

Conference Paper

Social Marketing Strategy of Voluntary Counselling and Testing (VCT) HIV-AIDS in Indonesia

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Abstract

HIV-AIDS epidemic remains a serious public health problem in the world, including Indonesia. Voluntary counseling & testing (VCT) is one of HIV prevention strategies. Ciputat Health Center is the first health center in South Tangerang which already have VCT services. However, there are still low interest in using the service. This study aims to describe the problem using social marketing (SM) perspective. This was a qualitative research with a descriptive approach. Informants were selected using purposive sampling, Seven 7 informants were interviewed, namely Responsible Person of VCT program, head of the health center, health promotion staff, South Tangerang Health Department, NGO partner, VCT patients, and non-VCT patients.

The results showed that Ciputat Health Center had made SM, based on four principles: to promote (with leaflet, diary of ODHA, posters, brochures, flipchart, a banner in front of health center, mouth to mouth by cadre, provision of condoms), the product (VCT), while considering the price (freecost for Tangsel supported by Global Fund, other Tangsel should pay, perception of barrier because of stigma and discrimination), and place (health care's office integrated with TB Program, mobile VCT). Beside of this, VCT informan said, they don't know VCT information well, they just suggested by midwife in antenatal care to take a blood test, never promoted by cadre. Health promotion staff said, she never joined SM planning. NGO just facilitated high risk community not to public. The goals of SM just showed the number of VCT target, but it didn't reach. SM missed in positioning statement. The recommendation is developing the strategy of VCT involved by all staff to promote and giving information, devide the strategy by specific population like mother to-child transmission and public, minimize stigma by using a campaign, good positioning statement and situation analysis to reach goals of SM VCT.

Keywords: HIV-AIDS, social marketing, VCT.

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1. INTRODUCTION

HIV-AIDS epidemic is a serious public health problem. Indonesia Health Profile 2013 states, the cumulative number of HIV infections as many as 118,787, AIDS as many as 45,650 people. Highest Number of AIDS is in the group of self-employed (5,630), housewives (5,353), employees (4,847), a laborer (1,897), sex workers (1,771), farmers, ranchers, fishermen (1,757), student (1,123), While the most risk factors are heterosexual (60.9%), injection drug users (17.4%), followed by perinatal transmission (2.7%) and homosexual (2.8%). Banten is one of province with the highest HIV-AIDS cases, among 2983 HIV Infection, 957 cases (Ministry of Health: 2013). South Tangerang is one of highest risk population estimate in Banten, 18,488 (Banten Health Department: 2012).

Data showed that HIV infection began to spread to the large community (generalized epidemic), especially among housewives and entrepreneurs, apart from sex workers. It should be detect and prevent earlier with Voluntary Counseling and Testing (VCT) program. VCT has been promoted as essential in working towards universal access to prevention, treatment, care and support (UNAIDS: 2005). Ciputat Health Center (HC) is the first health center in South Tangerang which already have VCT services. According to Ministry of Health in 2013, number of VCT tested in South Tangerang City were 99 persons, 98 persons consist in Ciputat Health Center and 1 person in Jombang, 17 HIV-positive detected in Puskesmas Ciputat. According to Department of Health South Tangerang 2014, Ciputat is a red zone cases of HIV-AIDS in South Tangerang with total 83 cases. The next is Pamulang 55 people and Pondok Aren as many as 47 people. The majority of VCT clients only come from high-risk populations such as transgender, sex workers, drug users, not a public.

The results of introduction interview with person in charge of VCT in Ciputat showed, VCT detected HIV transmission dominated by key group undergoing methadone treatment. South Tangerang City Health Department said the potential HIV-AIDS in Ciputat through prostitution and several plus massage services. It means, VCT is only done by a small number of groups, does not include public client such as mother to child transmission. Ministry of Health (2011) says, the VCT target is public generally aged 15 years and above as like the Strategic Objectives Control of HIV-AIDS for 2010-2014.

Person in Charge of VCT said, the target of VCT each month, at least there are 50 people were tested, but in fact there are fewer than 20 people a month. It is seen a lack of interest to come to VCT services in Ciputat health center. It could be caused by a lack

of social marketing (SM) of VCT (Voluntary Counseling Test). Therefore, the researchers intend to analyze the problem of interest from the social marketing perspective.

2. METHODS

This was a qualitative research with a descriptive approach. Informants were selected using purposive sampling, 7 informants were interviewed, namely Person in Charge (PIC) of VCT program, head of the health center, health promotion staff, South Tangerang Health Department, NGO partner, VCT patients, and non-VCT patients. Data collected by Indepth interview, assessing document, and observation. Source of data used are :

1. Primary data is interview result, collected by researcher.
2. Secondary data obtained from document of unit such as annual reports, health centers profile, guide line of VCT, etc.

The conceptual framework of research was *Social Marketing For Public Health* Hong Cheng, Philip Kotler, Dan Nancy R. Lee (2009). It was describe background, purpose and focus, situation analysis, segmentation, marketing objectives and goals, factors influencing adoption of behavior, positioning statement, develop a strategic marketing mix (4P's), outline a plan for monitoring and evaluating, establish budget and find funding source, plan for campaign implementation and management. The focus variable is develop a strategic marketing mix (4P's) Product, Price, Place and Promotion.

3. RESULTS

The result showed that Ciputat Health Center had done a social marketing. But, the planning did not involve all member of HC and stakeholder. Health promotion staff said, she never joined SM planning. *"I'm not really involved in planning time, I was only involved during the process of implementation on the ground"* (HP Staff). SM conducted by the Department of Health. The rationale of this program is the Minister of Health Decree No.1507/Menkes/SK/X/2005 October 18, 2005 on Guidelines for VCT. The goal of SM VCT in order to obtain psychological support, information, and knowledge of HIV and AIDS so that behavioral changes toward a healthier, safe and responsible.

From this study, author analyze the problem of interest of VCT by using social marketing strategy in 4P marketing strategy. Ciputat HC had developed a strategic marketing mix based on four principles: product, price, place, and promote

3.1. Product

The product is HIV Testing or VCT. Focus of the program is the HIV-AIDS screening using two approaches, VCT and Provider Initiated Test and Counselling (PITC). PIC VCT said *"The product is tests and counseling HIV-AIDS and the benefit is knowing HIV status earlier.* Health Department also said like that. But, in fact, client said that She did not know the information about VCT, what's the benefit, they just suggested by midwife to take a blood test, *"I take VCT just want to know because I'm pregnant, midwife in antenatal care was told me to take a blood test, In the fact its VCT, I don't know information as well (Client).*

The weakness of product was low glory of product and the target of product was silent. PIC said *"If the weakness, hospot target was hidden, who would want to admit PSK? Different as immunization programs, all visible"* (PIC VCT).

In Product target just showed the reached of client target, *"Indicators of input, for example, the report is completed, reached the target, on timely, what's problems there, the teams involved. Output indicators, how many people of VCT, we do not have a specific standard of services, only a crude target of VCT 50 people a month, we did not measure until a client satisfaction"* (PIC). *"Indicators of output, look at the number who used VCT and the number of positive"* (HP Staff)

Kotler (2009) defines a product that is applied product strategy includes core product (main product or benefit), the actual product (action or behavior) such as HIV testing, and augmented product (goods and services). Here looked HC only designed actual product that was taking VCT test, the core product such as benefit of VCT, satisfaction and augmented product such as the information of VCT did not be felt by client.

3.2. Price

Considering the price, HC designed a free cost for Tangsel citizen, supported by government and Global Fund, GFATM AIDS components (GFAIDS), other Tangsel should pay.

Establishing budget and find funding source, the real budget was from GF, but if the program was end, it would reduce funding of VCT *"we give a free service for tangsel, but other tangsel should pay. Honor is still of GF in cooperation with NGO, at least when the program was end, reduced funding of VCT, if the VCT tool from department budget, from the BOK"* (PIC). Midwife said *"The limited funds, because the BOK funds for all programs KIA and 60% of infectious diseases"*

But, The NGO said they did not know what happen in the future if the there was no funding supporting VCT again. *"If the power of the institution anyway, we have this program with funding from Global Fund AIDS, from Nahdlatul Ulama, but do not know how the future (NGO)*

Between this, there were a perception of barrier because of stigma and discrimination). This factors influencing adoption of behavior was a high cost for client according to HP staff. Perceived of fearness, shame, no support from family, or do not know VCT. *"For the public, they thought, they fear that face a positive result" (HP Staff). "fear of secrecy, they fear other people know, there were also obstacles of family" (NGO) "many people who do not do, because they had not know VCT test yet, and if they know, the are affraid if the result is positive, what about other stigma?" (Nclient). "free but time to take bood test, for about an hour with lining, it's too long" (Client)*

Kotler (2009) said, Price Strategy is the price, time, or both psychological and physical sacrifice that must be given by clients in the utilization of health programs. So that, the high price to take VCT was psychological aspect and time aspect, Perceived of fearness, shame, stigma and discrimination and the long process of VCT. It is could be caused by the conselor only four people. PIC said *"there were only four counselor including me, and laboran"*.

3.3. Place

Place strategy of VCT in Ciputat HC is VCT in health care's office integrated with TB Program, and mobile VCT. PIC said *"If the place, we have a special room above, second floor, in addition to the lab, but join together with pulmonary tuberculosis clinics and methadone therap, we also have mobile VCT.*

Kotler (2009) said Place strategy is a marketing strategy in creating ease of access to services for clients. Place should show a comfort place. Here showed that the place for VCT in health center is not comfort place, because it join with other therapy, TB and methadone. VCT client needs a comfort place with a control of privacy room.

3.4. Promotion

The promotion strategy was using leaflet, posters, brochures, flipchart, a banner in front of health center, mouth to mouth by cadre and NGO, HIV Day event, provision of condoms, PIC said: *"we had a cadre whom able to disseminate information actively,*



Figure 1: VCT Place in Ciputat HC.

mouth to mouth, we have a forum lokbul, lokmin, village meetings, The threat was the target was embarrassed, ashamed VCT. The obstacles, cross-cutting has not been so ambitious, the glory is not as immunization week that PKK offices also participated. (PIC VCT)

Planning for campaign implementation and management were from their activity, brochure in AIDS day, banner in front of HC *"we implement campaign through their activities, if any meeting methadone, we fit together"* (HP Staff). *"Banners, can be on the front page health centers, HIV launching"* (Midwife), *"We campaign used brochure, often in the AIDS day, in collaboration with all parties"* (NGO) *"The problem is miss communication among KPA, because KPA itself has not run up anyway, when action we faced the existing barriers of discrimination, especially about the distribution of condoms"* (NGO), *"The obstacle was contract of time, there are some areas that are closed to us,"* (DepHealth)

The obstacle in promotion was difficulties of media placement *"difficulties of media placement, for example banners, We had never post banners on the streets, just putted in front of HC."* (HP Staff) Beside of this, VCT informan said, they don't know VCT information well, they just suggested by midwife in antenatal care, never promoted by cadre. *"Cadre did not give promotions, midwife posyandu did'nt too, just from midwives in antenal care, I don't know the information well"* (Client)

Before designing a promotion strategy, a segmentation analyse process need to conduct to differences between each strategy to each group. The result of segmentation process was begun by conducted in HC using medical record *"For segmentation, only taken in health care office by medical record, just asked its risk factors, they came here,*



Figure 2: Poster in Ciputat HC.

picked by NGO /by his self (PIC) The segment is not exclusively live in Ciputat. PIC said no mapping "Actually they come from outside of Ciputat, such Pamulang, Tegal Rotan, they had operations in other areas, high mobilization, there are no special mapping" (PIC). NGO said they just facilitated high risk community not to public, "We just accompany at risk groups about 300 more" (NGO)

Kotler (2009) said Promotion strategy should look target audience to have an effective communication and inspire target audience action. The result showed that no deviding the strategy by specific population like mother to-child transmission and public, detail promotion by NGO only reach population at risk.

Marketing objectives and goals, *"The goal of knowledge and behavior, people know HIV-AIDS risk behaviors, so that many people who want test VCT and would prevent. Our target as much as possible, our crude estimate were 50 people every month" (PIC)*

Positioning statement of promotion looked in this answer. PIC said, *"We did not have positioning statement. But this VCT program was superior program" (PIC)*. From here looked that campaign promotion in HC, did not have a positioning statement to campaign product of SM VCT.

Kotler (2009) said, marketing mix strategies can not develop in isolation, it is "mix" or synergy it can makes successfull social marketing campaign possible. We can not just develop product, but at least include campaign effort and the benefit to achieve campaign success. For example, the positioning statement of VCT campaign in Namibia is youth-focused "Know for Sure" campaign used radio and billboards to promote HIV

testing. The “Knowledge is Power” campaign promoted VCT to soldiers as part of the MAPP program to prevent HIV among the military. Additionally, a song contest was held to destigmatize HIV testing. Other promotions have been based at health centers [17].

The success SM campaign utilizes various communication for mass and media. The communication formats consist mainly of advertising, public relations, special event (like national exhibitions), sponsorship and personal communication (including word of mouth, such as clinic counseling and family visit). Communication media include traditional media (such as news paper, magazine, radio, television, cinema, billboard, and transits), non traditional media (such as T-shirt, Computer desktop kit, desktop wallpaper, plastic cup, poster, bike light and point of purchase materials), addressable media (direct mail, flyers, postcard, pamphlets and booklets) [19].

Kotler (2009) said promotion Strategy is a method used to convey the advantages and benefits of social product includes methods, messages, promoters, used promotional media channels. Here looked that the channel for VCT promotion still required an addressable media such flyer and non traditional media such poster, but for did not include mass channel like television, radio, transits, campaign in T-shirt, concert and others. More various or modifying campaigns to wider target, especially mother to child, youth, and public should be developed to reduce stigma to take VCT.

4. DISCUSSION

Researchers found the difficulty in obtaining data, they do not have a social marketing proposal VCT validated by Head of Puskesmas. They only have Plan of Action (POA) or annual work plans and monthly. However, PHC is not willing to give POA Annual administration due to storage constraints. According to Hong Cheng, Philip Kotler and Nancy Lee R. (2009) in the book for public health social marketing, social marketing planning public health program covers 10 steps, 1) describes the background, purpose and focus of the program, 2) situation analysis, 3) market segmentation, 4) objectives and targeted marketing, 5) identification of factors that influence behavior change, 6) positioning statement, 7) marketing mix, 8) planning monitoring and evaluation 9) budget planning, 10) implementation planning campaigns and management ending with social marketing proposal that was authorized and implemented by all health center staff. Ciputat HC just plan and implement it partially, It was not followed by all

health center staff. Ciputat HC missed in positioning statement and situation analysis in marketing mix (Product, Price, Place and Promotion)

The result above showed that there was a missing marketing mix in each aspect. Depend on client, product did not create awareness of VCT benefit and did not giving satisfaction as the core product of conseling and clear information of VCT as augmented product. Here we can learn that, it needs a shared understanding about VCT product goal to achieve the effectiveness of SM VCT. Theory said that the effectiveness of social marketing campaigns need to be considered at all five levels of effectiveness (Awareness, Engagement, Behaviour, Social Norm and Wellbeing) [22].

HC is required to transform themselves from bureaucratic mono polistic government into entrepreneurial government that oriented to 'customer-driven government, concerned with community needs, which emphasize the satisfactory service, if possible through excellent service. HC should focus on marketing concept than selling concept [1].

The needs of satisfactory health for consumers (the public) is synonymous with developing marketing concepts today, so that the inferior image of HC as like health services for the poor, slowly will be lost in the community [18].

From the price strategy above, we could underlying that although VCT was free, it needs a high cost in psychological aspect and time aspect. The problem of low interest of VCT may caused by psychological aspect related to perception of barrier because of stigma and discrimination. It is related to Ermarini (2013) reseach result, that factors associated with the utilization of VCT services in Banten was age, sex, type of key populations and reference, VCT knowledge, perceived of barrier and benefits of VCT, the support of NGOs and support health workers.

AIDS related stigmas create barriers to seeking VCT. These findings are consistent with research in South Africa, stigmas may therefore pose considerable barriers to seeking VCT in South Africa. Results showed that individuals who had not been tested for HIV held significantly greater AIDS related stigmas than individuals who had been tested. People who had not been tested were significantly more likely to agree that people with AIDS are dirty, should feel ashamed, and should feel guilty [9]. A social marketing program effective to promote VCT in China, it was designed to increase HIV testing uptake among Chinese Man Sex with Man (MSM) by removing some or all of the barriers to testing by instead emphasizing the benefits of HIV testing [25].

Even where HIV testing services are available, complex psychological, social and economic barriers prevent many individuals from learning their status (Hutchinson and Mahlalela, 2006; [7]).

Third was strategy of place. Those showed that Place for VCT in health care was discomfort place, because it join with other therapy, TB and methadone. It showed a dissatisfaction of place for public target, although there was a mobile visit for risk person.

The forth was promotion. It showed that no positioning statement for campaign, NGO just facilitate high risk population, unoptimal promotion by cadre or staff and less of modifying campaign. International research has shown the need for intensified promotions and campaigns around HIV testing to increase an access of a large proportion of people who do not know their HIV status or their risk [6]. Much work remains to be done to achieve the goal of universal access of HIV counseling and testing. Social marketing of VCT is a tool that should be used to expand demand for VCT services as well as ensure access to high quality service delivery .

While this result related to the majority of willingness barriers to use VCT services in China included, misunderstandings about HIV; low perceived risk and HIV prevalence; mistrust of the free VCT; and especially anxiety about the implications of possible test results [23].

The majority of quantitative studies have identified stigma and discrimination [9]; perceived low risk of HIV infection [15]; perceived lack of confidentiality [21]; and distance to testing sites [11] as barriers to uptake of HIV testing. Qualitative studies have also been conducted in Sub-Saharan Africa (SSA) that additionally highlighted social dynamics influencing uptake of HIV testing [13].

While Enabling factors of VCT, included perceived anonymity of testing [7]; convenience of home-based HIV testing [14], and availability of antiretroviral therapy (ART) [24].

According to Maulana (2009) success determinants of social marketing includes management, customers, target groups, identities, benefits, cost, availability, communication channels, monitoring and improvement, and evaluation. So, It needs a synergy of marketing mix and modification of campaign. The rationable of SM strategy is to more effectively delivery of messages to marketplace, and to apply the strenght of each communication techniques so that an optimal message impact is achieved [19].

5. CONCLUSIONS

Based on the results of research and discussion in the previous chapter, it can be concluded that low interest in using VCT service was related to an optimal SM strategy between Product, Price, Place and Promotion. The recommendation is Develop strategy of VCT to wider target involved by all staff to promote and giving information. Minimize stigma barriers by instead emphasizing benefit of VCT with modifying campaign, good positioning statement and situation analysis to reach goals of SM VCT. Devide the strategy by specific population like mother to-child and transmission, public.

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