

The New Zealand AIDS Foundation *Get it On!* Social Marketing Campaign

Recall and Understanding of the Campaign Message
Research brief to the Ministry of Health

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Te Whare Wānanga o Ōtago

Introduction

The Gay Auckland Periodic Sex Survey (GAPSS) and the Gay men's Online Sex Survey (GOSS) are regular questionnaires designed to measure changes in HIV risk behaviours, testing and attitudes among men who have sex with men (MSM) in New Zealand. GAPSS has been undertaken at a large gay community event, gay bars and sex-on-site venues in Auckland in 2002, 2004, 2006, 2008 and 2011. GOSS uses the same questionnaire and has been conducted nationwide with people using Internet dating sites being invited to take part at the conclusion of GAPSS, in 2006, 2008 and 2011.

The New Zealand AIDS Foundation (NZAF) launched *Get it On!* in 2009. This safe-sex social marketing campaign is specifically for MSM, with the aim of promoting condom use in this population. To achieve this the campaign uses various forms of media including internet sites, posters and sponsoring MSM-specific events. The *Get it On!* campaign is itself a component of the NZAF's 2009-2014 HIV Prevention Plan, in which increasing rates of condom use during anal intercourse between MSM is one of the key goals.

In February 2011, the respondents of the GAPSS and GOSS questionnaires were asked to answer two questions directly relating to the NZAF's *Get it On!* campaign. With a combined 2011 sample size of 3,237 men (GAPSS=1320, GOSS=1917), this survey round has provided us with a unique opportunity to evaluate recall and understanding of the campaign within the MSM community of New Zealand.

Survey questions

The questions relating to *Get it On!* included in both the GAPSS and GOSS surveys were:

The message *Get it On!* is...

- A logo, but I don't know what it means*
- A logo that promotes condom use*
- A logo that promotes sexual activity*
- I've never seen or heard of it before*

How often do you use the following media?

Getiton.co.nz

- Never*
- Sometimes*
- Often*

Aim

The aim of this analysis is to measure campaign recall and understanding overall. We also examine how the campaign may have been more successful at reaching certain subgroups of MSM. It is important to appreciate that in this cross-sectional survey an association between better recall of the *Get it On!* slogan and specific behaviours or attitudes does not mean that the campaign resulted in the adoption of those behaviours or attitudes.

Results

We report the findings in three sections:

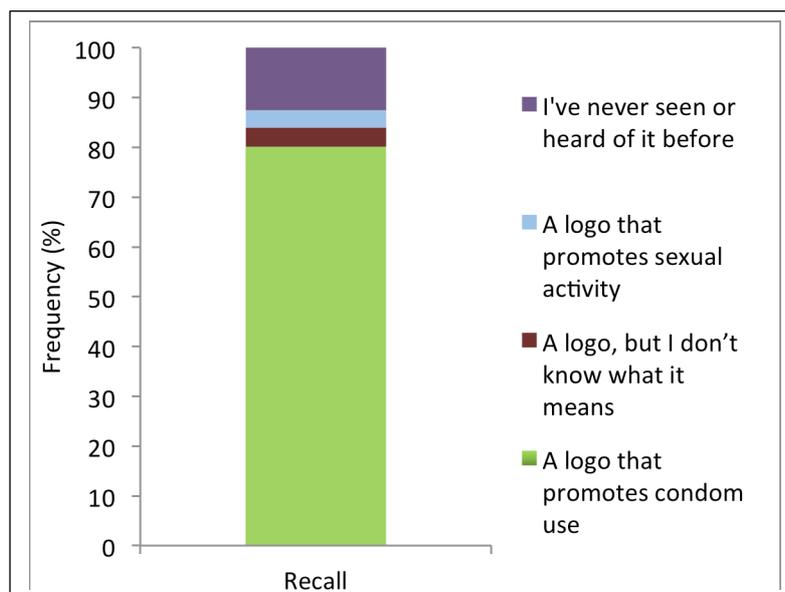
1. the overall proportion who recalled *Get it On!* correctly
2. how recall varied across different subgroups based on their characteristics or certain behaviours (e.g. by age, ethnicity, number of partners and media exposure). This can indicate whether the campaign has reached certain subgroups more successfully than others
3. whether MSM who recalled the campaign correctly exhibited different behaviours or attitudes. Again this can indicate whether the campaign has reached people with certain behaviours more successfully than others.

1. Overall recall

The overall recall of *Get it On!* was as follows:

- most (80%) of the respondents recalled the *Get it On!* campaign slogan and correctly identified that its meaning was to promote condom use
- a small proportion (3%) recalled the slogan but not its meaning
- 4% recalled it but incorrectly stated it promoted sexual activity
- 13% reported that they had never heard of or seen the slogan before (Figure 1).

Figure 1. Responses to the question: The message *Get it On!* is...



Overall, 2% reported “often” visiting the getiton.co.nz website, 9% had done so “sometimes” and 89% “never”.

2. Recall by subgroup

We investigated variation in *Get it On!* recall by demographics, behavioural factors and media exposure. The statistically significant factors associated with correct recall of the “*Get it On!*” message were as follows.

- **Age:** Correct recall was highest among those aged 30 years or above (82% correctly recalled), and lowest among those under 30 years (78% correctly recalled).
- **Education:** Those with an undergraduate or postgraduate degree had the highest correct recall (83%), whereas those who have no school qualification had the lowest (73%).
- **Gay-community attachment:** Those who spent more time with gay male peers had higher correct recall (86%) than those who spent little or no time with them (73%).
- **Sexual identity:** Those who identify as gay had higher correct recall (84%) compared to those who identify as bisexual (70%) or “other” (64%).
- **Site of recruitment (GAPSS):** Those enrolled at the “Big Gay Out” community event had higher correct recall (88%) than those who were recruited elsewhere, with those recruited at bars having the lowest correct recall (78%).
- **Region (GOSS):** Those who completed the GOSS questionnaire and reported that they live in Auckland were more likely to correctly recall (81%) than those living outside of the cities of Auckland, Wellington or Christchurch (70%).
- **Sexual partnering:** Men who reported having had greater than 20 male sexual partners in the last 6 months were significantly more likely to correctly recall the campaign message (89%) than those who had 20 or fewer sexual partners (79%).

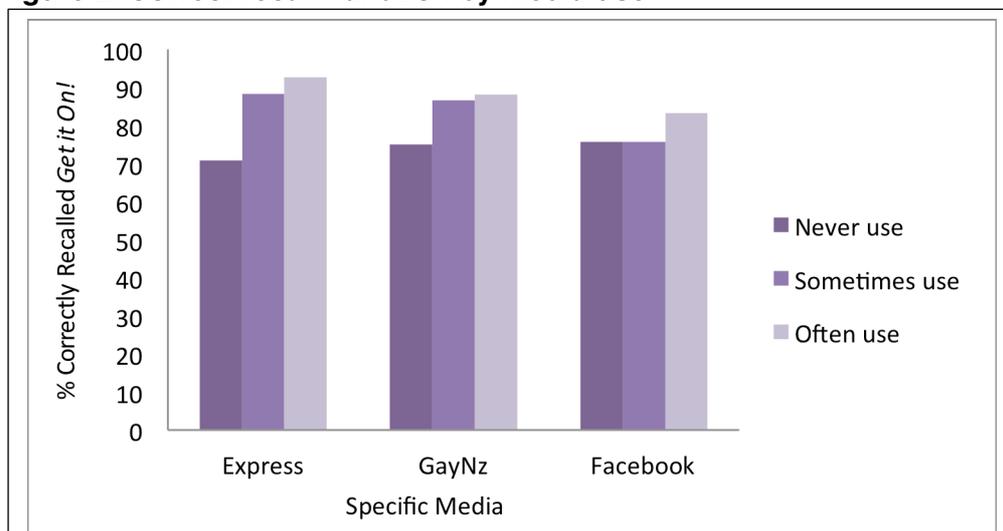
Ethnic group and HIV status were not statistically significantly associated with differences in correct recall.

Media

Respondents who reported often or sometimes engaging with specific media were most likely to correctly recall the *Get it On!* campaign. Those who reported having never used that same media were the least likely to recall.

Figure 2 shows that users of gay-specific media (Express, GayNZ.com) have consistently high correct recall levels in comparison to those who use other social media (Facebook), which has little difference in correct recall levels between those who “never” or “sometimes” use that media.

Figure 2. Correct recall variation by media use



Key target audiences of the NZAF 2009-2014 HIV Prevention Plan

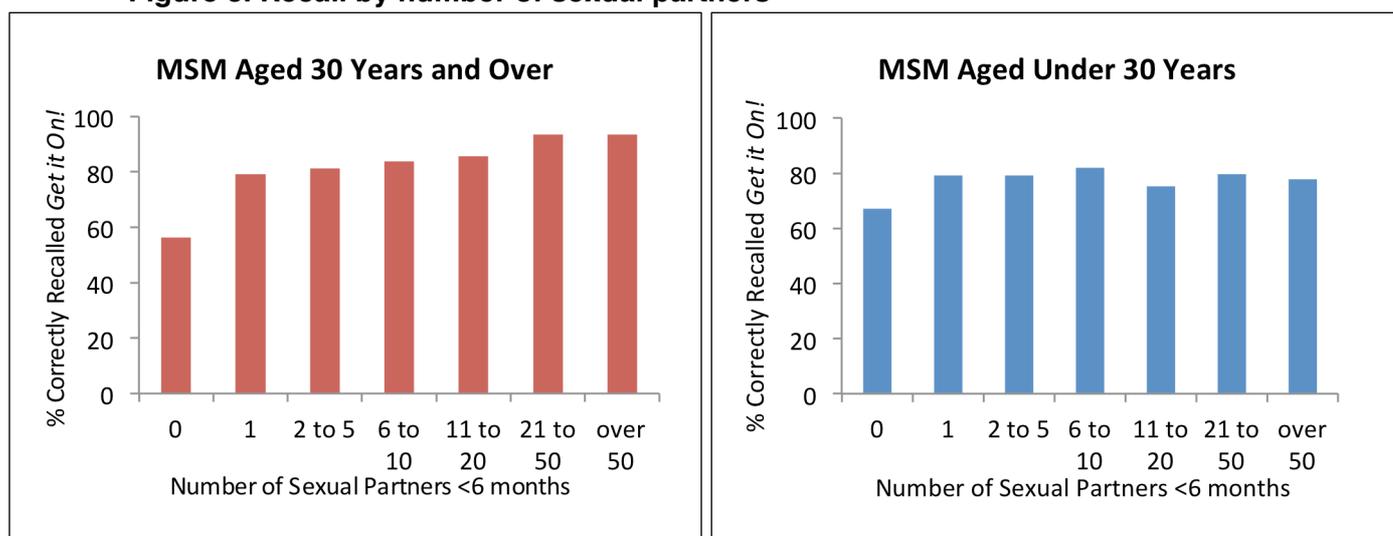
The *Get it On!* campaign is a key component of NZAF's 2009-2014 HIV Prevention Plan, which identifies a number of "target audiences" as the focus of its efforts. The Prevention Plan states:

"In the development of the new NZAF HIV Prevention Plan 2009-14, particular groups have been focused on:

- Gay and bisexual men over thirty years of age who have high numbers of sexual partners (more than twenty sexual partners in the last six months).
- Gay and bisexual men under thirty years of age (the only age cohort with a declining rate of condom use)."

Using this framework we identified two sub-groups: MSM aged 30 years and over and who report high number of sexual partners in the last 6 months (>20), and MSM aged under 30. As seen in Figure 3, correct recall is significantly associated with the number of recent sexual partners among MSM aged 30 or over. Among MSM aged under 30, correct recall is not significantly associated with the number of sexual partners.

Figure 3. Recall by number of sexual partners



Among those men aged 30 years or over who had a high number of sexual partners (>20) in the last 6 months:

- those who identified as gay/homosexual had the highest correct recall (95%) with respondents who identified as "other" having the lowest (50%)
- those who were taken part in the survey at saunas or sex on site venues had the highest levels of correct recall (100%) compared to those recruited from bars (80%)
- those who had ever had an HIV test were more likely to recall (95%) than those who had never had a test (70%)
- those who reported no unprotected anal intercourse (UAI) at last anal intercourse had a higher correct recall level (98%) than individuals who reported any UAI (87%).

Among MSM under 30 years of age:

- those spending more free time with other MSM were more likely to recall (83%) compared to those who spent little/no time (72%)

- those who identify as gay/homosexual had the highest correct recall (83%) while individuals identifying as bisexual had the lowest (67%)
- those who completed GAPSS at the Big Gay Out were more likely to recall (86%) than those completing the survey at other bars (68%)
- respondents who reported ever having an HIV test had higher correct recall (81%) than those who had never had a HIV test (74%)
- those who had an STI test in the last 12 months were more likely to recall (82%) than those who had not had a sexual health check-up in the last 12 months (75%).

3. Behaviours and attitudes of MSM who recalled the campaign slogan

Finally, we compared the behaviours and attitudes of MSM who correctly recalled *Get it On!* against MSM who did not recall the campaign.

Those who correctly recalled the campaign were:

a) significantly more likely to:

- have ever had an HIV test
- have had a sexual health check-up in the last 12 months
- report always using a condom during anal intercourse with casual partners
- report high levels of condom use with casual partners
- know that HIV cannot pass through an undamaged condom
- agree that condoms are ok as part of sex
- agree they have seen a safe sex message relevant to them in the last year; and

b) significantly less likely to:

- agree that they dislike wearing condoms because they reduce sensitivity
- agree that they would rather risk HIV infection than wear a condom
- agree that they sometimes feel under pressure not to use a condom
- agree that they would never be willing to use a condom for anal intercourse.

Discussion

The majority (80%) of all respondents to the 2011 GAPSS and GOSS surveys recalled the *Get it On!* campaign and correctly identified its safe sex message. Recall was higher among certain subgroups of respondents. These were MSM aged over 30 years, who were more educated, gay identified, socialised with gay male peers, participated at the Big Gay Out community event, and had higher numbers of recent sexual partners. It is noteworthy that although some differences in recall were identified, the magnitude was seldom very large and recall amongst most subgroups was high. Recall was also higher among respondents who engaged more often with gay media, and was somewhat higher among regular users of general social media such as Facebook.

Among the subgroups specifically targeted in the NZAF Prevention Plan 2009-2014, recall levels varied significantly with number of sexual partners among those aged 30 years and over. Within that group, MSM who reported higher numbers of partners were more likely to correctly recall.

Correct recollection of the campaign and its message is found more among MSM with a number of positive behaviours, such as reporting consistently high condom use with casual sexual partners, testing for HIV, and positive attitudes towards the use of condoms.

This analysis indicates that the *Get it On!* campaign has been highly successful in reaching the MSM population and conveying its safe sex message. This is reflected in the very high level of recall of the campaign slogan and understanding of the safe sex message associated with it across the MSM who were surveyed. It does not however provide any information on whether the campaign changed any behaviours or attitudes.

GAPSS and GOSS are large robust datasets that reach a diverse range of MSM from across New Zealand, including a wide variety of ages, ethnicities, educational backgrounds, and MSM who exhibit different sexual partnering patterns and behaviours. However, there are some limitations that need to be kept in mind when interpreting the findings. Firstly, the survey only included two questions on *Get it On!* campaign recall and visitation to the getiton.co.nz website. Thus this analysis cannot describe the full range of exposure to the *Get it On!* social marketing campaign collateral, nor the frequency of exposure to campaign material. Secondly, as the survey is cross-sectional we cannot comment on whether the positive safe sex behaviours and attitudes reported by MSM who recalled *Get it On!* are a result of the campaign or whether they preceded it. Nevertheless, campaign recall was highest among subgroups of MSM who were intended to be the targets of HIV prevention interventions and this alone should be regarded as a good result.

This is also the first time that questions directly relating to the NZAF's *Get it On!* campaign have been included into research, therefore we do not have a group to compare these findings with. The timing of data collection in February 2011 places these findings at the beginning of the campaign rollout, so subsequent research, for example the next GAPSS and GOSS surveys in 2014, would be ideally placed to measure progress in campaign exposure. It is also important to combine insights from the present analysis with other evaluations of *Get it On!*

Overall the results are very positive. The 80% correct recall and understanding of the campaign message among all MSM is encouraging, and this high proportion of correct recall is seen consistently across most of the basic demographic groupings. Though we cannot report on the direct influence of the campaign, we can say that it has been highly successful in reaching the MSM population and communicating its pro-condom message.

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