



SOUL CITY 4

IMPACT EVALUATION:

HYPERTENSION

**SMALL BUSINESS DEVELOPMENT
& PERSONAL FINANCE**

July 2001

The dissemination of the Soul City 4 Evaluation results takes place through two processes: the first represents a purely descriptive account of research findings, demonstrating impact where it has been observed. In line with this dissemination objective, a series of summary reports are disseminated. Titles are as follows:

- Soul City – Theory and Impact (synopsis) – August 2001
- Soul City 4 Evaluation Results – Integrated Summary Report, July 2001
- Soul City – Audience Reception, October 2000
- Soul City 4 Impact Evaluation – AIDS, October 2000
- Soul City 4 Impact Evaluation – Violence Against Women Vol I, July 2001
- Soul City 4 Impact Evaluation – Violence Against Women Vol II, August 2001
- Soul City 4 Impact Evaluation – Hypertension, Small Business Development & Personal Savings, July 2001
- Soul City 4 – Cost Effectiveness, September 2001

The second dissemination strategy represents a more reflective, analytical process, and will take place through publication of a series of articles in peer reviewed academic journals.

Esca Scheepers, an external evaluation research methodologist contracted as co-ordinator of the Soul City 4 evaluation compiled this report.

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This report represents a descriptive account of the impact of Soul City in the areas of Hypertension and Small Business Development. Research findings presented here are based on evaluation research contracted by Soul City to independent research agencies.

Sources are:

1. An Evaluation of Soul City 4, researched for Soul City by Community Agency for Social Enquiry (CASE), T Samuels, J Mollentz, R Olusanya, M Claassens, S Braehmenr and Z Kimmie.
 - An Evaluation of Soul City 4: Assessing the Effectiveness of a South African Entertainment-Education Intervention Based on National Survey Data. Field Report (subsumed under the national survey analysis) by Dhaval S. Patel, Department of Communication, Michigan State University.
2. Soul City Series 4 – Sentinel Site Study, data collection and data processing by Social Surveys, under supervision of K Hall. Data analysis by Z Kimmie, Community Agency for Social Enquiry (CASE).
3. Soul City Series 4 - Qualitative Impact Assessment, data collection and data processing by Social Surveys, under supervision of K Hall and K Daniels, data analysis done by E Scheepers, K Daniels and K Hall.

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Appendix A

Executive Summary – Integrated Evaluation Report

Executive Summary:

The Soul City Institute for Health and Development Communication is a South African non-governmental organisation which uses the power of mass media for social change. Soul City's approach to health communication is informed by the Soul City model of social change¹ which is an eclectic integration of existing models of social and behaviour change – such as Social Learning Theory, the Theory of Reasoned Action, the Johns Hopkins Steps to Behaviour Change model, Social Network Theory, the Diffusion of Innovation Model, the Stages of Change Model, and the BASNEF Model. Soul City further bases its intervention on the Ottawa Charter of Health Promotion, and maintains a human rights focus.

Health promotion theory and social / behaviour change theory emphasize the importance of impacting on factors primarily outside of individual control in addition to impacting on determinants of health within individual control in order to have a positive impact on health and social outcomes. The Soul City 4 intervention set out to impact positively on health and social outcomes by addressing the broader social and community environment (e.g. policy implementation, public debate as reflected in the media nationally, community action and collective efficacy, community norms and access to services) and the immediate interpersonal environment (e.g. social norms and peer pressure, support-giving behaviour, as well as interpersonal dialogue and debate) in addition to impacting on individual determinants of health (e.g. knowledge and awareness, personal attitudes, self-efficacy, perception of risk, support-seeking behaviour and intention to change) in the behaviour change process.

The Soul City 4 core multi-media edutainment vehicle comprised of a 13 part prime time television drama, a 45 part radio drama in 9 languages and three full-colour information booklets - one million of each were distributed nationally. The vehicle dealt with the following topics: violence against women (domestic violence and sexual harassment); AIDS (including youth sexuality and date rape); small business development and personal savings and hypertension. Soul City 4 extended the core Soul City vehicle to include a partnership with the National Network on Violence Against Women as part of the series 4 initiative to address violence against women, with an emphasis on domestic violence. The NNVAW brought together many sectors, including government, non-governmental organizations and civil society at large: the Network is a coalition of over 1 500 activists and community organisations from rural and urban areas.

Investigating the impact of a mass media communication vehicle is difficult, especially where behaviour is complex and where there are numerous influences on peoples' behaviour - both positive and negative. The Soul City 4 evaluation design deliberately engaged with these evaluation research difficulties, and set out to document in great detail the extent to which the series (and its partners) succeeded or failed as a comprehensive health promotion intervention. A complex evaluation of Soul City 4² was undertaken consisting of nine interlinked components, all contracted out to external researchers or research organizations - including the overall evaluation management. Both quantitative and qualitative analyses were methodologically rigorous and comply with international standards and data analysis conventions as applied in this particular field of study. The evaluation was supported by an international and local panel of experts in evaluation, communication and entertainment-education, and was mainly funded by the European Union.

¹ The Soul City model of social change is discussed in detail in *Soul City – Theory and Impact (synopsis)*, available upon request or on www.soulcity.org.za.

² Detailed reports on the Soul City 4 evaluation methodology are available upon request or on www.soulcity.org.za: *Soul City 4 Evaluation Methodology, Volume I* and *Volume II*.

The first part of this report presents a summary of the impact of Soul City on knowledge and awareness of hypertension, as well as Soul City's impact on behaviour related to prevention, detection and treatment of hypertension. The second part describes Soul City's impact in the area of Small business Development and Personal Finance. Research results described here are presented in the context of one of the limitations of the national survey undertaken: systematic differences between the pre-intervention and post-intervention samples were observed. The direction of these differences result in under-interpretation of Soul City impact when looking at change between baseline and evaluation measurement. These differences have been controlled for in the regression analysis, and therefore do not reflect on the associations reported.

Hypertension:

Research results suggest that Soul City, as a rule, contributed to increasing accurate knowledge about hypertension as far as severity, aspects of prevention, early detection, services, treatment and aspects of medication go. Interpretation of change observed across all items measured suggests that a few messages did not come across clearly: no increases in knowledge have been observed in an understanding that hypertension *can* be treated, and that medication must be taken *every day*. As mentioned earlier, knowledge of other aspects of treatment and medication did improve: such as the fact that hypertension can have serious consequences if untreated, and that medication needs to be taken even when one feels better.

Soul City also seems to play a role in providing more comprehensive information on hypertension than face-to-face health communication does. Thus, Soul City effectively supplements face-to-face health communication³.

Qualitative evidence suggests that Soul City is associated with hypertension support-giving behaviour over the evaluation period. This observation is not supported by quantitative results.

Analysis of sentinel site data also suggests that exposure to Soul City is associated with positive change in intention (to seek information and to have one's blood pressure checked) and in actual behaviour change (having one's blood pressure checked, and in trying to adopt a more healthy lifestyle).

Analysis of national survey data suggests that exposure to Soul City is associated with maintaining positive intention and positive actual behaviour over the evaluation period. Thus, despite decreases in positive observations from baseline to evaluation measurement generally observed in the national survey data, positive behaviour was significantly associated with exposure to Soul City where respondents *did* display positive / desirable intention and behaviour over the evaluation period.

There was no quantitative evidence of a direct association between Soul City and increased perception of personal risk. Decreases in perception of risk and information-seeking behaviour were observed that might be related to increased knowledge, positive intention and positive actual behaviour associated with exposure to Soul City. Further analysis is necessary to substantiate or refute this hypothesis. Qualitatively, Soul City is associated with increased perception of risk: "new" knowledge that hypertension can affect *anyone* have been attributed to Soul City.

³ This statement is based on comparative analysis of responses from people who did, and people who did *not* have contact with a health worker around high blood pressure, interpreted in conjunction with the increases in accurate knowledge associated with exposure to Soul City.

Small Business Development and personal finance:

Knowledge and awareness: qualitative data suggest that Soul City succeeded in making people aware of the option of starting a small business in the face of unemployment and financial difficulty. Soul City further seemed to have succeeded in counteracting gender stereotyping in business, and in raising awareness around the benefit of saving and budgeting. There was no quantitative evidence of an association between Soul City and knowledge around obtaining institutional financial support for starting a small business. Thus, quantitative (and qualitative) data suggest that the message informing people of the fact that they can get financial assistance from micro lending institutions, was not effective. This may be related to the reality that it remains difficult for people to access institutional financing.

Self-efficacy: qualitative data further suggest that people saw starting a small business as an effective way of becoming self-sufficient and independent, thereby escaping oppressive gender power relations, or oppressive race relations.

There may be some suggestion of an association between Soul City and intention to save money and start a small business. However, the scaled measurement of “intention” was unreliable, rendering the quantitative evidence unconvincing.

Exposure to Soul City radio and multi-media is significantly associated with support-seeking behaviour (around saving money) during the time that Soul City was on air.

In the Sentinel Site Study, exposure to Soul City television is associated with positive behaviour change (around saving, budgeting and starting a small business). In the National Survey, exposure to Soul City television and multi-media is associated with respondents’ trying to save money over the period that Soul City was on air.

Conclusion:

Limitations in the study make interpretation of some quantitative findings difficult. Despite this ambiguity in interpreting some of the results, integrated data analysis suggests that Soul City 4 is associated with increasing accurate knowledge about high blood pressure, with positive change in intention and actual behaviour (as observed in the Sentinel Site Study), and with maintaining positive intention and actual behaviour (as observed in the national survey). There also seems to be a quantitative association between exposure to Soul City and support seeking behaviour over the evaluation period around small business development and personal savings, as well as with behaviour change and maintaining positive behaviour— particularly with reference to personal savings. Qualitative evaluation results support and often add to an understanding of Soul City’s positive impact – especially with regard to nuances in knowledge and awareness around small business development and personal finance not measured quantitatively.

In the area of Hypertension and Small Business Development, Soul City 4 primarily aimed at impacting on individual knowledge and awareness, intention and actual behaviour. The evaluation suggests that, with some exceptions as described above, the Soul City Institute for Health and Development Communication largely reached these particular objectives, and (in so far as it set out to do so in the fourth series of Soul City) fulfilled its aim as an effective health communication vehicle on the two topics reported on in this summary report.

(Self-efficacy, attitudes, subjective social norms and interpersonal communication have not been quantitatively measured for Hypertension and Small Business Development and Personal Finance.)

Summary table of key impact observed – Hypertension and Small Business Development & Personal Finance:

Area of impact	Soul City 4 Topic	Key impact observed TRENDS REPORTED	Nature of the association / data	Audience segments where impact have been observed / results generalizable to ... TRENDS REPORTED	Soul City 4 Evaluation Source
Knowledge and awareness	Hypertension	<p>Positive change / increase in knowledge and / or awareness: severity, early detection, prevention (adopting a healthy lifestyle), treatment and medication. Increased knowledge that:</p> <ul style="list-style-type: none"> * high blood pressure can seriously harm people if it is not properly treated * you [do not] only need to take medication for high blood pressure until you feel better * you can[not] feel if you have high blood pressure * where to have one's blood pressure checked * people should ask health workers to check their blood pressure every time they visit a clinic or hospital. <p>(* knowledge about adopting a healthy lifestyle to treat and prevent hypertension)</p> <p>No evidence of change in the following 2 items:</p> <ul style="list-style-type: none"> * high blood pressure cannot be treated; there is nothing you can do to make it better;* * if you have high blood pressure you need to take medication every day 	Quantitative Qualitative	<ul style="list-style-type: none"> * General target audience; * For some messages, rural audiences: - you can [not] feel if you have high blood pressure - you [do not] only need to take medication for high blood pressure until you feel better - people should ask health workers to check their blood pressure every time they visit a clinic or hospital. 	<ul style="list-style-type: none"> * National Survey * Sentinel Site Survey * National Qualitative Impact assessment
	Small Business Development and Personal Savings	<p>Positive change in awareness:</p> <ul style="list-style-type: none"> * starting a small business as a way of dealing with unemployment or financial difficulty * Women can succeed in business – it is not a man's domain * Saving and spending <p>No quantitative evidence of positive impact on obtaining institutional financial support for starting a small business.</p>	Qualitative	N.A.	National Qualitative Impact assessment

Area	Topic	Key impact	Data / association	Generalizable to	Source
Perception of risk / severity (Small Business Development – not applicable)	Hypertension:	No evidence of a direct quantitative association between SC and perception of personal risk Positive change: perceptions that Hypertension can affect anyone	Qualitative	N.A.	National Qualitative Impact assessment

Self-efficacy: the belief that one can effect change / positive behaviour	Small Business Development and Personal Savings	Positive change: running a small business is a means of gaining self-sufficiency and independence, in the context of oppressive gender and race relations	Qualitative	N.A.	National Qualitative Impact assessment
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Intermediate practice (support-seeking / support-giving behaviour)	Hypertension	No quantitative evidence of an association with SC and information-seeking behaviour Positive change e.g. changed cooking habits, urged others to have their blood pressure checked	Qualitative	N.A.	National Qualitative Impact Assessment
	Small Business Development and Personal Savings	Positive behaviour over the evaluation period: * got advice about saving	Quantitative	* Urban audience * Women	National Survey

Intention	Hypertension	Positive change in intention and / or positive intention during broadcast period: * Thought about having one's blood pressure checked (* Thought about finding out more about hypertension)	Quantitative Qualitative	* Rural sentinel site audience (change) * General target audience * Urban audience (positive intention during broadcast period)	* Sentinel Site Survey * National Survey * National Qualitative Impact assessment
	Small Business Development and Personal Savings	Some suggestion of an association between SC and intention to save money and start a small business. However, quantitative evidence is inconsistent across items, and unreliable as a scaled measurement of intention. Positive change: Intention to save	Quantitative Qualitative	General target population N.A.	National Survey National Qualitative Impact assessment

Area	Topic	Key impact	Data / association	Generalizable to	Source
Actual behaviour change	Hypertension	Positive change / improvement in behaviour and / or maintaining positive behaviour over the broadcast period; * having one's blood pressure checked, (* adopting a healthier lifestyle by changing one's diet, exercising more, consuming less alcohol and smoking less, * suggesting that someone else should have their blood pressure checked)	Quantitative Qualitative	* Urban sentinel site audience (change) * General target audience (had blood pressure checked over broadcast period)	* Sentinel Site Survey * National Survey * National Qualitative Impact assessment [National Survey: technical difficulty in fully analysing associations with SC – number of response too small]
	Small Business Development and Personal Savings	Positive change / improvement in behaviour and / or maintaining positive behaviour over the broadcast period: * tried to save money (* managed to save money * worked out a budget * worked out a business plan * own a small business at present)	Quantitative Qualitative	* Sentinel sites audience (change) * Urban audience * Men (tried to save money over broadcast period)	* Sentinel Site Survey * National Survey * National Qualitative Impact assessment

(For items that are presented in brackets, the association was based on scale analysis; for other items, the association was based on single-item analysis and scale analysis.)

BACKGROUND

The Soul City Institute for Health and Development Communication is a South African non-governmental organisation which uses the power of mass media for social change.

Soul City is a national multi-media “edutainment” project. It aims to impact positively on people’s quality of life through integrating health and development issues into prime time television and radio dramas, backed up by full colour easy to read booklets. Soul City has developed and aired three previous series of Soul City which have dealt with a variety of topics including AIDS, Tobacco, Tuberculosis and Interpersonal Violence. Soul City also has a number of offshoot projects including youth life skills materials (for grades 8 & 9) and a children’s edutainment vehicle called “Soul Buddyz”.

Soul City 4 dealt with four key topics through the vehicle:

- a 13 part prime time television drama,
- a 45 part radio drama in 9 languages
- three full colour information booklets, one million of each were distributed nationally.

The series 4 topics were:

- violence against women (domestic violence and sexual harassment),
- AIDS (including youth sexuality and date rape),
- small business development and personal savings
- hypertension.

The Soul City model of social change:

Behaviour change is difficult to influence, as there is an interwoven complexity of factors which influence how a person behaves. This is even more complex when the behaviour involves more than one person (as it does in sexual intercourse), when the behaviour is intensely private as it is in sexual behaviour, where behaviour is sustained by a multitude of ingrained social values and norms (as is the case with unequal gender power relations and domestic violence) and where people are poorly resourced and service delivery more often than not falls short of demand and expectations.

The Soul City model of social change⁴ is an integration of existing models of behaviour change – such as Social Learning Theory, the Theory of Reasoned Action, the Johns Hopkins Steps to Behaviour Change model, Social Network Theory, the Diffusion of Innovation Model, the Stages of Change Model, and the BASNEF Model. Very importantly, Soul City further bases its intervention on the Ottawa Charter of Health Promotion, which situates the individual in the context of broader community and societal influences. It consequently

⁴ Discussed in more detail in *Soul City – Theory and Impact (synopsis)*, available upon request or on www.soulcity.org.za.

operationalises broader aspects of health promotion - such as advocating for healthy public policy and creating a supportive environment for behaviour change. Soul City maintains a Human Rights focus.

In short, the Soul City model of social change includes models and theories which focus on individuals, contextualized in their immediate interpersonal and social environment, as well as look at community and broader societal impact on behaviour change.

METHODOLOGY

*Study Design, Sampling and Data Collection*⁵:

Several studies were independently contracted out to collectively form the integrated evaluation of Soul City 4¹. Results presented here are based on the following components of the overall evaluation of Soul City 4:

- 1) A National Survey: baseline (pre-intervention) and evaluation (post-intervention) data collection consisted of standardized, face-to-face interviews, conducted on different (but largely comparable) samples of 2000 respondents for each survey. The samples were statistically representative of the Soul City target population nationally⁶ - a multi-stage stratified national random sample design was used.
- 2) Sentinel Site Study, conducted in a rural KwaZulu-Natal site and an urban Gauteng site: a survey was conducted and consisted of repeated measurement of a panel (or cohort) of respondents in each site (representing Soul City's target audience, and statistically representative of each of the two communities based on a multi-stage stratified sample with systematic sampling of dwellings within clusters, and random selection of respondents within that). There were four measurements - pre-intervention (baseline), 2 measurements during the time that Soul City was on air, and post-intervention (evaluation) measurement. Standardized, face-to-face interviews were conducted on a sample of 500 respondents per site, with an additional 100 interviews controlling for the research effect. The same instrument (standardized questionnaire) was used in both the National Survey and Sentinel Site Surveys, with the panel questionnaire adapted slightly to take the study design and specific study objectives into account.
- 3) National Qualitative Impact Assessment: data collection comprised of 31 qualitative focus group interviews and individual interviews conducted amongst Soul City's target audience. Approximately two

⁵ A detailed description of methodology is presented in *Soul City 4 Evaluation Methodology, Volume 1*, available upon request or on www.soulcity.org.za. Detail around instruments used is available upon request, suegold@soulcity.org.za.

⁶ The Soul City adult series targets "African" and "Coloured" previously disadvantaged South Africans. Although the series is suitable for all populations, theory of communication suggests that specific targeting and testing of materials makes it more effective. Soul City is however committed to the health and development of all South Africans irrespective of colour, race or any other characteristic.

thirds of the fieldwork was conducted in the 2 sentinel sites, and one third of the fieldwork was extended to a further 4 provinces (i.e. fieldwork was conducted in 6 of 9 provinces in total). Respondents in the sentinel sites were part of the panel (cohort) described under the Sentinel Site Study, and were recruited on the basis of similarities in their responses to a selection of items in the sentinel site survey. Respondents in the other 4 provinces were selected on the basis of exposure to Soul City. A further 30 semi-structured interviews were conducted with community members representing leadership, services and civil society in the two sentinel sites. Respondents were recruited in their organizational or leadership capacity, and participated on the basis of their availability.

*Data analysis*⁷:

The quantitative analysis of the national survey consisted of

- 1) identifying significant shifts (at a 5% significance level) from baseline to evaluation using Chi-square tests, for all items / questions in the questionnaire (referred to as “single-item analysis” in this report);
- 2) modelling responses from the baseline and evaluation surveys using binary logistic regression analysis on the combined data set. This technique was used to overcome some of the shortcomings of cross-tabulations, which can produce inaccurate results because responses to particular questions may be affected by factors not included in the original cross-tabulations. The binary logistic regression analysis identifies which variables account for the variation of responses to questions, and what interactions between variables are at play. Explanatory variables used were phase (pre/ post intervention), area (urban, rural), age, sex, race and education level;
- 3) cross-tabulations were then carried out on each question (item), controlling for variables that the binary logistic regression analysis identified as significant in explaining responses to questions. (Chi-square tests were used to measure significance.) A similar approach was used to explore the association with Soul City 4 media with responses to individual questions in the evaluation data set. The same explanatory variables were included in the model (except for phase), in addition to exposure to different components of the Soul City intervention. (Separate analysis was carried out to assess the relative impact of each of the multi-media components⁸.)

⁷ Detailed descriptions can be found in *Soul City 4 Evaluation Methodology, Volume I*.

⁸ Note that for the national survey single-item analysis, multi-media exposure has not been controlled for in single-media analysis, due to restrictions in building models using binary logistic regression analysis. Where single-media effects are reported, these effects must therefore be interpreted in the context of the reported compound, or multi-media exposure effect. In view of the strong reinforcing effect of multi-media exposure, significant results reported for TV exposure (for example), usually also include the reinforcing effect associated with exposure to radio and / or print. Since different analysis techniques were used for analysis of the sentinel site data, and national survey scale analysis, controlling for multi-media exposure did take place in all national survey scale analysis, as well as in all sentinel site analysis.

In addition to single-item analysis, scale analysis (analysis of composite scores on a combination of “single” items) was performed on the National Survey data (and Sentinel Site data): all essential items were subjected to a face validity screening, which grouped measures by outcomes (i.e. awareness, knowledge, attitudes, subjective social norms, behaviour, intention, interpersonal communication and support behaviour, perception of risk and self-efficacy) for all themes (domestic violence, AIDS etc.). Subsequently, the scales were analysed for reliability (Cronbach alpha), using the evaluation survey data. Scales were assessed as reliable when Cronbach alpha was greater than or equal to 0.70⁹. After scales were assessed for reliability, the response categories for their indicators were labelled for desired directionality so that composite scores could be calculated for analysis. Multivariate Regression Analysis was done in order to determine the impact of the explanatory variables (Soul City exposure, and exposure to the NNVAW) on the outcome variables (i.e., awareness, knowledge, attitudes etc.), controlling for socio-demographic variables (i.e. area, age, sex, employment, and education).

In the case of the Sentinel Site panel survey analysis, wherever possible, scales constructed as above were used to measure the changes in responses to various constructs over time. In isolated cases single item analysis was done. Each scale was measured in the same manner, with a minimum score of 0 and a maximum score of 1. The desired responses were measured in a positive direction, i.e. a respondent who gave the desired response to each question had a score of 1 and the respondent who gave the undesirable (or unacceptable) response to each question had a score of 0. A repeated-measure analysis of covariance design was used to test whether respondents have changed their responses over time, and whether any of these changes are correlated to exposure to Soul City 4. The covariates used in the analysis were age (measured in years) and education (measured in years of completed education), and the between subject factors were sex, location (either Gauteng or Kwa-Zulu Natal) and exposure to the Soul City intervention.

As far as qualitative data analysis is concerned: computer aided, thematic analysis of qualitative data was conducted.

Limitations of the study:

Limitations of the evaluation are addressed in the methodology reports. Some aspects are briefly referred to here:

1. In the National Survey, the evaluation sample was significantly less employed, and had less regular general use of media, which can possibly account for the counter-intuitive decreases observed between baseline

⁹ In this report, results for scales with a lower reliability coefficient (i.e. Cronbach alpha less than 0.7, but greater than 0.5) are also reported, and need to be interpreted in this context. In one instance only a scale with a reliability coefficient of 0.4 is reported, with the necessary caution taken into account in interpretation.

and evaluation measurement mentioned subsequently in this summary report . These observed differences between the two samples do not skew the analysis in favour of Soul City though – rather, where positive shifts are observed, they are likely to have been more pronounced had the sample been totally comparable. In other words, the observed differences between the baseline and evaluation samples would result in under-interpretation of Soul City impact when looking at baseline to evaluation shifts. These differences have been controlled for in the regression analysis, and therefore do not reflect on the associations reported.

2. As a rule, from an academic or theoretical perspective, data (both qualitative and quantitative) are currently under-analysed. As a matter of priority, initial analysis consisted of investigating the association between exposure to Soul and change observed – hence the purely descriptive nature of the reports currently disseminated. The data, however, lends itself to more in-depth analysis of, for example, interaction effects and various other hypothesis-testing analyses.
3. Furthermore, in interpreting the impact observed, the relatively short evaluation period needs to be taken into account. Eight to nine months elapsed between pre-intervention and post-intervention data collection. The short evaluation period is sometimes used in the summary reports as a possible explanation for not observing impact. However, the converse must also be kept in mind: additional research is necessary to investigate the longer term impact of Soul City, and the sustainability or durability of observed impact.

A: HYPERTENSION

Hypertension is extremely common in South Africa (and throughout the world), and is associated with a high rate of disease, disability and death. Estimates are that approximately six million South Africans are unknowingly walking around with hypertension, and are at risk for all its complications.

Hypertension is a major public health problem which not only has physical, economic, social and occupational impacts on individuals and their families, but places an enormous burden on the social and health services of South Africa. It results in costly medical care, impacts on productivity and absenteeism and is a drain on personal and family income. Additionally, the drugs used to treat hypertension have their own significant side effects. Prevention of hypertension and its complications is therefore critical.

Key hypertension messages addressed by Soul City 4, were as follows:

- High Blood Pressure, if not treated, has serious consequences.
- You cannot feel if you have High Blood Pressure; the only way to detect High Blood Pressure is to have blood pressure measured by a health worker.
- Living a healthy life (e.g. lose weight if overweight; cut down on salt, alcohol, and fatty / fried food; and become physically active) can prevent and treat High Blood Pressure. Living a healthy life is good for everyone –

not just people with high blood pressure – it helps to prevent other diseases too.

- Some people with high blood pressure will need to take medicines as well as live a healthy life.
- If you are taking High Blood Pressure medication, you have to do so every day of your life, even if you feel well¹⁰.

The first part of this report presents a summary of the impact of Soul City on knowledge and awareness of High Blood Pressure (as outlined above), as well as Soul City's impact on behaviour related to prevention, detection and treatment of hypertension.

EVALUATION RESULTS¹¹

A: KNOWLEDGE AND AWARENESS:

The following section describes in detail the associations between Hypertension knowledge and exposure to Soul City media observed across 3 different evaluation studies and based on different quantitative methods of analysis. Non-specific measurement sometimes make it difficult to interpret individual results. However, having taken the latter as well as statistical and other forms of research error into account, *the degree of associations measured, as well as the frequency with which significant associations have been observed across many knowledge items and across different Soul City media-types, suggest that Soul City 4 was effective in increasing accurate knowledge about Hypertension.*

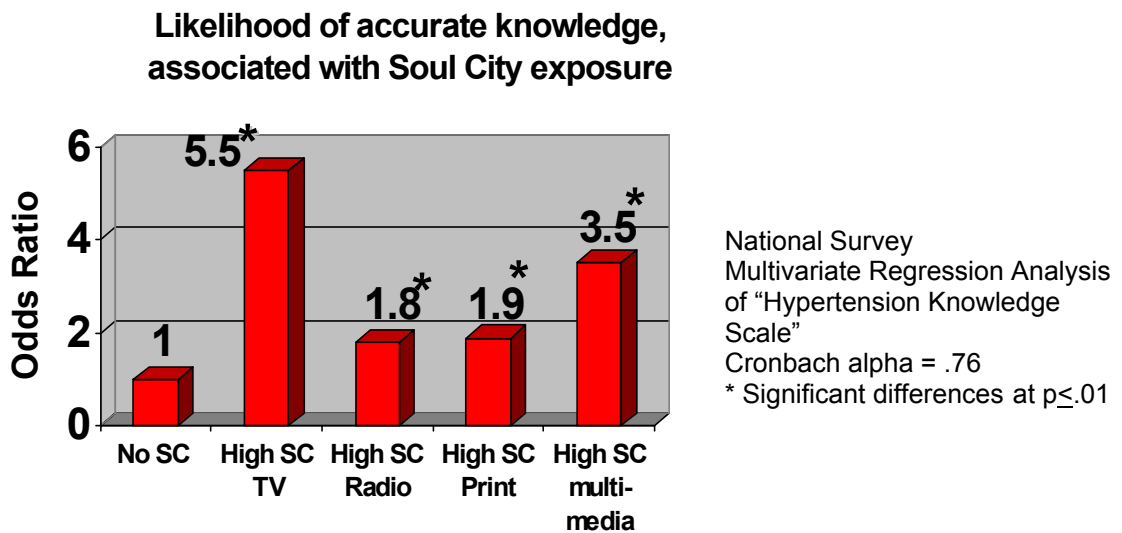
Results are presented in two sections: 1) scale analysis, which presents a more reliable analysis of hypertension knowledge as a whole, and 2) single-item analysis which presents detail around the effectiveness (or lack thereof) of specific Soul City 4 messages.

¹⁰ Soul City 4 Message Brief

¹¹ All quantitative results presented are based on the national survey results, unless otherwise stated. Where quantitative data from the sentinel site studies are presented, it will be clearly indicated in the report. Unless otherwise stated, all associations with Soul City media reported throughout the report are significant at $p \leq 0.05$. All quotations are from the national qualitative impact assessment. Quotations are not reported unless they illustrate or represent a theme emerging from systematic, thematic analysis of interviews.

I. Scale analysis of Hypertension knowledge:

Scale analysis¹² of hypertension knowledge¹³ across various items in the National Survey suggests that exposure to Soul City 4 is significantly associated with increased likelihood to have accurate knowledge of hypertension: low, moderate and high exposure to Soul City Print material is significantly associated with increased hypertension knowledge, whereas moderate and high exposure to Soul City TV and multi-media, and high exposure to Soul City Radio are associated with increased knowledge. Respondents with high exposure to Soul City TV were 5.5 times more likely to have more accurate knowledge of hypertension than respondents with no exposure to Soul City TV.

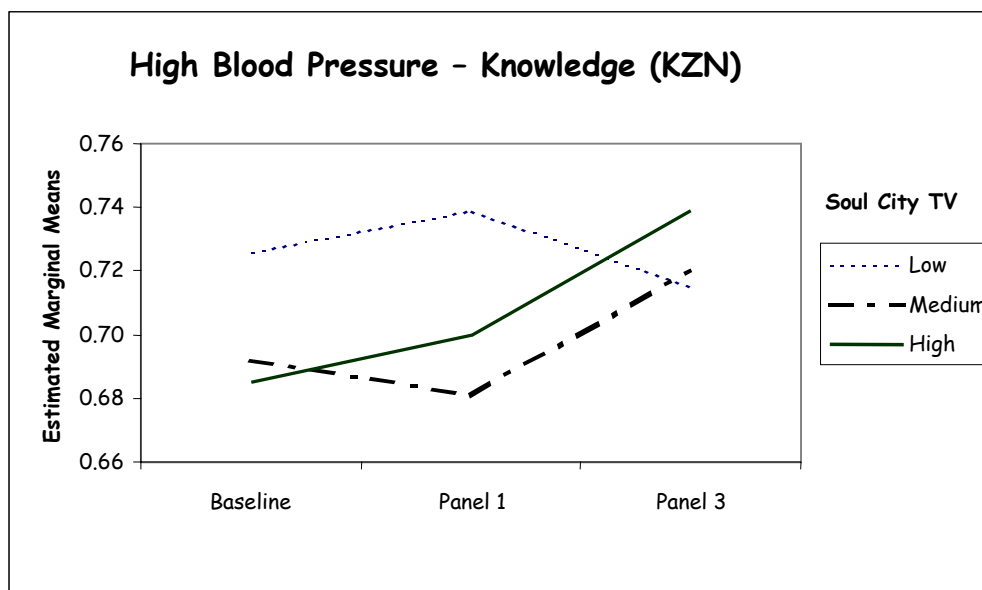


This observation is supported by analysis of Sentinel Site Study data: an increase in knowledge of hypertension (based on scale analysis) was observed over the period that Soul City was on air, with access to Soul City television being significantly associated with the improvement in knowledge among respondents in rural Kwa-Zulu Natal. Respondents with low access to Soul City television did not significantly change their responses to knowledge

¹² Cronbach alpha = .76

¹³ Knowledge of severity, early detection, prevention (adopting a healthy lifestyle), treatment and medication.

items between the baseline and final panel surveys, but respondents with medium or high levels of exposure significantly improved their knowledge.



II. Single-item analysis of Hypertension knowledge

1. Knowledge and Awareness of high blood pressure – severity, prevention, treatment and medication:

General recognition of the term “High Blood Pressure” was high, with more than 8 out of 10 people in both the baseline and evaluation surveys responding positively to the question “have you heard about high blood pressure?”

Respondents who did not initially recognise the term “high blood pressure” were given a definition of high blood pressure, and were then asked if they recognised the description. A significantly higher proportion of respondents in the evaluation (45%) than in the baseline (29%) survey recognised the description of high blood pressure after being given this prompt. Respondents between the ages of 25 and 35 years and those aged over 46 years were significantly more likely to recognise the term in the evaluation than in the baseline survey. Although this increase in awareness coincided with the time that Soul City was on air, the statistical association with Soul City 4 has not been investigated further.

- **High blood pressure can seriously harm people if it is not properly treated:**

Although correct information on this item was very high to start off with, there was nevertheless a significant increase in correct responses between the baseline (90%) and evaluation surveys (93%). This increase is significantly associated with exposure to Soul City TV, Soul City print material, and exposure to more than one Soul City media source:

Respondents with exposure to Soul City TV were significantly more likely to be aware that high blood pressure is a serious health problem if it is neglected than respondents with no exposure to the TV series. There was a difference of 4% between respondents with no exposure to Soul City TV and those with high exposure to Soul City TV. There was no dose effect operating on this question.

High blood pressure can seriously harm your health if it not properly treated	
	Agree
No TV	90%
No Soul City TV	90%
Low Soul City TV	95%
Medium Soul City TV	94%
High Soul City TV	94%

Exposure to Soul City Print was significantly associated with respondents' knowledge of the seriousness of high blood pressure. Exposure to Soul City print materials showed a consistent dose response pattern among urban respondents (but not for the general sample). Ninety two percent of urban respondents with low print exposure gave the correct answer, compared to 95% with medium exposure and 96% with high print exposure.

Respondents exposed to two sources of the Soul City intervention were significantly more likely to know how serious high blood pressure is than respondents exposed to one component. However, respondents with exposure to three sources of the intervention were no more likely to give the correct answer than respondents with two sources. There was a difference of 8% between respondents with no exposure to Soul City and those with exposure to 2 or 3 sources of Soul City.

High blood pressure can seriously harm people if it not treated	
	Agree
No SC	87%
1 source	92%
2 sources	95%
3 sources	95%

Respondents in the qualitative research articulated an understanding of the consequences of not treating high blood pressure (expressed in the context of talking about what they had gained from exposure to Soul City), as illustrated in the following quotations:

“You must keep on checking it because sometimes you cannot feel it and when it comes it’s very dangerous. You can even end up getting a stroke and dying.”

“Yes high blood results in one having a stroke.”

[Urban, Mixed Sex Group]

“And I should check my blood pressure regularly as well all the time because if I don’t I might end up with a stroke.”

[Urban, Mixed Sex Group]

- **You only need to take medication for high blood pressure until you feel better**

“I liked Soul City because it taught us about high blood and when the doctor tells you to take pills you should take them because the minister didn’t use them until he had a stroke.”

[Rural Eastern Cape, mixed sex group]

There was an increase in the proportion of correct answers between the baseline (26%) and evaluation survey (32%). Particularly rural respondents had made improvements on this question between the two surveys: 19% in the baseline survey correctly disagreed with this statement, compared to 32% in the evaluation. This increase is significantly associated with exposure to Soul City TV, Soul City print material, and exposure to more than one Soul City media source:

Exposure to medium Soul City TV was significantly associated with whether respondents correctly disagreed with the statement. There was no significant dose effect on this question.

You only need to take medication for high blood pressure until you feel better	
	Disagree
No TV	23%
No Soul City TV	31%
Low Soul City TV	34%
Medium Soul City TV	40%
High Soul City TV	30%

The non-linear effect between the degrees of exposure to Soul City observed above is difficult to interpret: it may be related to the general (as opposed to specific, or detailed) measurement of exposure to Soul City; in other words, the degrees of exposure give a sense of *how many* episodes were watched, but not *which* episodes were watched. This becomes important, because theme-specific messages (such as hypertension messages for example) were carried in specific episodes. For example, 2 out of 13 episodes were primarily devoted to Hypertension. It is possible for respondents to have been categorised as “highly exposed to Soul City TV”, but not to have been exposed to some or any of the theme-specific episodes (hypertension in this case), which could partially account for non-linearity. Secondly, as mentioned earlier, in this particular method of analysis, exposure to any single media does not exclude exposure to other media sources. Thus, the “no Soul City TV” group, may have exposure to other sources of Soul City – such as Radio

and / or Print which could account for their performance on this item relative to the “high Soul City TV” group. Against the background of this non-specific measurement and subsequent analysis, a robust interpretation of findings is proposed when it comes to making sense of inconsistent dose effects observed: on the strength of the statistically significant difference between respondents with medium exposure to Soul City TV and those with no exposure to Soul City TV, as well as the progression between low and medium exposure to Soul City TV, the analysis does suggest that there is an association between exposure to Soul City TV in this case, and knowledge that one does not have to take hypertension medication only until one feels better, although this must be interpreted with caution.

Respondents exposed to medium print exposure were significantly more likely to disagree (32%) with the statement than respondents with low (29%) or high (25%) print exposure. Again, the degrees of exposure to Soul City Print material does not take into account whether respondents were in fact exposed to the Hypertension-specific material, and may account for the inconsistent dose response observed. However, a statistically significant association between exposure to Soul City Print and the desired response have been observed on a 95% significance level.

Respondents exposed to three sources of the Soul City intervention were significantly more likely to disagree with the statement than respondents with exposure to one or two sources. There was a difference of 8% between respondents with no exposure to Soul City and those with exposure to 3 sources of Soul City.

You only need to take medication for high blood pressure until you feel better	
	Disagree
No SC	29%
1 source	30%
2 sources	30%
3 sources	37%

- There was no significant improvement on the following 2 items from baseline to evaluation:
 - High blood pressure cannot be treated; there is nothing you can do to make it better;
 - If you have high blood pressure you need to take medication every day

This suggests that some key messages were not effective in bringing about change in knowledge of hypertension treatment and medication.

- **Healthy lifestyles:**

Thematic analysis of the qualitative data suggests that Soul City plays an awareness-raising role when it comes to promoting healthy lifestyles and reducing high blood pressure. Some illustrative quotations include:

“They gave us health, on the side of high blood; oh no, I take off my [hat] to Soul City.”

[Rural, Female]

“With me, I have gained a lot in Soul City, especially on our health. they tell us what type of food to eat, and which foods to avoid, you know eating these rich foods like too much sugar and too much fats those are the foods that cause high blood and other diseases that comes from sugar. So Soul City is able to show us what to eat and what not to eat.”

[Urban, Female]

[In the context of relating Soul City’s impact on their lives] *“And again as I don’t work far from home I should not use taxis to go to work, I should teach myself to walk all the time that help because I would be exercising as well.”*

[Urban, Mixed Sex Group]

“And I saw that me too, as a person who has this high blood pressure I should leave salt alone even though I liked it, I should leave oil alone even though I buy it, I saw that I should leave those things because I will end being a person who has a stroke. So I’m saying that this Soul City thing really worked for me.”

[Rural Eastern Cape, Female Group]

“One other thing that we got from Soul City is to teach us about diseases, like how to eat in order to protect your self from high blood and other diseases.”

[Rural North West, Male Group]

Positive (but not statistically significant) shifts were observed on the following national survey knowledge items: eating more vegetables, more fruit and smoking less “makes high blood pressure better”. Significant, positive shifts were observed on knowledge that reducing intake of meat “makes high blood pressure better”. The association between exposure to Soul City and these single-item improvements have not been investigated further due to technical difficulties in analysis – the number of responses were too small to allow reliable analysis.

2. Knowledge of high blood pressure – early detection:

- **You can feel if you have high blood pressure**

“And before we used to think that you can feel when you have high blood pressure but they [Soul City] have shown us that you cannot feel it that is why you have to check it.”

[Urban, Mixed Sex Group]

There was a significant increase in the proportion of correct answers from baseline (19%) to evaluation survey (21%). Particularly men had significantly improved their scores on this question between the two surveys - an increase from 16% (Baseline) to 24% (Evaluation) in correct answers.

Note that correct knowledge on this item is still fairly low – approximately 1 in 5 people knew that you couldn't feel if you have high blood pressure. This indicates that more education on this aspect is necessary.

The observed increase in correct responses was significantly associated with exposure to all Soul City media:

Respondents exposed to medium and high Soul City TV were significantly more likely to know that people cannot feel if they have high blood pressure than respondents without exposure to the TV series. There was a difference of 6% between respondents with no exposure to Soul City TV and those with high exposure to Soul City TV.

You can feel if you have high blood pressure	
	Disagree
No TV	13%
No Soul City TV	19%
Low Soul City TV	22%
Medium Soul City TV	25%
High Soul City TV	25%

Similarly, respondents with exposure to Soul City radio were significantly more likely to know the correct answer than respondents without exposure to the radio series, and respondents with medium print exposure were significantly more likely to correctly disagree with the statement than respondents with low or high print exposure. There was no consistent dose effect operating in the Radio and Print observations.

Respondents with exposure to more than one component of the Soul City intervention were significantly more likely to know that you cannot feel if you have high blood pressure than respondents with exposure to one component of the intervention. There was a dose effect, with respondents exposed to three components of the intervention being significantly more likely to answer correctly than respondents exposed to two components. There was a

difference of 17% between respondents with no exposure to Soul City and those with exposure to 3 sources of Soul City.

You can feel if you have high blood pressure	
	Disagree
No SC	15%
1 source	16%
2 sources	23%
3 sources	32%

The compound effect of exposure to more than one component of the Soul City intervention was much more marked among rural respondents, with a 32% difference between those exposed to 3 sources of Soul City and those with no Soul City exposure.

You can feel if you have high blood pressure	
Rural	Disagree
No SC	13%
1 source	19%
2 sources	29%
3 sources	45%

- **Who can check your blood pressure?**

There were significant increases from baseline to evaluation in the proportion of respondents who knew that hospitals, clinics and chemists could check blood pressure.

Do you know who can check your blood pressure?	Baseline	Evaluation
Hospital	35%	39%
Clinic	47%	55%
Chemist/pharmacy	2%	4%

Exposure to Soul City TV, radio, print and multi-media is associated with the knowledge that a hospital, clinic, or chemist (in the case of exposure to radio) can check one's blood pressure:

Exposure to Soul City TV and exposure to Soul City print material were significantly associated with whether respondents knew that hospitals or clinics could check blood pressure. Respondents with high exposure to Soul City TV were significantly more likely to say a hospital could check blood pressure (45%) than respondents with no exposure to Soul City (33%). There was no dose effect, but respondents with some exposure to Soul City TV still

performed better than those without exposure to the TV series. A similar pattern was found among respondents who knew that clinics could check blood pressure. Respondents with high Soul City TV exposure (60%) were significantly more likely to answer this question correctly than non-viewers (49%).

Similarly, respondents with high exposure to Soul City print performed significantly better than respondents with low exposure: respondents with high Soul City print exposure were more likely to know that hospitals (49%) and clinics (66%) can check blood pressure, compared to respondents with low exposure (37% and 52% respectively).

Exposure to Soul City radio was significantly associated with respondents knowing that a hospital or chemist could check blood pressure. Respondents who said that a hospital or chemist could check blood pressure were more likely to have listened to Soul City. Respondents with low exposure to Soul City radio performed significantly better (47%) than respondents with no exposure (36%).

Exposure to more than one component of the Soul City intervention had a compound effect on whether respondents knew that hospitals or clinics could check blood pressure. Difference of 9% (knowledge of hospitals as facilities where blood pressure can be checked) and 19% (clinics as facilities where blood pressure can be checked) between respondents with no exposure to Soul City and those with exposure to 3 sources of Soul City were measured.

Hospitals can check blood pressure	%
No SC	39%
1 source of SC	39%
2 sources of SC	40%
3 sources of SC	48%

Clinics can check blood pressure	%
No SC	43%
1 source of SC	57%
2 sources of SC	56%
3 sources of SC	62%

- **People should ask health workers to check their blood pressure every time they visit a clinic or hospital**

“Before I saw Soul City, things like going for a blood test and the checking of high blood pressure were something foreign to me, I had never heard about that. But I have since realised that the hospital is not meant for the sick only - that even under normal conditions you can still go in so that you can get a thorough check up. I now know that I should often go to the hospital for the checking of high blood pressure and the sugar level.”

[Peri-urban Northern Province, Male]

“You should also check your high blood pressure all the time.”

[Urban, Female]

There was a significant increase in the proportion of respondents who agreed with the statement that “people should ask health workers to check their blood pressure every time they visit a clinic or hospital”.

Agree	Baseline	Evaluation
People should ask health workers to check their blood pressure every time they visit a clinic or hospital	88%	94%

Urban and rural respondents made significant improvements on this question between the two surveys, but the improvements were most marked among urban respondents: 88% of respondents in the baseline agreed with this statement, compared to 95% in the evaluation.

These increases are significantly associated with exposure to Soul City TV, Soul City print material and Soul City multi-media:

Respondents with exposure to low and high Soul City TV were significantly more likely to agree that people should ask health workers to check their blood pressure every time they visit a hospital than respondents without exposure to the series. However, there was no significant dose effect.

People should ask health workers to check their blood pressure every time they visit a hospital.	
	Agree
No TV	91%
No Soul City TV	88%
Low Soul City TV	99%
Medium Soul City TV	93%
High Soul City TV	96%

Soul City print exposure was associated with respondents’ knowledge that they should ask health workers to check their blood pressure every time they visit a clinic. There was a significant dose effect on this question.

People should ask health workers to check their blood pressure every time they visit a clinic	
	Agree
low print access	89%
medium print access	92%
high print access	96%

Soul City print had the most consistent impact on urban respondents. Eighty nine percent of urban respondents with low print exposure agreed with this statement, compared to 92% of those with medium and 97% with high print exposure.

Respondents exposed to more than one component of the Soul City intervention were significantly more likely to agree with the statement than respondents with no exposure to Soul City. There was a difference of 12% between respondents with no exposure to Soul City and those with exposure to 3 sources of Soul City.

People should check their blood pressure every time they visit a clinic	
	Agree
No SC	84%
1 source	95%
2 sources	96%
3 sources	96%

3. Accurate knowledge of high blood pressure - face to face health communication vs Soul City messages:

Personal experience of high blood pressure (measured by asking people whether they have ever been told by a health worker that they had high blood pressure) was taken into account in the analysis of accurate knowledge. Analysis suggests that health workers do not always provide people with comprehensive information about high blood pressure. Respondents with face to face experience with a health worker on the issue of high blood pressure were only more knowledgeable than people without face to face contact on 1) how to take their medication, and 2) that they should have their blood pressure checked when visiting a health facility. Respondents with personal contact with a health worker around high blood pressure were significantly *less informed* about the severity of health consequences associated with high blood pressure when it remains untreated. They were also significantly *less likely* to know that you cannot feel that you have high blood pressure. There was no difference between respondents with personal contact with a health worker and without personal contact on the issue of whether high blood pressure “can become better when treated”. However, respondents who have been told they had high blood pressure, were significantly more likely to know that they must take their medication every day and not stop when they feel better, and that it is important to have your blood pressure measured every time you visit a clinic.

This particular component of the analysis interpreted in conjunction with the increases in accurate knowledge associated with exposure to Soul City, illustrate the role of Soul City in providing more comprehensive information on hypertension than face to face health communication, thus supplementing face to face health communication as far as accurate knowledge around prevention is concerned.

B: PERCEPTION OF RISK:

In the National Survey, two questions were asked to assess whether respondents had a greater perception of risk to themselves or to someone close to them.

There were significant decreases (from baseline to evaluation measurement) in both items measuring perception of risk: for the item *“have you ever worried about getting high blood pressure?”* 53% answered positively in the baseline survey compared with 41% in the evaluation survey. On the item *“have you ever worried about someone close to you getting high blood pressure?”* 59% answered positively in the baseline survey compared with 46% in the evaluation survey. Thus, there is evidence that perception of risk decreased over the intervention period. This decrease observed in the national survey may be related to increased knowledge (reported earlier), as well as positive intention and positive behaviour associated with exposure to Soul City (reported subsequently) – further analysis is required to investigate this hypothesis though.

The same trend (i.e. decrease in perception of risk) was observed in the Sentinel Site Study; none of the Soul City interventions appeared to be directly associated with this change in responses though. As is the case with national survey data, further analysis needs to be conducted to explore a possible secondary association between exposure to Soul City and decreased perception of risk.

Qualitative analysis, however, suggests that Soul City impacted on perception of risk in the sense of raising awareness of high blood pressure as a disease that can affect anyone:

“One thing I liked in Soul City was when they talked about high blood pressure. Before I never thought that it can affect anyone; I thought it's for specific people only, ...”

“That is true I used to think high blood pressure only attacks old people but through Soul City I now know better.”

[Urban, Female]

“And since then [exposure to Soul City] I have learned so many things from it, like diseases and how they can be prevented and what type of food to eat so as to avoid being ill. That is why I say I like this fourth part because to me it was an eye opener. It has shown me that all these diseases that are out there are not necessarily brought by Whites, and they don't affect them solely. I know today that high blood pressure can just about attack anyone, just like AIDS can affect anyone.”

[Urban, Female]

“...and again it [Soul City] taught me about high blood. I knew nothing about it; all along I thought it's a disease for the elderly because my father was suffering from it, such things.”

[Urban, Female]

C: SUPPORT-GIVING BEHAVIOUR:

There is evidence in the Qualitative Impact Assessment that respondents engaged in various forms of support-giving behaviour (such as prompting others to have their blood pressure checked or to change their lifestyle, or supporting them in changing their diet) in relation to exposure to Soul City:

“Why I say it [Soul City] teaches, it's because my uncle was being attacked by a mild stroke, but he was not even been aware of that. He used to walk in a limp, he then went to a doctor and he was told that he has high blood, but he did not take notice of that - he just ignored that ruling. Even when I tried to talk to him he just ignored me, until one day he felt dizzy in the elevator at work and they took him to a doctor and they found that his high blood is about 180. And when he came back and told me what has happened I thought to myself I have contributed also to that because I was cooking with oil and I used to cook with plenty of salt. Then when I watched Soul City where Vusi was talking about foods, I decided to change the way I was cooking because I thought the next time it could be me or any member of my family. Trying to accommodate him we eat the same foods and I cook with low fat margarine and I no longer use salt - I use aromat.”

[Urban, Female Group]

“It was because at home my grandmother was sick all the time and she was always sweating and you would see her feet being swollen all the time, and I saw that she was not taking care of herself. Then I saw an episode on Soul City where they were talking about blood pressure, and because of those symptoms she had I said to her she should go to the clinic and see the doctor. She went in and when she arrived there it was confirmed that she had high blood.”

[Urban, Mixed Sex Group]

“My father was admitted at the hospital on the 1st and he was discharged last Friday. You know, every time he ate he added salt on his food and he was also drinking liquor and eating fatty foods. We said to him why are you doing this you have seen what is happening in Soul City about high blood, he did not take notice of what we are saying.”

I: Was it all because of what you saw in Soul City?

“Yes, and when they checked his blood pressure they found that its very high and his blood was full of alcohol, that has scared him right; now he no longer eats food that has salt in them and he is watching his diet. And again he is no longer drinking.”

[Urban, Mixed Sex Group]

“So I'm saying that many things that I learned on Soul City, on diet of the person who has high blood pressure, so much that even with the children I protest when there's too much salt because I don't want them to be like me. Because when I have this pressure, it becomes foggy, I would see you as small and yet you're so big [laughter]”

[Rural Eastern Cape, Female]

These qualitative findings are not supported quantitatively though. There was a significant decrease in the proportion of respondents who had *suggested that someone else have their blood pressure checked* between the baseline (45%) and evaluation surveys (31%). Among respondents who had suggested that someone else should have their blood pressure checked, 76% said they made this suggestion during the period that Soul City was broadcast. There is no evidence that this may in any way be associated with Soul City.

D: INTENTION

Quantitative evidence from 2 different evaluation studies and 3 different methods of data analysis suggest that there is an association between exposure to Soul City media and increased intention towards safer hypertension behaviour. One of the studies suggests that exposure to Soul City is associated with positive change in intention (Sentinel Site Study), whereas the other study did not indicate *change* in intention, but suggests that exposure to Soul City is associated with maintaining positive intention over the evaluation period (National Survey).

Maintaining positive intention over the evaluation period:

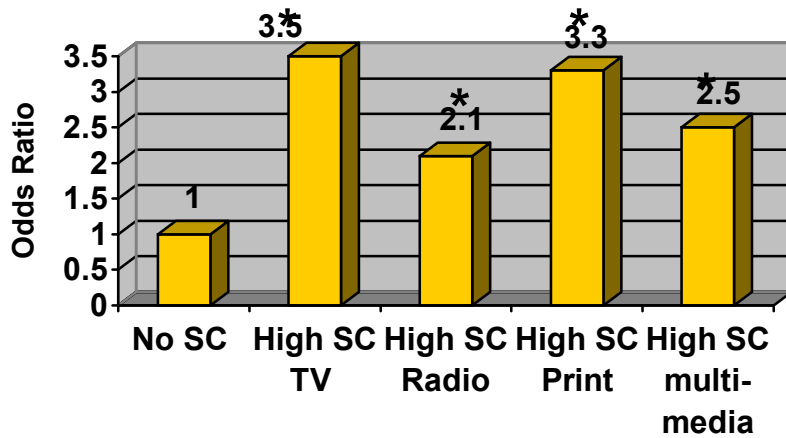
Despite significant decreases from baseline to evaluation measurement in intention to engage in positive behaviour¹⁴, scale analysis¹⁵ suggests a significant association between exposure to Soul City and positive intention as measured in the evaluation survey: low, moderate and high exposure to Soul City TV, Print and multi-media, and moderate and high exposure to Soul City Radio are significantly associated with positive intention. Respondents highly exposed to Soul City TV and Print, were more than 3 times (3.5 and 3.3 times

¹⁴ Willingness to have one's blood pressure checked, and willingness to find out more about hypertension.

¹⁵ Cronbach alpha = .68

respectively) more likely to have positive intentions than respondents with no exposure to Soul City TV and Print.

Likelihood of positive behavioural intention, associated with Soul City exposure

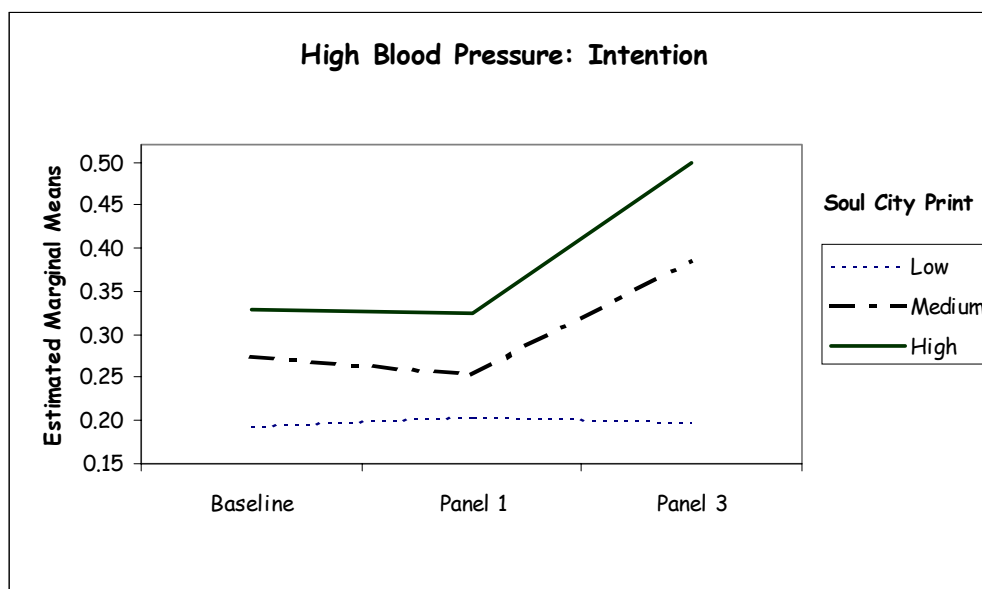


National Survey
 Multivariate Regression Analysis
 of "Hypertension Intention
 Scale"
 Cronbach alpha = .68
 * Significant differences at $p \leq .01$

Positive change in intention towards safer Hypertension behaviour:

Sentinel Site Study analysis suggests that there was a significant improvement in the measure of intention between the baseline and final panel surveys, associated with exposure to Soul City Print material: between the first and final panel surveys respondents who had high or medium levels of access to Soul City print material were significantly more likely to display a

positive change in intention than respondents with low levels of access to Soul City print.



Behavioural intention was measured as follows:

1. Intention to seek more information about hypertension:

In the National Survey, there was a significant *decrease* from baseline (45%) to evaluation (32%) in the proportion of respondents who had thought about trying to find out more about high blood pressure. Among respondents who said they *had* thought about trying to find out more information about high blood pressure, 76% of those said they had done so in the past 6-7 months – i.e. during the period that Soul City was on air. However, there is no evidence that this intention towards information seeking behaviour during the broadcasting of Soul City was in any way associated with Soul City.

Interpreting the decreases observed is difficult – especially against the background of the sampling error described in the methodology section. Further analysis needs to investigate whether this decrease in intended information-seeking behaviour between baseline and evaluation measurement may be related to increased knowledge (which is associated with exposure to Soul City), thus resulting in respondents feeling it is not necessary to seek additional information.

2. Intention to have blood pressure checked:

In the National Survey, there was a significant *decrease* in the proportion of respondents who had thought about having their blood pressure checked between the baseline (56%) and evaluation survey (45%). Once again, interpreting this shift without further analysis is difficult. The decrease may be

related to decreased perception of risk, which may be related to increased knowledge and positive behaviour associated with exposure to Soul City, as mentioned earlier. Further analysis is necessary to investigate this.

Among respondents who *had* thought about having their blood pressure checked, 84% had thought about having their blood pressure checked during the period that Soul City was on air. Exposure to the Soul City radio series is significantly associated with whether respondents had considered having their blood pressure checked during this period. Respondents exposed to the radio series were more likely to have considered having their blood pressure checked than radio listeners who did not hear the series. There was no significant dose effect. There was a difference of 10% between respondents with no exposure to Soul City radio, and respondents with low exposure to Soul City radio.

Have you thought about having your blood pressure checked in the past 6-7 months?	
	Yes
No radio	88%
No Soul City radio	75%
Low Soul City radio	85%
Medium Soul City radio	91%
High Soul City radio	88%

3. Intention to behave in a more health-conscious way:

Intention to make lifestyle changes was not measured quantitatively.

The following quotation (National Qualitative Impact Assessment) illustrates intention to make lifestyle changes prompted by exposure to Soul City:

“It happened to me in a certain episode that I have seen in Soul City. All along I thought that I was healthy but when I watched Soul City and in it they were talking about food and exercise I saw that I was not eating the food that they were talking about, and at the same time I never bothered myself with exercises. And when they said by not eating the right foods you will end up with high blood pressure that convinced me to do something. Because I never followed that idea I was very grateful with Soul City because they made me to be on the look out about my health.”

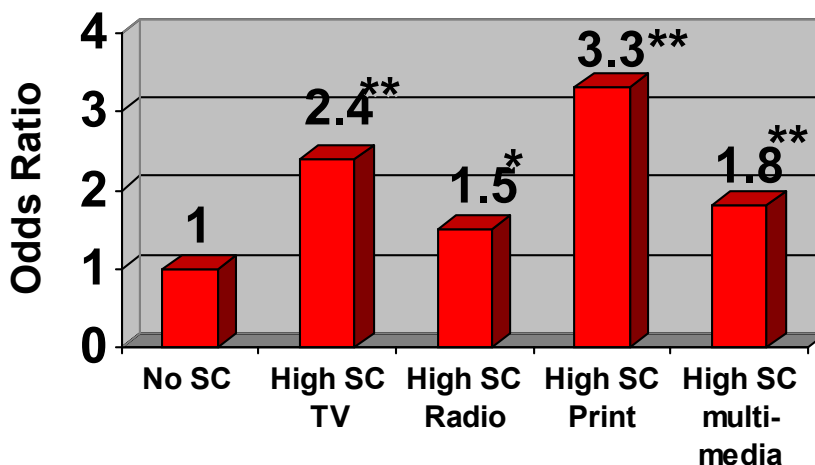
[Urban, Mixed Sex Group]

E: ACTUAL PRACTICE

The nature of evidence on the association between exposure to Soul City and actual practice is similar than for positive intention discussed earlier: national survey results suggest an association between exposure to Soul City and maintaining positive behaviour over the broadcast period. Sentinel site results suggest an association between exposure to Soul City and improvement in behaviour over the evaluation period.

Scale analysis¹⁶ suggests that exposure to Soul City is associated with increased likelihood of positive behaviour¹⁷ in the evaluation survey: low, moderate and high exposure to Soul City TV and Print material, and moderate and high exposure to Soul City Radio and multi-media, are significantly associated with increased likelihood of maintaining positive behaviour. Respondents with high exposure to Soul City TV were more than twice as likely to maintain positive behaviour than respondents with no exposure to Soul City TV, whereas respondents with high exposure to Soul City Print were more than 3 times as likely to maintain positive behaviour as respondents with no exposure to Soul City Print material.

Likelihood of engaging in positive behaviour, associated with Soul City exposure

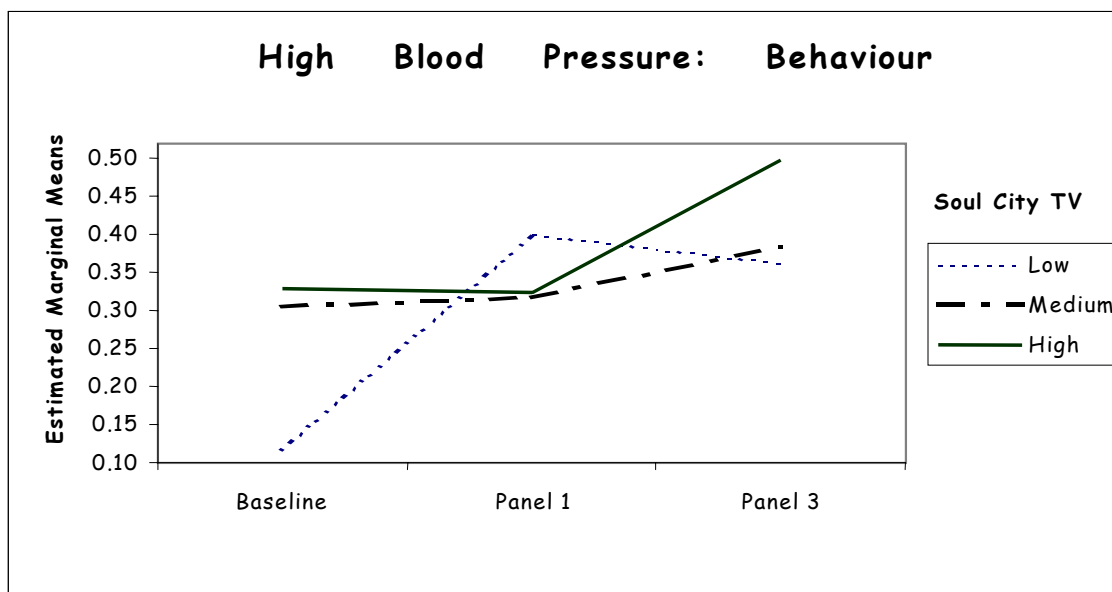


National Survey
Multivariate Regression Analysis of
"Hypertension Behaviour Scale"
Cronbach alpha = .78
Significant differences at $p \leq .01^{**}$ and
 $p \leq .05^{*}$

¹⁶ Cronbach alpha = .78

¹⁷ Having one's blood pressure checked, adopting a healthier lifestyle by changing one's diet, exercising more, consuming less alcohol and smoking less, as well as suggesting that someone else should have their blood pressure checked.

Sentinel Site Study analysis suggests a significant improvement in behaviour between the baseline and final panel surveys - limited to respondents in the Gauteng site though. Paradoxically, Gauteng respondents with a low level of access to Soul City television were most likely to demonstrate an improvement in their behaviour, particularly between the baseline and the first panel survey, while respondents with medium and high levels of access did not significantly change their responses. (The inconsistent dose-effect observed here must be interpreted against the background of factors discussed on p. 10.)



Actual behaviour was measured as follows:

1. “Checking your blood pressure”:

“One thing I liked in Soul City was when they talked about high blood pressure. Before I never thought that it can affect anyone I thought it's for specific people only, but now whenever I go to the doctor I go in for a blood pressure check up as well. And I have learned to eat the right type of food and eat less fat.”

[Urban, Female]

There was a significant decrease in the proportion of respondents who had their blood pressure checked between the baseline (55%) and evaluation survey (46%).

Among respondents who *had* checked their blood pressure, 79% had checked it in the period that Soul City was on air, and this is associated with exposure to Soul City TV, Soul City print material, and Soul City multi-media exposure.

Respondents who had medium or high exposure to Soul City TV were significantly more likely to have had their blood pressure checked in the period that Soul City was on air than respondents with low or no access to

Soul City TV. There was a difference of 24% between respondents with no exposure to Soul City TV and respondents with high exposure to Soul City TV.

Have you had your blood pressure checked in the past 6-7 months?	
	Yes
No TV	80%
No Soul City TV	63%
Low Soul City TV	70%
Medium Soul City TV	83%
High Soul City TV	87%

Exposure to Soul City print materials is significantly associated with whether respondents had checked their blood pressure in the period that Soul City was on air. Respondents exposed to medium and high print exposure were significantly more likely than those with low print exposure to have had their blood pressure checked.

Have you had your blood pressure checked in the past 6-7 months?	
	Yes
low print access	75%
medium print access	82%
high print access	89%

Respondents exposed to more than one component of the Soul City intervention were significantly more likely to say they had their blood pressure checked while Soul City was on air. There was a significant dose effect on this question among those exposed to more than one component of the intervention.

Have you had your blood pressure checked in the past 6-7 months?	
	Yes
No SC	70%
1 source	73%
2 sources	82%
3 sources	89%

Soul City's role in prompting respondents to have their blood pressure checked emerged as a theme in the qualitative analysis, illustrated by the following quotations:

"It's true that one has to go for a check up to see if you are ill or not. Before I saw Soul City I never even thought of going for a check up, but then one-day there was this episode of Vusi who had high blood pressure. That really frightened me because I never even thought about such a disease and I thought to myself what is going to happen to me if I have it, I mean I did not even know what causes it and what are the after effects of such a disease. But then because Soul City talked about it I decided to go for a check up and when I arrived at the doctors offices they really did a thorough check and they found that I have it, but I am not afraid any more because I know what to do."

[Peri-urban Northern Province, Male]

"Another thing they encouraged us to do is to check high blood pressure as well, I never used to do that until I was advised by Soul City."

[Urban, Mixed Sex Group]

2. Changes in lifestyle:

A number of items measured changes in lifestyle related to high blood pressure:

- lowering blood pressure through changing what you eat
- lowering blood pressure by smoking less
- lowering blood pressure by drinking less
- lowering blood pressure by doing more exercise

Each of these questions was followed by clarification around whether any of these changes occurred during the Soul City broadcast period.

The trend across all these items is similar: comparisons between baseline and evaluation responses are characterised by significant *decreases* in affirmative responses. Where respondents replied positively (i.e. where they did indicate attempts at changing their lifestyle to decrease high blood pressure), most of the people (on average across all 4 items approximately 70% of respondents) indicated that they tried to change their lifestyles during the period that Soul City was on air. The association between exposure to Soul City and this particular behaviour could not be analysed further due to technical difficulties in analysis (i.e. small number of responses).

There is, however, qualitative evidence linking exposure to Soul City with changes in lifestyle:

"To me it [Soul City] has made a difference because I also have high blood pressure, as a person who liked fried things, when I heard that we should not eat them, now I eat things that are boiled, things that are cooked with water."

[Rural Eastern Cape, Female]

"Then one day while watching Soul City I saw this episode about high blood pressure, that person was just like me I did not take care of myself. I then went to

the doctor as well and after being checked he told me that I am not taking good care of myself, I should start eating good healthy food and I should do something about my drinking. I did that and in that process I decided to walk when I go to work like that uncle in Soul City, and since I have started walking my body is not longer filled with pains like before. I am pain free right now.”

[Peri-urban Northern Province, Male]

“I was really ignorant; I used to eat lots of salt and at the same time I am fat - but now I have changed I am no longer like before.”

[Urban, Female]

“Yes I have seen that to be healthy is to eat the right foods so I have learned to watch my diet and I no longer drink like I used to and I know that if I continue with that I will be all right.”

[Urban, Mixed Sex Group]

“It [Soul City] has taught us, you know, at work on Fridays we eat fried chips, but I avoid. I don't eat them, and when my colleagues eat them they will always say, by the way, Soul City is always reminding us of salt. And they will joke that if you keep on eating raw salt you will be like Vusi. So you see Soul City is really teaching us about our eating habits. (laughter). Even if I have cooked and I find that salt is not enough I don't bother with adding on top, I just eat my food like that, because I don't want to have high blood.”

[Urban, Female]

“And I have learned to eat the right type of food and eat less fat.”

[Urban, Female]

HYPERTENSION – CONCLUSION:

Other than the increases in knowledge mentioned earlier, the rest of the national survey analysis predominantly suggests significant decreases in patterns between baseline and evaluation survey responses: analysis shows significant decreases in perception of risk, decreases in information-seeking behaviour and in support-giving behaviour, decrease in intention and decrease in desirable actual practice from baseline to evaluation in the overall sample.

Correctly interpreting these shifts is complex, and in most cases further analysis is needed to investigate hypotheses. Some of the observed shifts are counter-intuitive in the sense that one would expect the measurement to have remained relatively stable in the general population over a 9-month period¹⁸. These counter-intuitive decreases may be related to survey error (i.e.

¹⁸ E.g. the healthy lifestyle items; at face value, the analysis indicates that the general population live a significantly less healthy life with reference to smoking habits, drinking etc. nine months after the baseline measurement.

significant differences between the baseline and evaluation samples mentioned under *limitations of the study*¹⁹).

This survey error makes interpretation of research results difficult. Where negative shifts are not counter-intuitive, the absence of observable positive shifts on certain constructs (i.e. perception of risk, intention, information-seeking behaviour and actual behaviour) in the general sample does not immediately indicate communication “failure” on the part of Soul City 4, since one would expect certain shifts (other than knowledge) to be more easily observable amongst the more-at-risk sub-samples of the population. It is difficult to refine the Soul City 4 evaluation analysis to isolate the more at-risk sub-sample (beyond the age-factor²⁰) in the absence of more detailed information on the general health status of respondents. Further analysis is limited to exploring secondary associations with exposure to Soul City, as indicated in the report.

The decrease in perception of risk and information seeking behaviour, may (partially) be related to the significant, measurable increases in accurate knowledge associated with exposure to Soul City, as well as to the increased likelihood of positive intention and actual positive behaviour associated with exposure to Soul City. This needs to be explored in further analysis.

Despite this ambiguity in interpreting some of the results, there is evidence that Soul City significantly contributed to increasing accurate knowledge about high blood pressure – amongst the general sample. Comparative analysis of responses from people who did, and people who did *not* have contact with a health worker around high blood pressure, illustrates the role of Soul City in supplementing face-to-face health communication as far as accurate knowledge around prevention is concerned.

Furthermore, analysis of sentinel site data also suggests that exposure to Soul City is associated with positive change in intention and change in actual behaviour, whereas analysis of national survey data suggest that exposure to Soul City is associated with maintaining positive intention and maintaining actual behaviour. Thus, despite decreases in positive observations from baseline to evaluation measurement generally observed in the national survey data, desired / positive intention and actual behaviour was significantly

¹⁹ The evaluation sample was significantly less employed, and had less regular general use of media, which can possibly account for the counter-intuitive decreases observed between baseline and evaluation measurement. These observed differences between the two samples do not skew the analysis in favour of Soul City though – rather, where positive shifts are observed, they are likely to have been more pronounced had the sample been totally comparable. In other words, the observed differences between the baseline and evaluation samples would result in under-interpretation of Soul City impact when looking at baseline to evaluation shifts. These differences have been controlled for in the regression analysis, and therefore do not reflect on the associations reported.

²⁰ Analysis suggests that age is a significant factor in determining responses to hypertension knowledge, intention and behaviour items: respondents in the age group 25 – 35 were significantly more likely to have positive intentions and to engage in positive behaviour, whereas respondents older than 35 were significantly less likely to have accurate knowledge of hypertension, or to have positive intentions and engage in positive behaviour.

associated with exposure to Soul City where respondents *did* display positive / desired intention and behaviour.

In the qualitative research, respondents expressed their general appreciation of the role of Soul City in the area of High Blood Pressure in the following terms:

"I for one, Soul City has changed my life, and again it has helped a lot of people who are suffering from high blood pressure."

[Urban, Mixed Sex Group]

"I also found the High Blood Pressure story very helpful."

[Urban, Male]

In short, integrated data analysis suggests that Soul City 4 is associated with increasing accurate knowledge about high blood pressure, with positive change in intention and actual behaviour (as observed in the Sentinel Site Study), and with maintaining positive intention and actual behaviour (as observed in the national survey).

B: SMALL BUSINESS DEVELOPMENT AND PERSONAL FINANCE

School leaving youth face a lack of formal job opportunities and insufficient resources to further their education or gain the skills to improve their chances in the formal job market. The ramifications of this are often unemployment and potentially turning to less desirable options to earn income.

The reality is that for many people, starting their own business is the only option for survival. However, most people will struggle to get financial help from a bank, whereas money lenders charge exorbitant interest rates. For many, applying to an NGO which specializes in micro loans for small business is the only viable option.

Against this background, Soul City 4 dealt with the following issues:

- What are the issues related to eligibility for credit from a micro lending institution?
- What is a business plan?
- How can a potential borrower enhance their chances of a loan?

Specific messages were:

- Saving can help you achieve your dreams
- A good savings record can help you get a loan to open a small business
- There are micro lending institutions that can help people with lower incomes access credit to start a small business
- You need to have a business plan
- Get a mentor to help you through the process

Furthermore, Soul City 4 encouraged young girls to develop their own identities and aspirations and to see themselves as their own ticket to a better life. Personal savings and establishing a small business are means to become self-reliant and independent. It is a way of overcoming relationship inequality – a key barrier to a woman’s ability to leave an abusive relationship.²¹

EVALUATION RESULTS²²

A: KNOWLEDGE AND AWARENESS:

Research results suggest that some Soul City messages were more successful than others. Most of the findings are based on qualitative analysis: qualitative data suggest that Soul City succeeded in making people aware of the option of starting a small business in the face of unemployment and financial difficulty. Soul City further seems to counteract gender stereotyping in business, and in raising awareness around the benefit of saving and budgeting.

1. Starting a small business as a way of dealing with unemployment or financial difficulty:

A recurring theme in the qualitative data is that Soul City succeeded in raising awareness around self-employment as an option in dealing with financial difficulty or unemployment:

“Soul City has helped us, there is a lot that we have learnt from Soul City, like helping yourself, when you have children and you don’t work, you can open your own business and work for yourself and not look to someone else.”

[Rural KZN]

“And [I learnt from Soul City] on job opportunities, you shouldn’t wait for a company to employ, there is something you can do with your hands. Because really, everyone has his/her talent - let’s say one has this one, one has one for fixing cars, but because we are waiting to be employed by a certain company, we don’t use our talents. So you should also look for your business and try for yourself, at least you will get somewhere in life.”

[Urban KZN]

²¹ Soul City 4 message brief

²² All quantitative results presented are based on the national survey results, unless otherwise stated. Where quantitative data from the sentinel site studies are presented, it will be clearly indicated in the report. Unless otherwise stated, all associations with Soul City media reported throughout the report are significant at $p \leq 0.05$. All quotations are from the national qualitative impact assessment. Quotations are not reported unless they illustrate or represent a theme emerging from systematic, thematic analysis of interviews.

“We did not even think of starting a business [before watching Soul City]”
[Urban Gauteng]

“Soul City has influenced me a lot by showing me that it's possible to start a business for yourself even though it's not that easy.”
[Rural North West]

“With me Soul City four has taught me about job opportunities, like it taught me that I should not think on terms of saying there is no job, or I will go and look for a job somewhere. What I should do is to create my own job like sell something in the streets, or if I can work with my hands I could start a business of building house for people.”
[Rural Northern Province]

“And Soul City has also helped us in that we don't suffer and go looking for work even if it's not there, you can be able start your own business at home and get some money, we got all that from Soul City, be able to live in your own way without asking for help from someone.”
[Rural KZN]

2. Women can succeed in business – it is not a man's domain:

Soul City's portrayal of the small business development theme effectively communicated gender equality to the audience:

“And again that there are jobs that women cannot do, like I never thought a woman can be a mechanic, yet we can all think we are all capable of doing anything we want.”
[Urban Gauteng]

“One other thing I like in that part was when they showed us Dinana opening her business, and what they did is to show us that it does not mean you have to be a man to do that kind of job. And that being a woman you can also open your business you can even go and ask for a loan if you want to.”
[Urban Gauteng]

3. You can get financial assistance from institutions when you start a small business:

Qualitative data suggest a degree of ambivalence amongst audience members regarding Soul City's effectiveness in preparing them to successfully approach institutions for financial assistance. Some feel that Soul City has provided valuable information in securing financial assistance:

“That is true, you know most of the time we Blacks do not have an idea on what to do when we want to open a business. So what Soul City has done is to show us that you don't need lots of money to open a flourishing business, and another thing is that if you want to open a business and you don't have money there are organizations that can give you money and they even train as well

so that you don't run your business down. Those are things we did not know before."

[Urban Gauteng]

"On the business side I know that they [Soul City] have helped to show us that if you want to get a loan you must have a clean record, and they monitor you on that money and they tell you how much to pay at the end of the month. And what to do when you have sufficient profit, which then enables you to feed your family."

[Urban Gauteng]

Whereas others feel that in reality, more is demanded from them when approaching institutions than what Soul City prepared them for:

"But then if you go to the bank and ask for a loan they ask you where is your book-keeper, so how can you ran a business without knowing how to manage that money?"

[Urban Gauteng]

"Because when you to do something in business more especially you have to go to the financial institution. And when you get there they will want security and at the same time check if you are black listed or not, so what I am saying is that Soul City did not mention any of those things all what they did was just to say one can open her/his business without showing people what that does entail, that is why I say it did not influence me that much."

[Rural North West]

Quantitative analysis also seems to reflect some degree of ambivalence on the issue of getting financial assistance from institutions. There were significant differences between the baseline and evaluation surveys on the question of whether respondents knew that they could get financial assistance from institutions when starting a small business, instead of relying on their own financial resources only. However, these differences were not in a direction that suggests that the Soul City message around accessing financial assistance made any positive impact on respondents' knowledge:

People who want to start a small business cannot get money from institutions			
	Agree	Don't know	Disagree
Baseline	52%	18%	30%
Evaluation	59%	14%	28%

A higher proportion of respondents in the evaluation survey 'agreed' (i.e. gave the incorrect answer), compared to the baseline survey. There were significantly fewer respondents answering 'don't know' in the evaluation survey than in the baseline survey. In the general sample, there was no difference in the proportion of respondents who 'disagreed' with the statement (i.e. gave the correct answer), between the two surveys. However, there was a significant difference between the proportion of urban respondents who

disagreed in the baseline (31%) and evaluation (23%) – signifying a negative shift.

It is interesting to note that respondents with previous experience in running a small business were significantly more likely to incorrectly agree with this statement than respondents with no experience of small business. This possibly indicates that previously they may have been unsuccessful in accessing financial assistance from institutions.

Thus, the negative shifts observed may be related to the fact that in reality, it remains difficult for people who want to start a small business to access institutional financial support, and the Soul City message did not impact on this “common knowledge”.

4. Saving and spending:

Respondents in the qualitative impact assessment repeatedly credited Soul City with helping or teaching them to save money, or to budget better:

“I can say that it [change as a result of Soul City] has happened because I didn't know how to save money but I have seen that money is a necessity, as I have a child, the child needs enough schooling, s/he needs education, and in today's time, as things are expensive, you can do that [save money] so children can go to school.”

[Rural KZN]

“So Soul City has taught us much about a budget, it teaches you how to allocate money to specific needs and when to spend it.”

[Urban Gauteng]

“Soul City has done so much for me By teaching how to budget, today I have money that I am able to live a good life with my family. I am not saying I am rich but I have enough money that enables me to give everything to my family that they want.”

[Urban Gauteng]

B: SELF-EFFICACY

A recurring theme in the qualitative analysis (especially in rural settings), is the fact that respondents saw running their own small business as a means of gaining self-sufficiency and independence – often articulated in the context of oppressive gender power relations, or oppressive race relations.

Gender Power Relations:

“That thing [Soul City] teaches us that when we are women, we should not only look to our men to give us money, we should try to also do it for ourselves, ways of getting of money, certain businesses, because you will maybe persevere when your child is abused by his/her father and refuse to report him because you think that you will have nothing to eat. But if as woman, as women you live on your own, you wouldn't hide the dirty thing he's doing at home.”

[Rural Eastern Cape]

“And it [Soul City] realises that maybe people don't know that - for example maybe others didn't even know that that woman can live on her own, she can be able to start a small business, and end up big. Maybe other people didn't realise that if I can slip from the place I'm holding on, like the way she lived with that man, maybe I could fall. You see, it teaches that you can't fall because as Soul City, I have gone around and saw that I can show you that you can't fall. Through listening to people you can see that you can start your own way of living.”

[Rural Eastern Cape]

“What they are trying to teach us in Soul City is that as women we must not sit down and do nothing, we need to stand up for ourselves so that we can provide for ourselves. And again we must learn to work together as women of that community and be able to improve our lives. We can open small businesses and operate right where we stay as long as we work together we can do it. Working together is very important. That is what we call "intuthuko" building yourselves.”

[Rural KZN]

Race Relations:

“And again Soul City has shown us that we can stand on our own, people have this tendency of wanting to be a “yes baas” person. We believe that if we have to work we must be in a 9 to 5 situation working for a White person. Why don't you become your own boss and depend on our own resources? We could do it.”

[Urban Gauteng]

“And you at home can make more than that if you work for yourself. This [Soul City] encourages us to stop going to town to look for work and always coming back saying there is no work. We ourselves have to create our own jobs, be our own bosses and stop working for Whites and helping them to get rich.”

[Urban Gauteng]

C: INTENTION

An assessment of Soul City's impact on change in positive intention is impossible given the research design restriction mentioned under *Limitations of the study*. An unreliable scale further complicates interpretation of results.

Although there may be a suggestion of an association between exposure to Soul City and maintaining positive intention around saving money and/or starting a small business, the quantitative evidence is not convincing.

Respondents were asked whether they had thought about saving money and about starting a small business. A negative shift in the National Survey was observed on the first item:

Have you ever thought about saving money?	Yes
Baseline	67%
Evaluation	51%

There was a significant decrease in the proportion of respondents who had thought about saving money in the evaluation survey (51%) than baseline survey (67%). A decrease was observed amongst both urban and rural respondents: 73% of urban respondents in the baseline had thought about saving money, compared to 54% in the evaluation. Sixty two percent of rural respondents in the baseline survey had thought about saving money, compared to 48% in the evaluation survey.

Similarly, a decrease (though not statistically significant) was observed on the second item (thinking about starting a small business).

The systematic differences between the baseline and evaluation samples mentioned earlier in this report (refer to *limitations of the study*) need to be taken into account in interpreting these shifts: the evaluation sample consisted of a significantly higher proportion of unemployed respondents which almost certainly accounts for the decrease in intention to save money.

Multivariate Regression Analysis (controlling for the differences between the two samples) suggests that high exposure to Soul City multi-media and high exposure to Soul City print material are significantly associated with positive intention²³ (based on scale analysis²⁴). Respondents with high Soul City multi-media exposure were 1.7 times as likely to have thought about saving money or starting a business than individuals with no exposure. The reliability coefficient on this scale is low, and this association across both items need to be interpreted with caution.

²³ Intention to save money and to start a small business.

²⁴ Cronbach alpha = .4

There is however qualitative evidence of Soul City's contribution to positive intention to start a small business:

“What I can say is that when I was not employed I learned from Soul City that I don't have to say there is no job, it made me to do something about that. And again I did not end there I looked to the future and saw my company growing: with me, I am a community worker; the last time we had an organisation that does the duties of the community, but then after sometime that lapsed. I then started to think of doing some small business for myself.”

[Rural North West]

Similarly, qualitative analysis supports Soul City's role in promoting a culture of saving:

“Another thing I learned from it is that I must try to save every little bit that I have even if I don't have a job, and maybe one day I can find a small shop and get a personal loan which will enable me to do a small business. At least it teaches you to be responsible not that you have to drink money when you have it.”

[Urban, Gauteng]

D: INTERMEDIATE PRACTISE – SUPPORT-SEEKING BEHAVIOUR

Quantitative analysis suggests an association between exposure to Soul City and seeking advice about saving over the evaluation period:

1. Have you ever got advice about saving money?

There was a decrease in the proportion of respondents who had got advice about saving money from the evaluation (24%) to baseline survey (36%). Among respondents who had received advice about saving money, 62% said they had received money in the past 6-7 months (i.e. while Soul City was on air).

Exposure to Soul City radio and multi-media is associated with whether respondents received advice on saving money during the time that Soul City was on air:

Respondents exposed to medium Soul City radio (76%) were significantly more likely to say they had got advice about saving money in the past 6-7 months than respondents with low (68%), high (62%) or no exposure (51%). There was no consistent dose effect operating on this question.

Exposure to three components of the Soul City intervention is associated with whether respondents had got advice about saving money in the past 6-7

months. Respondents exposed to three sources of the Soul City intervention were significantly more likely to have got advice in the past 6-7 months than respondents exposed to one or two components of the intervention. A dose effect appeared to be operating. There was a difference of 21% between respondents with no exposure to Soul City and those with exposure to 3 sources of Soul City.

Have you got advice about saving in the last 6-7 months?		
	Yes	No
No SC	51%	49%
1 source	53%	48%
2 sources	67%	33%
3 sources	72%	28%

Women exposed to two or three sources of the Soul City intervention were significantly more likely to say they had got advice about saving money in the past 6-7 months than women exposed to just one component of the intervention.

Have you got advice about saving in the last 6-7 months?		
Female	Yes	No
No SC	58%	43%
1 source	45%	55%
2 sources	67%	33%
3 sources	70%	30%

E: ACTUAL PRACTICE

Quantitative analysis suggests that there is an association between exposure to Soul City and maintaining positive practice (National Survey) as well as positive behaviour change (Sentinel Site Survey) – particularly around saving money.

Behaviour was measured in the national survey using the following items:

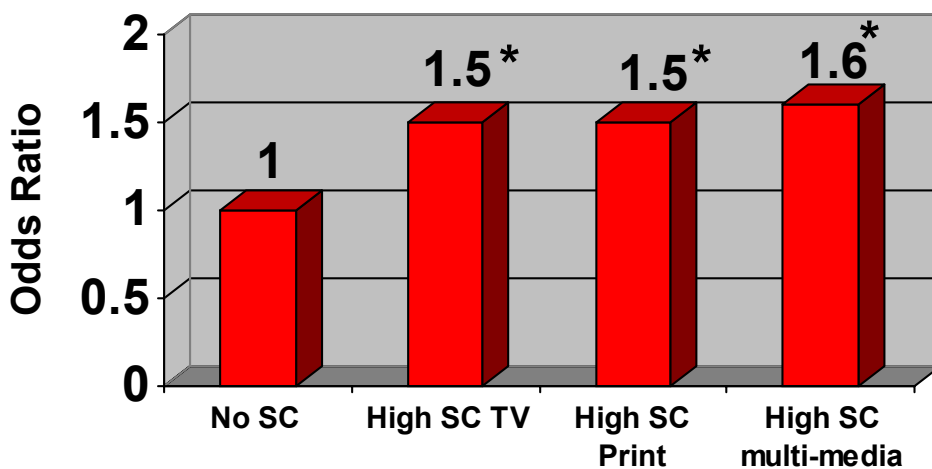
- Have you ever tried to save money?
- Have you ever managed to save money?
- Have you ever worked out a budget?
- Have you ever worked out a business plan?
- Do you or anyone in your family have a small business at present?

As a rule, significant decreases from baseline to evaluation were observed. Exposure to Soul City was nevertheless significantly associated with positive behaviour (scale analysis²⁵) amongst respondents (evaluation survey): moderate and high exposure to Soul City print material, and high exposure to

²⁵ Cronbach alpha = .69

Soul City TV and multi-media were associated with positive behaviour in the evaluation sample. Respondents with exposure to Soul City TV, Print and multi-media were 1.5 –1.6 times as likely to engage in positive behaviour as respondents with no exposure to Soul City.

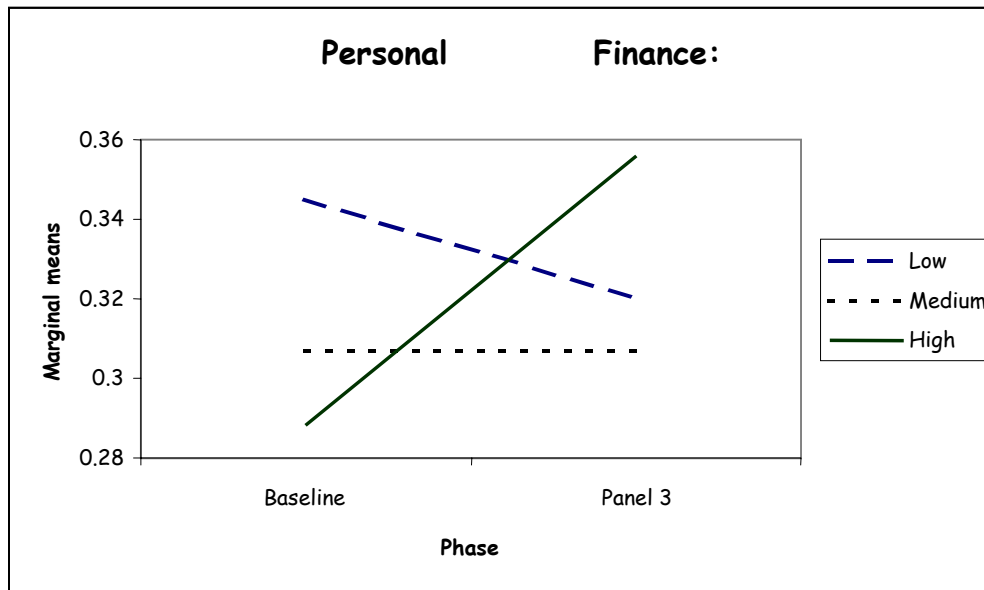
Likelihood of engaging in positive behaviour, associated with Soul City exposure



National Survey
Multivariate Regression Analysis of
“Small Bus & Savings Behaviour
Scale”
Cronbach alpha = .69
* Significant differences at $p \leq .05$

An association between Soul City and behaviour change was observed in the Sentinel Site Study: respondents who accessed high levels of Soul City television significantly improved their behaviour in respect of personal finance

while respondents with a medium or low level of access to Soul City television did not exhibit any significant changes.



Where respondents answered positively to the first 4 behaviour items, they were asked whether they had engaged in the behaviour during the time that Soul City was on air. Single-item analysis (national survey) further suggests an association between exposure to Soul City and attempts to save money during the period that Soul City was on air amongst men and amongst urban respondents:

1. Have you tried to save money in the past 6-7 months?

Among respondents who had tried to save money 69% had tried to save money within the past 6-7 months. Exposure to Soul City TV appeared to be associated with men trying to save money in the past 6-7 months. Men with high Soul City TV exposure were more likely to have tried to save money than men with low, medium or no exposure to the TV series. There was a difference of 25% between men with no exposure to Soul City TV and men with high exposure to Soul City TV.

Have you tried to save money in the past 6-7 months?			
		Yes	No
Male	No TV	91%	9%
	No Soul City TV	57%	43%
	Low Soul City TV	69%	32%
	Medium Soul City TV	69%	31%
	High Soul City TV	82%	18%

Urban respondents exposed to high Soul City TV were significantly more likely to say they had tried to save money in the past 6-7 months than respondents with lower or no exposure to the TV series. There was no consistent dose effect operating on this question.

Have you tried to save money in the last 6-7 months?		
Urban	Yes	No
No TV	52%	48%
No Soul City TV	61%	39%
Low Soul City TV	73%	27%
Medium Soul City TV	68%	32%
High Soul City TV	78%	22%

Neither Soul City radio nor Soul City print materials appear to have had any significant association with respondents trying to save money in the past 6-7 months.

Exposure to more than one component of the Soul City intervention appeared to be associated with whether respondents had tried to save money in the past 6-7 months. However, the pattern of responses was not consistent. Respondents exposed to three sources of the intervention were significantly more likely to say they had tried to save money in the past 6-7 months than those exposed to two sources.

Have you tried to save money in the past 6-7 months?		
	Yes	No
No SC	52%	48%
1 source	71%	29%
2 sources	68%	32%
3 sources	74%	26%

Respondents described Soul City's influence on helping them to save or to open a small business as follows:

"It [Soul City] helped me to be able to save money... It just happened, just by doing it, it just happen, I saw it better that I should."

[Rural KZN]

"It did change my life because before Soul City I used to sit around and do nothing, the only thing that I did was to go around asking for money from my family and not think about doing anything for myself. I was always asking my mother to buy clothes for me all the time. But then one day I decided to do something about that, I then opened a small business shop like that of selling in the streets, and that was due to what Soul City taught me, and after that I was independent - I never asked from people again."

[Rural Northern Province]

SMALL BUSINESS DEVELOPMENT AND PERSONAL FINANCE - CONCLUSION:

Interpretation of the national survey baseline to evaluation results on “Small Business Development and Personal Finance” presented here, must take the limitations in the national survey evaluation design into account (i.e. the fact that the surveys were conducted on different samples, that were not comparable as far as employment status was concerned). As mentioned earlier, the systematic differences between the baseline and evaluation samples²⁶ almost certainly account for the general trend observed – i.e. decreases in observed measurement from baseline to evaluation. Where these limitations do not exist, or have been taken into account (i.e. in the Sentinel Site Study and in investigating the association between Soul City and behaviour during the evaluation period), a fairly positive picture around the association between Soul City and positive behaviour in relation to personal finance emerged:

In the Sentinel Site Study, exposure to Soul City TV seem to be associated with positive behaviour change (around saving, budgeting and starting a small business). In the national survey, exposure to Soul City TV and multi-media seem to be associated with respondents’ trying to save money over the period that Soul City was on air. Exposure to Soul City radio and multi-media seemed to be significantly associated with support-seeking behaviour (around saving money) during the time that Soul City was on air.

Other than relying on qualitative data, there is no clear indication that Soul City is associated with increase in knowledge and awareness or positive intention in this area. Qualitative analysis do however suggest that Soul City succeeded in making people aware of the option of starting a small business in the face of unemployment and financial difficulty. Soul City further seemed to succeed in counteracting gender stereotyping in business, and in raising awareness around the benefit of saving and budgeting. Qualitative data further suggested that people saw starting a small business as an effective way of becoming self-sufficient and independent, thereby escaping oppressive gender power relations, or oppressive race relations.

In the area of Hypertension and Small Business Development, Soul City 4 primarily aimed at impacting on individual knowledge and awareness, intention and actual behaviour. The evaluation suggests that, with some exceptions as detailed in this summary report, the Soul City Institute for Health and Development Communication largely reached these particular objectives, and (in so far as it set out to do so in the fourth series of Soul City)

²⁶ the evaluation sample consisted of a significantly higher proportion of unemployed respondents

fulfilled its aim as an effective health communication vehicle on the two topics reported on in this summary report.

¹ Soul City 4 evaluation studies include 1) “An Evaluation of Soul City 4” by the Community Agency for Social Enquiry (CASE), T. Samuels, J. Mollentz, R. Olusanya, M. Claassens, S. Braehmenr and Z. Kimmie. 2) Additional analysis of National Survey Data by Dhaval S Patel, Department of Communication, Michigan State University. 3) “Impact Evaluation of Soul City in partnership with the NNVAW”, by Women’s Health Project, Nicola Christofides. 4) “Soul City Series 4 Evaluation – Sentinel Site Study”, data collection and data processing by Social Surveys, Katharine Hall and Karen Daniels, analysis by CASE, Zaid Kimmie . 5) “Soul City Series 4 - Qualitative Impact Assessment”, data collection and data processing by Social Surveys, Katharine Hall and Karen Daniels, analysis by Esca Scheepers, Karen Daniels and Katharine Hall. 6) The cost effectiveness of Soul City entertainment education initiative in preventing HIV and Violence Against Women, by the Centre for Health Policy, Debbie Muirhead and London School of Hygiene and Tropical Medicine, Lilani Kumaranayake and Charlotte Watts 7) Social and Behavioural Change Model Building, based on survey data by Research International, Martin Bothma, is underway. 8) “Impact of the Soul City / NNVAW partnership on Policy Implementation at a Provincial Government level” by Strategy and Tactics, Matthew J. Smith, subsumed under the Partnership Evaluation Study. 9) “Data Base of organizations / institutions reached” by Strategy and Tactics, Matthew J. Smith. 10) Media monitoring and analysis, subsumed under the Partnership Evaluation Study, coding co-ordinated by Mweru Mwingi and Irene Muriuki, Rhodes University and data processing by Janey See (independent contractor). 11) Interviews with Journalists for the Partnership Evaluation Study by Khosi Xaba. The evaluation was managed by an independent contractor, Esca Scheepers.

APPENDIX A

Executive Summary – Integrated Evaluation Report

The Soul City Institute for Health and Development Communication is a South African non-governmental organisation which uses the power of mass media for social change. Soul City's approach to health communication is informed by the Soul City model of social change²⁷ which is an eclectic integration of existing models of social and behaviour change – such as Social Learning Theory, the Theory of Reasoned Action, the Johns Hopkins Steps to Behaviour Change model, Social Network Theory, the Diffusion of Innovation Model, the Stages of Change Model, and the BASNEF Model. Soul City further bases its intervention on the Ottawa Charter of Health Promotion, and maintains a human rights focus.

Health promotion theory and social / behaviour change theory emphasize the importance of impacting on factors primarily outside of individual control in addition to impacting on determinants of health within individual control in order to have a positive impact on health and social outcomes. The Soul City 4 intervention set out to impact positively on health and social outcomes by addressing the broader social and community environment (e.g. policy implementation, public debate as reflected in the media nationally, community action and collective efficacy, community norms and access to services) and the immediate interpersonal environment (e.g. social norms and peer pressure, support-giving behaviour, as well as interpersonal dialogue and debate) in addition to impacting on individual determinants of health (e.g. knowledge and awareness, personal attitudes, self-efficacy, perception of risk, support-seeking behaviour and intention to change) in the behaviour change process.

The Soul City 4 core multi-media edutainment vehicle comprised of a 13 part prime time television drama, a 45 part radio drama in 9 languages and three full-colour information booklets - one million of each were distributed nationally. The vehicle dealt with the following topics: violence against women (domestic violence and sexual harassment); AIDS (including youth sexuality and date rape); small business development and personal savings and hypertension. Soul City 4 extended the core Soul City vehicle to include a partnership with the National Network on Violence Against Women as part of the series 4 initiative to address violence against women, with an emphasis on domestic violence. The NNVAW brought together many sectors, including government, non-governmental organizations and civil society at large: the Network is a coalition of over 1 500 activists and community organisations from rural and urban areas.

Investigating the impact of a mass media communication vehicle is difficult, especially where behaviour is complex and where there are numerous influences on peoples' behaviour - both positive and negative. The Soul City 4 evaluation design deliberately engaged with these evaluation research difficulties, and set out to document in great detail the extent to which the series (and its partners) succeeded or failed as a comprehensive health promotion intervention. A complex evaluation of Soul City 4²⁸ was undertaken consisting of nine interlinked components, all contracted out to external researchers or research organizations - including the

²⁷ The Soul City model of social change is discussed in detail in *Soul City – Theory and Impact (synopsis)*, available upon request or on www.soulcity.org.za.

²⁸ Detailed reports on the Soul City 4 evaluation methodology are available upon request or on www.soulcity.org.za: *Soul City 4 Evaluation Methodology, Volume I* and *Volume II*.

overall evaluation management. Both quantitative and qualitative analyses were methodologically rigorous and comply with international standards and data analysis conventions as applied in this particular field of study. The evaluation was supported by an international and local panel of experts in evaluation, communication and entertainment-education, and was mainly funded by the European Union.

Reach and audience reception results²⁹ show that Soul City is a popular edutainment vehicle with considerable reach across urban and rural populations in South Africa. Soul City 4 reached 79% of its target population³⁰ (more than 16,2 million people) through television and radio alone. While Soul City 4 was on air, it was consistently rated amongst the top 3 television programmes – for both adult and children’s audiences.

Reach amongst the youth audience is of particular importance for HIV / AIDS interventions. More than 2 out of 3 Soul City audience members are youth, between the ages of 16 and 24. Soul City’s prominence as a health and development communication vehicle is further illustrated by the fact that 47% of the national population in South Africa spontaneously mentioned Soul City on television as a programme from which they feel that they have obtained useful information about HIV/AIDS³¹.

Soul City competes favourably in the South African media environment, and is overtly highly valued by its target audience as a relevant, credible and entertaining educational vehicle. Qualitative data show that Soul City’s impact is related to its constructive, pro-social role modeling, and its modeling of plausible alternatives or coping strategies, in a setting that is very real and very familiar to its audience. Soul City models a range of nuanced, understandable and relevant behavioural scenarios—in a setting or context that the audience can relate to and fully identify with. Soul City enables (in an entertaining and non-didactic manner) its audience to critically reflect on their own attitudes and behaviour, and leaves them with a sense that they have a choice in determining their behaviour, and in impacting on, or changing their lives. In this way the edutainment media contributes to shifts in the various phases and components of the complex process of behaviour change.

With reference to **Soul City’s impact on individuals in their immediate interpersonal environment**³², both quantitative and qualitative evidence across all themes covered in Soul City 4 suggest that exposure to Soul City is associated with increasing awareness and accurate knowledge, stimulating interpersonal dialogue within families and other social networks, increasing self-efficacy and a sense of empowerment (particularly amongst women), decreasing experiences of negative social- or peer pressure, and with shifting people’s attitudes, intentions and

²⁹ A detailed summary report is available upon request or on www.soulcity.org.za, *Soul City - Audience Reception*.

³⁰ The Soul City adult series targets “African” and “Coloured” previously disadvantaged South Africans. Although the series is suitable for all populations, theory of communication suggests that specific targeting and testing of materials makes it more effective. Soul City is however committed to the health and development of all South Africans irrespective of colour, race or any other characteristic.

³¹ Independent study conducted by Markdata: HIV/AIDS – Popular Perceptions And Dangerous Delusions, A Profile Of Risk-Awareness And Attitudes To The Disease Among South Africans In Late 1999, February 2000

³² Detailed summary reports are available upon request or on www.soulcity.org.za, *Soul City 4 Impact Evaluation – AIDS; Soul City 4 Impact Evaluation – Violence Against Women Vol I, Soul City 4 Impact Evaluation – Hypertension, Small Business Development & Personal Savings and Soul City 4 Evaluation Results – Integrated Summary Report*.

intermediate practice (health-seeking / support-seeking behaviour as well as support-giving behaviour) towards sustaining healthier behaviour.

There is a degree of variation in the consistency of quantitative associations observed across topics covered in Soul City 4 and impact investigated in the evaluation. For example, evaluation results suggest that the Soul City 4 edutainment vehicle was largely not successful in reaching its objectives with regards to the following: increasing knowledge around institutional support for financing small business; increasing an understanding of what constitutes sexual harassment; changing personal attitudes pertaining to sexual behaviour; changing attitudes and perceptions of social norms around sexual harassment; and changing behavioural intention in the area of small business development and personal savings.

However, a consistent quantitative association between exposure to Soul City 4 and the following key behavioural processes have been observed:

- increase in knowledge and awareness of violence against women, hypertension and HIV/AIDS / youth sexuality;
- improvement in personal attitudes and beliefs around domestic violence and maintenance of positive attitudes in the area of HIV/AIDS and youth sexuality³³;
- stimulating interpersonal communication around domestic violence and HIV/AIDS³⁴
- perception of the social norm becoming more positive around domestic violence and HIV/AIDS / youth sexuality³⁵
- improvement in intention towards positive behaviour for hypertension, domestic violence, sexual harassment and HIV/AIDS / youth sexuality.

As a rule, qualitative evidence supports and further illustrates quantitative associations observed. In some areas mentioned above where there is no quantitative evidence of an association between change and exposure to Soul City, there is qualitative evidence of such an association. For example, qualitative evidence suggests that change in personal attitudes around HIV/AIDS and sexual behaviour as well as change in awareness and intention around small business development and personal savings (which were not measured or observed quantitatively) can be attributed to the Soul City edutainment vehicle.

In addition to individual and interpersonal change mentioned earlier, there is qualitative evidence of Soul City's positive impact on self-efficacy – especially amongst women.

There is no indication that exposure to Soul City 4 directly increased perception of personal risk in the area of hypertension or HIV/ AIDS. In fact, perception of risk generally decreased from baseline to evaluation measurement. Interpretation of such decreases is difficult: it may be related to increased knowledge and positive behaviour which can be associated with exposure to Soul City 4; it may also be related to persistent personal denial despite health communication efforts. There is qualitative evidence that exposure to Soul City at least indirectly increased perception of risk in the sense that Soul City contributes to knowledge and awareness that monogamy is not a safeguard against contracting HIV, that HIV/AIDS is very real, and that hypertension can affect anyone.

³³ hypertension and personal savings attitudes were not measured

³⁴ hypertension, personal savings and sexual harassment interpersonal communication was not measured

³⁵ hypertension and personal savings subjective social norms were not measured

Change observed in association with exposure to Soul City 4 is applicable within the general target audience, as well as specifically amongst harder-to-reach audiences (such as rural audiences) in most instances. Furthermore, some key messages seemed to have successfully reached particular audience segments at risk, or audience segments integral to sustainable change in the particular area / topic: for example, women in particular showed positive change in intention around HIV testing for themselves and their partners; men's awareness of emotional abuse increased, their attitudes regarding whether women deserve to be beaten changed positively, and their intention to do something to stop domestic violence improved. A further illustration is the growing perception amongst youth of a positive social norm around women's independence and self-sufficiency.

Behaviour change:

In the areas of Hypertension and Small Business Development & Personal Savings, exposure to Soul City 4 is quantitatively associated with positive behaviour change. For HIV/AIDS, exposure to Soul City is primarily associated with maintaining positive behaviour. Soul City 4 is consistently associated with positive intermediate behaviour (support-giving and support-seeking behaviour) for HIV/AIDS and Domestic Violence.

Although there is qualitative evidence of behaviour change in the areas of HIV/AIDS and Domestic Violence, there is no compelling evidence of quantitatively measurable behaviour change in these areas. It must be noted that in the case of Domestic Violence, the association between behavioural responses and exposure to Soul City 4 could not be reliably investigated due to technical constraints in analysis (the number of responses were too small to allow reliable analysis). Alternative methods of analysis employed suggest that there may be an association between exposure to Soul City and positive behaviour for violence against women amongst respondents with primary education. Thus, other than in more general terms (referring to "doing something to stop domestic violence"), Soul City's quantitative association with positive behaviour in the area of domestic violence remains largely unanswered.

These observations need to be interpreted against the following background: the evaluation period was relatively short, with only eight to nine months between baseline and evaluation measurement. In the case of Domestic Violence, where the Soul City 4 intervention was the first attempt of this nature and scale to address domestic violence in South Africa, expecting measurable behaviour change over a nine-month period may be unrealistic given the complexity of the issues involved in domestic violence. Soul City has covered HIV/AIDS for a much longer period of time (since 1994); this may account for the more easily detectable association between Soul City and positive behaviour in HIV/AIDS. Again (with reference to HIV/AIDS behaviour), expecting to see "new" behaviour change over a nine-month period may also be unrealistic, and may support non-linear theories of behaviour change³⁶.

In the areas where behaviour is less complex and more under the control of the individual (Hypertension and Personal Savings), exposure to Soul City is associated with behaviour change despite the short period of time between baseline and evaluation measurement.

³⁶ Theories of social / behaviour change are discussed in Soul City – Theory and Impact (synopsis)

Soul City's impact on communities and society³⁷ was primarily investigated qualitatively. Qualitative evidence (supported by quantitative data) consistently illustrate that Soul City (in partnership with the National Network on Violence Against Women) contributed to creating a supportive environment for facilitating and maintaining behaviour change in the area of Domestic Violence and HIV/AIDS in particular.

The Partnership Evaluation Study systematically documents how the Soul City 4 intervention impacted on the national policy implementation environment through a successful advocacy strategy (including direct lobbying, media advocacy and community mobilisation) which contributed to raising public debate around domestic violence and facilitated the speedy implementation of the Domestic Violence Act (DVA). In the longer term, sustained advocacy for successful implementation of the Domestic Violence Act (i.e. improved service delivery, including more sensitive service delivery) is crucial in order to follow-through on immediate or short term gains made by the Soul City / National Network on Violence Against Women Partnership.

The Qualitative Impact Assessment captures Soul City's impact on local organisational / institutional policies and practices (particularly with reference to HIV/AIDS and youth sexuality). It influences people in leadership positions in the community, shapes, enhances and supplements communication between community leadership and their constituencies, and begins to impact on reorientation of services.

Furthermore, Soul City is reported to shift community norms, and to stimulate community dialogue and debate: through media advocacy and community mobilization mentioned earlier (with reference to Domestic Violence), as well as through the edutainment vehicle (with reference to Domestic Violence, HIV/AIDS & Youth Sexuality) Soul City raised public debate nationally (domestic violence) and within communities (Domestic Violence, HIV/AIDS & Youth Sexuality).

Soul City 4 increased access to services (in the areas of Hypertension, HIV/AIDS, and Domestic Violence). Given the limitations in resources, the Stop Women Abuse Helpline addressed a substantial need in the South African society, and increased access to crisis counselling and referral services for people affected by violence against women. On a very sober note, the impact of the Partnership on connecting people affected by violence against women to services must be interpreted in relation to the broader context in which services function in South Africa: barriers such as access to, and poor quality of services in some areas of the country limit the Soul City 4 intervention's effective and sustainable impact in creating a supportive environment for change.

The holistic impact of Soul City on one community in particular (with reference to Soul City 4 and previous series) is well illustrated in the powerful account of community empowerment and collective efficacy documented in detail in a case study that formed part of the National Qualitative Impact Assessment: Soul City fostered a sense of co-operation and togetherness in problem-solving within the community. It increased collective health consciousness; facilitated a sense of collective empowerment to effect change in the community; facilitated collective action and the formalization of community structures; and reinforced social networks. Soul City further facilitated a positive vision and hope for a better future for the community.

³⁷ Detailed reports are available upon request or on www.soulcity.org.za, *Soul City 4 Impact Evaluation – Violence Against Women Vol II* and *Soul City 4 Evaluation Results – Integrated Summary Report*.

Soul City's **cost-effectiveness** was investigated on selected constructs in the areas of HIV/AIDS and Violence Against Women³⁸.

Two sets of cost-effectiveness ratios (each under two different assumptions) are presented: the first set (un-weighted analysis) is based on the premise that all items measured are of equal importance (e.g. knowing that there is no cure for AIDS is as important as knowing that there is something one can do to prevent getting HIV/AIDS). The second set of cost-effectiveness ratios (weighted analysis) takes into account that some knowledge or action taken may be more important than others, as assessed by a panel of experts in the area of health and development. For example, asking your partner to use a condom was assessed as more important action taken than phoning the AIDS Helpline.

Preliminary comparison of cost per person reached by the Soul City 4 edutainment vehicle is extremely favourable (under US\$ 0.30 for Soul City Television and Print, and under US\$0.05 for Soul City Radio) due to the huge popularity of Soul City amongst the South African population.

Notwithstanding the fact that a technically correct comparison between Soul City's cost effectiveness and the cost-effectiveness of e.g. other HIV prevention programmes is not possible without additional research which overcomes limitations in the behavioural data used in this cost-effectiveness study, it must be taken into account that this is one of the first cost-effectiveness studies of its kind. Soul City therefore by necessity becomes a benchmark in itself, and needs to be assessed in this context.

Assessment in this light is bound to be favourable – where (under the joint media assumption³⁹, un-weighted analysis), Soul City 4 is associated with increases⁴⁰ in HIV/AIDS knowledge, intention, and action, as well as with increases in Violence Against Women awareness and knowledge for under US\$ 0.90, and with improvement in Violence Against Women attitudes for under US\$ 3.00. Under this assumption, increases in Violence Against Women action is far more costly at just under US\$ 116.

Costs drop remarkably though under the increased reach assumption⁴¹ (un-weighted analysis): Soul City 4 is associated with increases in HIV/AIDS knowledge, intention, and action, as well as with increases in Violence Against Women awareness, knowledge and attitude for under US\$ 0.40, and with increases in Violence Against Women action for under US\$ 7.00.

Weighted analysis (under the same two assumptions) was conducted on key HIV/AIDS outcomes: acknowledging the relative importance of different actions and different items of knowledge related to HIV/AIDS has led to a decrease in the cost-effectiveness ratios for HIV/AIDS knowledge (US\$ 1.50 and US\$ 0.15 under the joint

³⁸ A detailed summary report is available upon request or on www.soulcity.org.za, *Soul City 4 – Cost Effectiveness*.

³⁹ The joint media assumption suggests that, to gain desired impact, each media integrates together to reinforce messages and therefore acts as a unit that cannot be separated. Cost-effectiveness analysis is based on comparison between respondents with no exposure to any Soul City media, and respondents with exposure to all Soul City media.

⁴⁰ (i.e. based on single unit increases)

⁴¹ The assumption states that Soul City achieves increased coverage through its multi-media strategy, and is therefore based on comparison between respondents with no exposure to any Soul City media, and respondents with exposure to any Soul City media.

media and increased reach assumptions respectively), but an increase in the cost-effectiveness ratios for action taken (US\$ 0.59 and US\$ 0.27 under the joint media and increased reach assumptions respectively).

In conclusion, data consistently support the overall assessment that holistically seen, as a comprehensive health communication intervention aiming to impact on individual as well as environmental determinants of health and development, Soul City 4 was effective (and cost-effective at face value) in bringing about observable social and behavioural change (including the factors that form part of the broader behaviour change process), and in contributing to maintaining positive behaviour – notably so in the areas of Domestic Violence and HIV /AIDS & Youth Sexuality.
