to understand the operational issues in implementing the study, and to find solutions to them.

5. Schedule of Tasks & Timeline

- Specify the tasks the contractor/evaluator is responsible to carry out and a preliminary schedule of when they should be done, including information on phasing of the study/evaluation. It is possible that the study may have several phases e.g. literature review, interviews, data collection, report writing.
- Finalisation of research design (3 days)
- Development of research instruments (5 days)
- Pilot in 5 RRCs (5 days)
- Fieldwork (15 days)
- Analysis (5 days)
- Presentation of findings (5 days)
- Draft report (2 weeks)
- Final report based on feedback (1 week)

6. Deliverables

- List specific products to be delivered and by when. Specify length of written reports and presentations.
- Note any other deliverables e.g. raw data in electronic medium (especially for surveys), data collection instruments in electronic medium, completed data sets etc.
- Final study design

- Research instruments
- Presentation of findings (not more than 50 slides)
- Draft and final reports in Word format (not more than 50 pages) following Unicef research report writing guidelines

7. Major users of the research activity and plans for disseminating it

- Identify interested parties within UNICEF, in government and among partners
- Describe how the findings of the research activity will be disseminated
- Unicef, NACO, SACS and other partners working on HIV and AIDS
- Presentations at NACO, presentation and report to be sent to SACS and Unicef HIV Officers

8. Qualifications & Experience required

- Identify the skills and experience required to carry out the study/evaluation plan (eg., education, field, evaluation experience, knowledge of the subject and project area and language proficiency), number of team members
- Some distinguish between desired and mandatory skills, or provide that certain conditions be met by at least one team member. Multi-disciplinary teams are often appropriate.

Professional research agency with demonstrated experience in the development sector, preferably health and HIV and AIDS and evaluating communication.

Demonstrated ability to carry out a multi-location national study including in-house fieldwork and robust supervisory system in place

Demonstrated ability to write concise, analytical reports

9. Estimated duration of contract

- Start date to end date, keeping in mind that processing the bid takes 6 weeks

1 December 2008-31 January 2009

10. Duty Station

- Note where the consultant/agency conducting the research will be based.

New Delhi

11. Official travel involved

- Note any travel required out of the duty station.

Travel to Raichur (Karnataka), Guntur (Andhra Pradesh), Sangli (Maharashtra), Purulia (W.Bengal) and Baroda (Gujarat) to conduct fieldwork.

12. Amount budgeted in AWP for this activity (US \$) and budget details

- Estimated cost with breakups on salaries, per diem, travel, contingency, etc.

- Include administrative reporting requirements about financial matters, if needed.
- Identify logistical support (vehicles, office space, supplies, secretarial services, etc.), if required.

\$30,000

13. PIDB code

- Please note the Generic Intervention Code to be used

32

14. Supervisor:

- Note who the day-to-day supervisor of the research activity will be.

Supriya Mukherji

15. Submitted by:

i) Name of P.O.: Supriya Mukherji_____

Signature of PO: _____ Date_____

ii) Signature of the Section Chief: _____ Date_____

Annex 1: No. of Interviews by Respondent Category

State	District	No. of RRCs/ other centres	No. of Blocks	No. of RRCs per block/ taluka /mandal	No. of young people per RRC		Total number of young people per RRC	Total number of young people	No. of PEs per RRC	Total no. of PEs	No. of stakeholders per RRC	Total no. of stakeholders	No. of NGO coordinators
					No. of boys	No. girls							
Karnataka	Raichur*	10	7 taluka	1-2	5	5	10	100	4	40	2	20	7
AP	Guntur**	15	57 mandal	3-4	5	5	10	150	4	60	2	30	20
Maharashtra	Sangli	15	4	3-4	5	5	10	150	4	60	2	30	4
W.Bengal	Purulia	40	23	1-2	5	5	10	400	4	160	2	80	23
Gujarat	Baroda	10	10	1	5	5	10	100	4	40	2	20	10
Total		90	101		25	25	50	900	20	360	10	180	64

*In Raichur, there were 135 distribution points as follows:

- 1) Adolescent Youth Centres (AYCs)-1
- 2) Youth Clubs- 80
- 3) SHG Groups- 54

Total -135

**In Guntur, there were 157 distribution points/personnel

	Number
1 AYCs	4
2 Youth Clubs	3
3 National Child Labour project Schools	30
4 Residential Bridge Schools	35
5 Non Residential Bridge Schools	78
6 Care & Support center	1
7 Positive Network	1
8 Individual Peers	5
	157