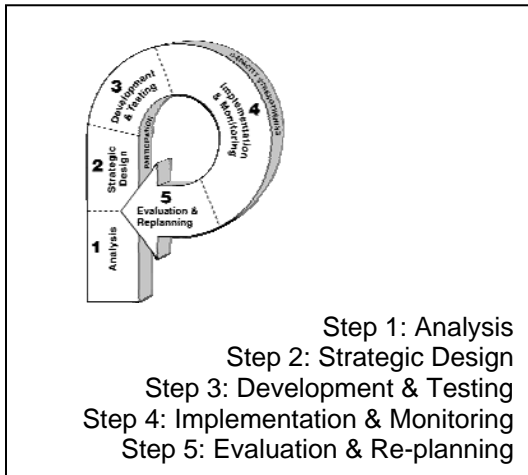


# Chapter 1: INTRODUCTION TO THE MANUAL

## Why is This Manual Important?

As different populations face various risk factors for contracting HIV, matching interventions with the needs of specific populations has proven to be a successful way to mitigate the AIDS epidemic.<sup>1</sup> Using the P Process<sup>2</sup> program development framework as a guideline, this manual covers step by step methods for designing and implementing IPC programs that will target specific, vulnerable populations.

Interpersonal Communication (IPC) is a form of communication that takes place between a trained agent and a member or several members of a specific target population. The goal of the interaction is to support behavior change by addressing the underlying causes of risk within the specific context of the target population. The communication is most effective when enhanced by support materials such as flip charts or cue cards. Some examples of IPC include: 1. Discussion groups held 2. One-on-one talks with women regarding reproductive health in clinic settings, 3. Small group interactive workshops which focus on reducing specific risk behaviors, 4. Peer education.



## What is Peer Education?

Peer Education (PE) is one of the most commonly used and most effective IPC strategies. In peer education programs, members of the target group are trained to act as educators for other group members. PE has been used widely with youth who are likely to be influenced by their peers. More detailed information about using peer education as an IPC strategy can be found here. Additional peer education resources can be found here.

## Who is This Manual For?

1) For PSI staff, contractors, and partners who are interested in developing Interpersonal Communication (IPC) and Peer Education (PE) interventions for high risk groups such as commercial sex workers (CSW), injecting drug users (IDU), men who have sex with men (MSM), migrant workers, transport workers,

<sup>1</sup> Although this manual focuses on HIV/AIDS interventions with high risk groups, the tools and processes proposed here can be applied to a range of health issues and target groups.

<sup>2</sup> Health Communication Partnership (December 2003). The new P-Process, steps in strategic communication. Baltimore: Johns Hopkins Bloomberg School of Public Health / Center for Communications Programs / Health Communication Partnership.

and uniformed services personnel.

- 2) For those who are seeking donor support for such projects and want to familiarize themselves with state-of-the art interventions.
- 3) For program implementers, it serves as a “how-to” guide. It provides a step-by-step process for developing and implementing an IPC intervention.
- 4) For NGO partners who may be familiar with IPC, but are not accustomed to targeting and working with high risk target populations.
- 5) There are also components of the manual that may be of special interest to researchers, managers, trainers, and campaign developers.

While this manual recommends a general approach to IPC program development, it is important for program planners to apply manual guidelines and suggestions in a way that meets the needs of their own particular cultural, religious, and ethnic contexts. In focusing on an array of IPC approaches and overcoming common obstacles, this manual can be generalized to a variety of settings.

### **What is Included in the Manual?**

1. *Step by step suggestions for IPC program development*  
The manual provides a road map for each stage of the planning and implementation process as well as suggestions for research, and monitoring and evaluation.
2. *Practical tools and How-To Instructions*  
Tools such as sample job descriptions, suggestions regarding management issues, and the advantages and disadvantages of working with paid field staff or volunteers are all included.
3. *Examples from PSI experience*  
The manual also includes 2 case studies of PSI IPC programs in India and Nigeria. These case studies highlight two different practical examples of the IPC development process including research conducted and utilized, lessons learned, and obstacles overcome.
4. *Suggested solutions to common problems*  
The manual highlights the most common obstacles that are faced when developing and implementing IPC programs and concrete suggestions/solutions are provided. The manual attempts to establish a high standard of quality for future PSI IPC and PE interventions by building on past successes and avoiding common pitfalls.