Communication is an essential element of AIDS prevention, treatment and care efforts. Historically such efforts have been limited by a focus on getting messages out about how to behave or how HIV is transmitted, with lesser attention to cultural and social contexts in which such communication occurs. These contexts often present barriers to individual behaviour change.

Social change communication is an inclusive way of responding to social drivers such as gender inequality and stigma, which impact on the effectiveness of communication. The approach falls into a variety of Service Delivery areas including:

- Prevention: Behavioral Change Communication - Mass Media
- Prevention: Behavioral Change Communication - Community Outreach and Schools
- Supportive Environment: Policy Development Including Workplace Policy
- Supportive Environment: Strengthening of Civil Society and Institutional Capacity Building
- Supportive Environment: Stigma Reduction in all Settings

Social change communication is an umbrella term involving strategic use of advocacy, media, interpersonal and dialogue-based communication, and social mobilization to systematically accelerate change in the underlying drivers of HIV risk, vulnerability and impact. It requires an assessment of the specific nature of these drivers in order to design an appropriate response. It also requires an appraisal of the existing national HIV communication strategy and the range of communication opportunities to maximize indigenous ways of communicating and strengthening existing channels and capacities.

All communication activities for HIV prevention should be combined and interlinked within one unifying communication strategy that addresses individual knowledge and behaviour, collective attitudes or norms, societal level policies and regulations. The inputs required to implement the unified strategy will be described in various SDAs in relation to specific objectives or components of that overarching strategy. The sum total of outputs within all communication SDAs, should represent a comprehensive and unified strategy for behavioural and social changes supporting HIV prevention.

**Rationale for including social change communication in the proposal**

Social and behaviour change communication approaches have been rigorously evaluated with demonstrable impact in behaviour change, raising awareness, and influencing social norms. It has been shown to make durable change in deeply rooted harmful practices; from domestic violence to police complicity in violence against men who have sex with men. The absence of an integration of social change communication into broader communication strategies has been a key factor in the inability to affect sustained behaviour change.

**Main social change communication activities to be considered, and most relevant service delivery areas related to them**
<table>
<thead>
<tr>
<th>Goal</th>
<th>Activity</th>
<th>SDA</th>
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| Enhanced civil society and institutional capacity to articulate local priorities, communicate, advocate and critically analyze policy and hold authorities to account | • Skills building  
• Community outreach  
• Participatory methods of community dialogue and empowerment | • Prevention: BCC: community outreach and schools  
• Supportive Environment: Strengthening of Civil Society and Institutional Capacity Building |
| Social cohesion/ capital and holistic well-being built and harmful social norms shifted | • Community-based problem solving  
• Motivation of change by encouraging people to feel HIV affects them personally  
• Information delivery using wide range of communication methodologies including mass media and peer outreach  
• Promotion of dialogue on social norms  
• Social mobilization | • Prevention: BCC - Mass Media  
• Prevention: BCC: Community Outreach and Schools  
• Supportive Environment: Stigma Reduction in all Settings |
| Stigma reduced | • Addressing stigma at interpersonal, community and institutional levels  
• Supporting people to exercise and claim their rights  
• Supporting people to challenge and change their own assumptions and practices  
• Information delivery using wide range of communication methodologies including mass media and peer outreach  
• Social mobilization | • Supportive Environment: Stigma Reduction in all Settings |
| Vulnerabilities decreased by addressing societal level causes of vulnerability and risk including reduction of legal and policy barriers | • Catalyze reflection and action at the individual, community and policy levels  
• Facilitation of community dialogue and action to shift norms and open space for changing policies and laws  
• Linking local dialogue and expression into government processes to improve services and policy  
• Policy analysis and activities reducing legal and policy barriers  
• Advocacy  
• Social mobilization | • Supportive Environment: Policy Development Including Workplace Policy  
• Supportive Environment: Stigma Reduction in all Settings |
| Quality of social change communication improved | • Rigorous research that defines the causes of risk and vulnerability at the individual, relationship/dyad, and community levels to inform other activities  
• Monitoring and evaluation of SCC and sharing of results across similar projects for learning and increased accountability  
• Appraisal of the existing national HIV communication strategy and the range of communication opportunities to maximize indigenous ways of communicating and strengthening existing channels and capacities | |

**How to define some key indicators**


1. **Most Significant Change Technique**
2. **Monitoring and Evaluating Networks**
3. **Measuring Community Capacity Domains**
4. **Measuring Community Participation**
5. **Monitoring and Evaluating Health Promotion**
6. Measuring Social Change Communication
7. HIV/AIDS Social Change Indicators

The document is available at: http://www.communicationforsocialchange.org/publications-resources.php?id=283


**Addressing gender, human rights and equity issues**

*Social change communication* enables communities and national AIDS programmes to tackle structural barriers to effective AIDS responses, such as gender inequality, violation of human rights and HIV-related stigma.