

CREATIVE BRIEF – PUSHA LOVE

A new, branded campaign to revolutionize HIV prevention in Lesotho

Overview of Campaign Rationale	<p>LETLAMA is a five-year project (2011-2016) comprised of a diverse group of local and international partners. LETLAMA aims to improve the health of the Basotho people by reducing the incidence of HIV infection through the promotion of protective behaviours and support for healthier social norms among young people 15-24 and adults 25-35.</p> <p>LETLAMA partners have agreed to develop a harmonized Behaviour Change Communication program that reaches key audiences with relevant messages to contribute to the reduction of HIV incidence in Lesotho.</p> <p>The project is working in an environment where diverse and sometimes conflicting messages have created confusion, mistrust, and lack of motivation among individuals to adopt risk-reduction behaviors. Fatigue and negative perceptions toward HIV prevention messages are common. Lesotho needs a new, fresh approach to promoting healthy behaviors, which does not appear to the audience to just be “more of the same.” Attaching an AIDS-ribbon to a campaign has now become the surest way to ensure its failure.</p> <p>LETLAMA has a mandate to develop a national brand that can be used to promote healthy behaviors, products, and services. The LETLAMA project has decided to launch a brand that will be the communication vehicle of the Program. Post a Delta Strategy session and subsequent consumer research, The Pusha Love brand was developed. Pusha Love will be positioned as the “go to” brand for HIV health information and will inform a consistent look and feel for all supported communication activities, which include mass media, community-, and individual-level communication activities.</p> <p>The purpose of this brief is to develop and launch the new <i>Pusha Love</i> brand and establish its proposition to the target audience.</p> <p>Throughout the life of the campaign, new services, products, and behaviors will be introduced each year (or phase) that will provide the audience with additional options that they can adopt to achieve the brand promise of <i>Pusha Love</i>, which is the “good life.”</p>
Behavioral Objective	<p>In phase 1, through <i>Pusha Love</i>-promoted HIV prevention products and services, we hope to achieve:</p> <ul style="list-style-type: none"> • Increased use of condoms; and, • Increased uptake of HIV testing and counselling services among men • Reduced stigma toward those living with HIV/AIDS. <p>In phases 2-4, additional behavioral objectives will be added to cover the new products and services promoted under the <i>Pusha Love</i> brand. See attachment 3, Campaign Timeline, for additional messaging.</p>

	<p>This creative brief covers only phase 1 objectives of the campaign.</p>
Communication Objectives	<p>Phase 1 communication objectives are:</p> <p>For the umbrella brand:</p> <ol style="list-style-type: none"> 1. Create awareness of <i>Pusha Love</i>, positioning it as a desirable brand that promotes the “good life.” 2. Establish <i>Pusha Love</i> as the trusted source of information, skills, and motivation that enables men and women aged 18-35 to make healthy choices. <p>For condoms:</p> <ol style="list-style-type: none"> 1. Increase the mean score among men and women 18-35 who have positive attitudes toward condoms. <p>For HIV testing and counseling:</p> <ol style="list-style-type: none"> 1. Increase the mean score among men 18-24 for beliefs that HIV testing is for men like them. 2. Increase the mean score among men 25-35 for perceived social support for HIV testing. <p>For stigma reduction:</p> <ol style="list-style-type: none"> 1. Decrease the mean score among men and women 18-35 for perceived stigma toward people living with HIV.
Positioning Statement	<p><i>Pusha Love is the</i> trusted source of information, skills and motivation that enables me to make healthy choices so I can achieve the good life, giving me a sense of achievement that makes my peers look up to me and my family proud.</p> <p>Functional Benefits</p> <ul style="list-style-type: none"> • Consistent—each time I look here for information or advice, and I look for <i>Pusha Love</i>, I instantly recognise it and get the results I am looking for. • Solution Oriented— <i>Pusha Love</i> offers not only the information I need but provides solutions that are relevant to me and that I can action • Accessible—I can find <i>Pusha Love</i> information, services, and products when I need them • Evidence-based—accurate and up to date information on the products and services that are promoted by <i>Pusha Love</i> are the same that I often hear about as important things to stay healthy • Holistic—provides a range of products and services that I can always access <p>Emotional Benefits:</p> <ul style="list-style-type: none"> • Trusted – “talks with” me not “preaches to” me that makes me have credibility in what they advise me to do • Optimistic—gives me reason via actionable solutions to believe that tomorrow will be a better day

	<ul style="list-style-type: none"> • Understanding/compassionate—talks to me about my needs without judging me and my decisions • Inspiring/Motivating—speaks to me in a way that inspires me want to take action to stay healthy
Brand Personality	Your nurturing friend who is supportive, optimistic, playful, compassionate, and confident.
Key Message (s)	<p>Through the Delta process, it was agreed that the new brand would be introduced and built up overtime, with new promoted products and services introduced on a regular basis.</p> <p>Message 1: A person who uses the products and services promoted by <i>Pusha Love</i> is someone who knows how to demonstrate their love of self and others. <i>Pusha Love</i> is the “go to” brand that provides you with relevant solutions that keep you on track to achieve the “good life.” (all audiences) (Proposed timing: months 1-3)</p> <p>Message 2a: A <i>Pusha Love</i> man knows that HIV does not discriminate. Even strong, smart people can be HIV-positive so he knows his status to help him achieve the “good life.” (males 18-24) (Proposed timing: months 3-6)</p> <p>Message 2b: A <i>Pusha Love</i> man knows that his friends and family want him to get tested for HIV so that he can achieve the “good life” and remain the respected provider of his family. (males 25-35) (Proposed timing: months 3-6)</p> <p>Message 3a: A <i>Pusha Love</i> man knows that condoms allow him to enjoy sex without fear of HIV or unplanned pregnancy, keeping him on track to achieving the good life. (males 18-35) (Proposed timing: months 6-9)</p> <p>Message 3a: A <i>Pusha Love</i> woman knows that when her man proposes using condoms it means that he cares about her and their future and wants to keep them track to achieving the good life. (women 18-35) (Proposed timing: months 6-9)</p> <p>Message 4: Speaking out and supporting people living with HIV breaks the culture of silence that is keeping you from protecting your health and that of your family. A <i>Pusha Love</i> man/women isn’t afraid to stand up and insist that the culture of silence ends with him/her. (all audiences) (Propose timing: months 9-12)</p>
Target audience (primary and/or secondary)	Overarching insight: All key audiences want to be healthy in order to achieve their aspirations and reach their full potential. But they don’t always have the ability or motivation to make healthier choices.

	<p>Key audiences for this campaign include:</p> <ul style="list-style-type: none"> • Palesa, the Aspiring Romantic, a young woman who represents those aged 18-24 • Bokang, the Smooth Operator, a young man who represents those aged 18-24 • Neo, the Good Wife, a woman who represents those aged 25-35 • Teboho, the Respected Provider, a man who represents those aged 25-35 <p>In phase 1, men 18-35 will be primary audiences for condom use and HTC messages. Women 18-35 will be secondary audiences for condom use. Both men and women aged 18-35 will be primary audiences for brand positioning and stigma reduction messages.</p> <p>In subsequent phases of the campaign, primary and secondary audiences will depend on the service, product, or behavior being promoted under <i>Pusha Love</i>.</p> <p>See attachment 1 for detailed profiles.</p>
Tone	<p><i>Pusha Love</i> is:</p> <ul style="list-style-type: none"> • Upbeat and positive • Bold, but relaxed • Local – reflects the new Lesotho • About the couple and/or family, not the individual alone • Gender sensitive <p><i>Pusha Love</i> is not:</p> <ul style="list-style-type: none"> • Directive or preachy • Immature • Only for Valentine’s Day • Gender exploitive • Afraid to challenge the status quo. <p>See attachment 2 for brand blueprint.</p>
Production Requirements	<p>Agency will be required to produce the following elements:</p> <ol style="list-style-type: none"> 1. Look and feel of the <i>Pusha Love</i> brand, which includes a brand logo, slogan, and other elements of the brand identity; 2. Pitch for a communication campaign to introduce the new brand to audiences, create brand awareness, entrench the new brand in the minds of the audiences, and will be followed by behavior/product/service-specific supporting campaigns (see point # 4); 3. Campaign should include relevant ATL and BTL channels to create awareness of the new brand as well as introduce the products and services; and, 4. Post-launch, a communication plan to address the products, services, and aligned key messages, as described above.

Campaign timeline	Phase 1 of the campaign will be launched in October 2012 and continue through September 2013. Over the course of phase 1, the new brand will be launched and embedded into the minds of the audience and the initial product and services offerings will be introduced. In later phases of the campaign, additional products, services, and behaviours will be introduced per the campaign timeline (attachment 3).
Branding/Marking Requirements	All <i>Pusha Love</i> communication should exhibit the newly developed brand logo and tagline as well as provide space for up to two donor logos and a project logo.
Geography	National coverage
Language(s)	English and Sesotho
Timing	<ul style="list-style-type: none"> • Release of creative brief to agencies: 27 July • Briefing for interested agencies: 1 August • Development of concepts: 27 July – 10 August • Submission of concepts to PSI: 10 August • Review and evaluation of concepts: 13 – 17 August • Notification of concept selection: 20 August • Campaign refinement: 21 – 31 August • Pretesting and final production of brand launch campaign: 1 September – 12 October • Launch of campaign: 15 October
Evaluation Criteria	<p>The project team will evaluate concepts and select three for testing with the target audiences. Feedback from both the project team and audiences will be used to make the final selection.</p> <p>The following criteria to decide if the brand has:</p> <ul style="list-style-type: none"> • Originality and uniqueness • Relevance across target audiences: rooted in insights • Credibility (Does it create trust?) • Campaign-ability (Does it include usable on radio, print, outdoor visuals?) • Distinctive (Does it stand out from the rest, beat competition?) • Engaging (Does it attract capture and hold attention throughout?) • Emotional Impact (Is it appealing to the heart and the head?) • Enjoyment (Will target audience want to see it again?) • Prominence (Is it new and different or is it just like every other HIV prevention campaign?) • Brand fit (Is it on brand personality, and aligned to the creative platform?) • Brief fit (Does it meet the core objective that was set?)



Attachment 1: Audience Profiles

Bokang – The Smooth Operator – Male 18 – 24

Bokang is 20 year old male, who lives in a rural village on the outskirts of Maseru, in the family compound (a hut, a one room house and a shack). He lives with his mother and siblings. His father passed away when he was still young, and he had to drop out after form 3 due to financial problems. He doesn't have a regular job, but earns money through piece jobs to help out at home. When he can he hangs out with his friends, watching soccer, listening to the radio and drinking, enjoying the occasional zol (dagga).

Bokang has a girl that he sees regularly, and has had a number of sexual partners and believes that he should experiment sexually before he settles down and marries. He lives for the moment, and his peers have a great influence on his life. He wants to fit in with his peers and have a good time.

Psychographics:

Teboho knows that he should limit his sexual partners but sometimes has more than one at a time. He knows the benefits of a condoms and how to use them but doesn't always use them because he believes that unprotected sex is more enjoyable. He knows where to get an HIV test, but has never done so.

Aspirations:

Bokang hopes to be able to go back to school because he recognises that without an education he has limited options for employment. He would like to be able to provide a more comfortable life for his family/Mom; and he would like to have more money so that he can attract girls.

Barriers:

- He has incomplete knowledge of HIV and AIDS, i.e. He believes that someone who looks healthy is not HIV positive.
- There are limited health centres offering HTC in his area.
- Existing services are not youth-friendly.
- Condoms are available at community health centres, but he doesn't want to have to ask for them.

Additional Info:

- He looks up to people in his community who have "made it," e.g., the local taxi owner/business man.
- He would really like to make his Mom proud.

Palesa – The Aspiring Romantic – Females 18 – 24

Palesa is a 21 year old female, who lives with a relative on the outskirts of Maseru, in a two roomed rented house. Palesa doesn't have a job currently, but does some piece jobs when they come her way. She is also in the process of completing her high school studies part time (supplementing). She spends most of the day at home and hangs out with her friends, talking, doing each other's hair and listening to the radio.

Psychographics:

Palesa and her friends also talk about their boyfriends, of which they have more than one. Some of these boyfriends are married men, who provide some of the necessities, i.e. Airtime, cosmetics, drinks, etc. Palesa, however, also has a steady boyfriend of her own age-group who she hopes will marry her one day but she also has older boyfriends who help her meet other needs. She needs to feel cared for and wanted and these men make her feel that way.

Aspirations:


She has some high school education, but hopes to further her studies in order to become a professional. She would like to have a good job one day, to get married and have a happy family. She would like to be healthy and values beauty and looking good.

Barriers:

- She knows about the benefits of condoms and their importance but finds it hard to negotiate condom use with her boyfriend and her older lovers. Her older partners actually don't want to use condoms.
- She has tested once but doesn't like to go to the local HTC centre because she fears that the nurses will not keep her result confidential and she fears being judged.
- She fears what will happen if she tests positive for HIV.
- She is afraid of the stigma that might result if she tests positive – that she may be rejected by her family and friends.
- She is shy to ask for condoms at the community centres where she goes for family planning, and relies on the men to provide them.
- She fears pregnancy more than she does HIV!
- She doesn't have anyone other than her friends to discuss sexual matters with and so relies on their advice. It is also not common for her friends to discuss or even use condoms.
- The adults she interacts with also have numerous sexual partners so she does not see anything wrong with her behaviour.
- She has some misconceptions about condoms and HIV: i.e. Condoms cause stretch marks, and HIV is for older people.

Additional Info:

- Sexual education/life skills are not provided in schools so most young women learn about sex from their peers.
- It is not an accepted practise for girls to carry and buy condoms.
- Free condoms are not placed in discreet and easily accessible places (e.g. schools).
- There is pressure from her older partners not to use condoms.
- There are many myths around condoms.
- There is a lack of health/ HTC services in general especially in rural areas.

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- Culturally it is more acceptable to be with an older man as a young woman.
 - Their need/desire is to feel spoilt and loved and they are therefore more vulnerable to the advances of older men.

Neo – The Good Wife – Females 25 – 35

Neo is 29 year old female, who lives on the outskirts of Maseru, in a rented two roomed house. She is married with 2 children. Her husband is a construction worker and is often away for work; she works as a shop assistant in a grocery store and commutes to work by taxi. She earns around M1000 per month, sometimes working overtime on Saturdays to supplement her income. Her husband contributes around M3000 a month to their household when he has a job.

Psychographics:

Neo is community oriented, and regularly attends social gatherings, going to church on Sundays as well as the occasional funeral. She also has a group of friends that she socialises with on weekends, going to the local bar when her husband is not around. She belongs to a “mokhatlo” (society) where she interacts with women from her community and gets a lot of information and advice.

Although she is a dedicated mother to her two kids, she sometimes has an occasional fling / lover who give her the extra attention she craves and money she may need, but is faithful to her husband when he is at home. A lot of her friends also have lovers, as their husbands/partners also work far away from home.

Aspirations:

Neo aspires to giving her children a happy life, and to provide for their future. She knows that in order to do so she should be healthy, and also ensure that they are too. She wants them to have a good education so that they can get better jobs than those that she and her husband have.

She strives to please her husband so as to ensure that the family unit stays intact. And she wouldn't want him to know about her other lovers; even though she suspects that he is seeing other women as well.

Barriers:

- She does not use condoms with her husband as it is not the thing to do in a marriage.
- She knows how to use condoms and their importance but finds it hard to negotiate condom use with some of her lovers as well.
- She doesn't communicate about sexual matters with her husband.
- She tested for HIV approximately a year ago but doesn't know her husband's HIV status, and doesn't know how to bring it up. Couples do not test together as a norm.
- Condoms are not always available when she needs them, as shops are closed at night.

Additional Info:

- Prevalence of HIV peaks among women 25-35 yrs: 35.4 % of women 25 yrs old and 40.7% women 35 yrs old are HIV+ (DHS 2009)
- Marriage is a risk factor for HIV (HIV is higher among married women, divorced/separated and widowed)

Teboho – The Respected Provider – Male 25 – 35

Teboho is a 33 year old male, who lives on the outskirts of Maseru, in a rented single bedroom house. He is married with two kids. He also has a child from a previous relationship, when he was still a teenager. He and his wife are both mid-level professionals, who live comfortably but still strive for more financially. Teboho is enrolled in a course (bridge) which will help him reach his dreams of financial security. Their monthly household income amounts to approximately M8000.

Although Teboho is married, he also has a regular girlfriend. He has also had the occasional one –night-stand, despite having two regular partners. He and his wife have a comfortable relationship, but the spark has gone out and they no longer act like lovers. He finds it hard to ask her to do certain things for him sexually, that his girlfriend does.

Psychographics:

Teboho also spends a lot of time with his friends, at the car wash or at the local spot/bar, watching and playing soccer.

In general Teboho is happy with his life, but has a lot on his plate; he has to juggle a demanding job, his studies, his family responsibilities and lover, as well as still try to have a social life.

Aspirations:

Teboho aspires to being a professional in a high income bracket; he wants to provide a better life for his family: university level education, a 3 bed-roomed home, and a nicer car.

Barriers:

- He does not test for HIV and he is also generally quite healthy. His wife has tested so he does not see the need to.
- Were he to go alone, and get a positive result he does not think he could face his wife. He would be ashamed because he would be viewed as having been irresponsible, and lose the respect of his family. It would also mean that he would have to change his lifestyle.
- He also knows about the importance of condom use, but he doesn't use them with his wife or girlfriend (anymore) because he trusts them.
- He is less likely to use a condom if he has been drinking alcohol when he meets a girl, especially since there are none available at the bar he frequents.
- He also wouldn't want to use the free-issue condoms as they would make him seem cheap.

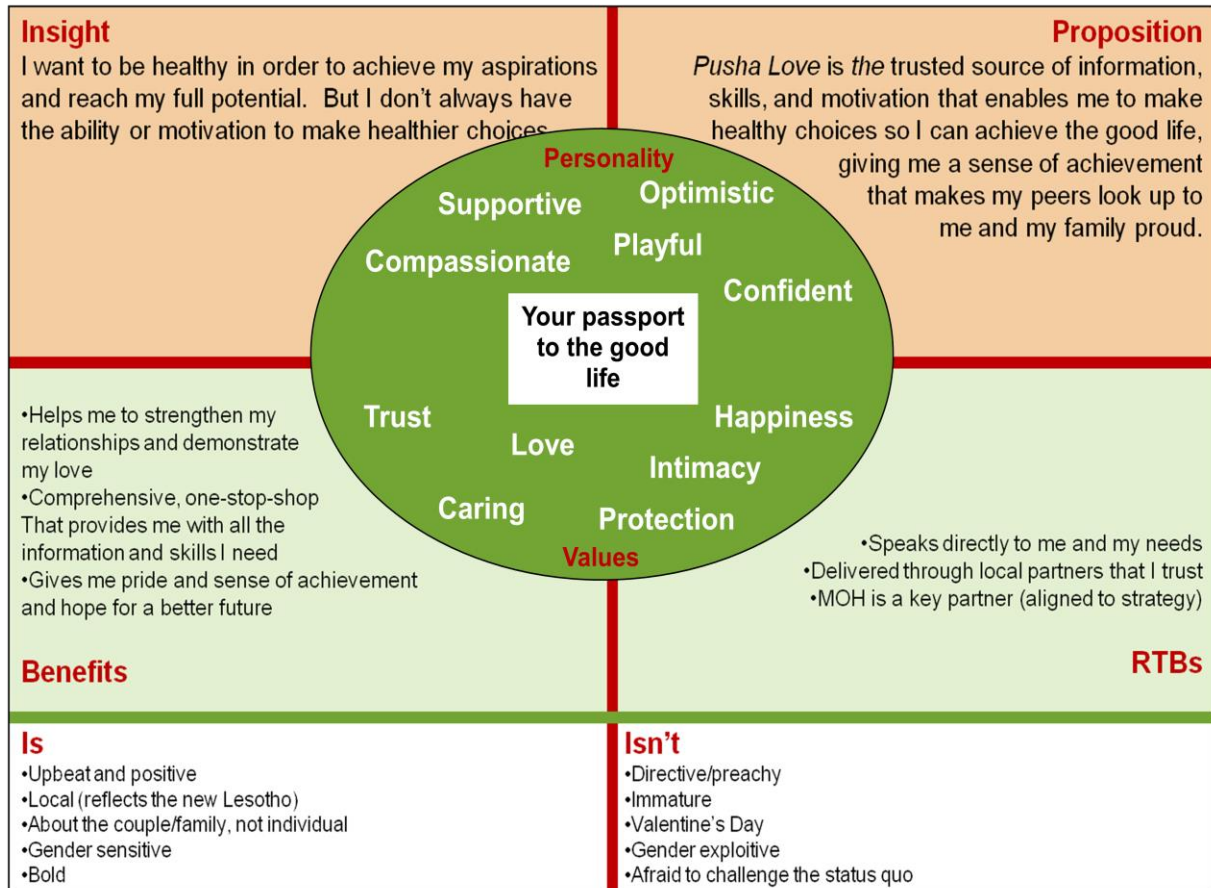
Additional Info:

- He is likely to have engaged in transactional sex
- MCP: 50.3% of urban males are reported to engage vs. 42.9% in rural areas, 62.9% of which are between ages of 30 and 39
- Marital status: 19.7 are married or cohabiting
- Occupation: 32.3% of men between 30-34 are engaged in agriculture, and 20.3% are skilled manual labourers

Attachment 2: Brand Blueprint

PUSHA LOVE Brand Blueprint

Target Market: Males and Females, 18-35



Attachment 3: Campaign timeline

<u>Introductions</u>	<u>Phase 1</u> <u>Oct'12-Sep'13</u>	<u>Phase 2</u> <u>Oct'13-Sep'14</u>	<u>Phase 3</u> <u>Oct'14-Sep'15</u>	<u>Phase 4</u> <u>Oct'15-Sep'16</u>
General	BRAND AWARENESS & POSITIONING			
Services	HTC	PMTCT	COUPLES TESTING	
			VMMC	
Products	CONDOMS			
Supporting messages	STIGMA	INTER- GENERATIONAL SEX	Alcohol	
		CONCURRENCY		

Note: The timing of introduction and number of new services, products, and behaviours is subject to change based on emerging evidence and government priorities.