Overview

The Nigerian Urban Reproductive Health Initiative (NURHI), funded by the Bill and Melinda Gates Foundation, is a five-year project (2009 – 2014) designed to increase the use of modern family planning methods among the urban poor in six cities: Abuja, Ibadan, Ilorin, Kaduna, Benin City, and Zaria. Nigeria is one of four countries implementing urban reproductive health initiatives; other countries are Kenya, Senegal, and India. NURHI is managed by the Johns Hopkins Bloomberg School of Public Health Center for Communication Programs (JHU•CCP) in partnership with the Center for Communication Programs Nigeria (CCPN) and the Association for Reproductive and Family Health (ARFH). This technical brief shares the step-by-step process NURHI followed to generate demand for modern family planning, and the long term family planning methods in particular, in four cities. For a comprehensive set of NURHI resources and tools, visit www.nurhitoolkit.org.

Introduction

The Nigerian Urban Reproductive Health Initiative (NURHI), funded by the Bill and Melinda Gates Foundation, is a five-year project (2009 – 2014) designed to increase the use of modern family planning methods among the urban poor in six cities: Abuja, Ibadan, Ilorin, Kaduna, Benin City, and Zaria. Nigeria is one of four countries implementing urban reproductive health initiatives; other countries are Kenya, Senegal, and India. NURHI is managed by the Johns Hopkins Bloomberg School of Public Health Center for Communication Programs (JHU•CCP) in partnership with the Center for Communication Programs Nigeria (CCPN) and the Association for Reproductive and Family Health (ARFH). This technical brief shares the step-by-step process NURHI followed to generate demand for modern family planning, and the long term family planning methods in particular, in four cities. For a comprehensive set of NURHI resources and tools, visit www.nurhitoolkit.org.

Nigeria had a thriving family planning program in the 1980’s and early 90’s. However, changes in donor priorities and funding caused a 15-year decline in promotion efforts, and trends in fertility, contraceptive use stagnated. In 2009, with contraceptive prevalence at only 10% and a total fertility rate of 5.7, there was a pressing need to reinvigorate family planning efforts at the national, state and city levels.

To generate demand for family planning services, NURHI’s ‘Get-It-Together’ campaign has three main approaches:

- A branded multi-channel campaign encompassing radio, TV Behavioral Change Communication (BCC) materials and social mobilization materials in each of the NURHI cities,

- A popular radio program with drama and live call-ins, tailored to each city’s context and predominant language.

- Community level family planning promotion
Nigerian Urban Reproductive Health Initiative

activities and referrals for family planning services by teams of youth urban social mobilizers.

The campaign was implemented in Abuja, Kaduna, Ilorin and Ibadan between 2010 and 2013. In 2013, NURHI expanded implementation to two new program cities, Benin and Zaria.

The Measurement Learning Evaluation (MLE) Baseline Assessment survey conducted after one year of the project implementation showed that 83% of men and women knew about the NURHI ‘Get it Together’ campaign and in all of the four cities, knowledge of where to get modern family planning methods increased, misconceptions reduced, and family planning use increased.

NURHI’s key demand generation partners are the Center for Communication Programs Nigeria (CCPN) and the African Radio Drama Association (ARDA).

Social Mobilization

‘Get it Together’ Youth Social Mobilization: from strategy design to implementation

The foundation of the NURHI Demand Generation Strategy is enhanced interpersonal communication about family planning: during clients/ service provider worker interactions; between spouses; and during association/trade groups meetings, neighbourhood campaigns and social events led by teams of NURHI social mobilizers. Social mobilization activities engage young men and women age 18 to 35 years as potential family planning clients, and who also mobilize other potential clients to use family planning services. This page describes the NURHI youth urban mobilization implementation process.

Step 1: Design Youth Urban Mobilization Strategy (YUM strategy)

This design was developed through a participatory workshop, the Youth Urban Mobilization Strategy, describes plans for community mobilization including criteria for Social Mobilizers selection, their roles and responsibilities, the activities they will conduct, how they will be supervised, the materials and job aids they will require, and how the strategy will be monitored.

Step 2: Identify and contract NGOs to manage social mobilization activities

The strategy calls for recruiting, training, and supervising social mobilizers in selected slum areas in the NURHI cities. NURHI site teams identified and selected non-governmental organizations (NGOs) working in the four initial cities that met the following criteria: must be a registered corporate body; must have experience working in family planning and/or other health related issues; must have a financial system in place; and must be domiciled in the specific city of engagement to oversee the activities of social mobilizers. The contract includes supervision and coordination of identified social mobilizers at the community level.

The roles of the social mobilizers are to promote the NURHI radio program; facilitate and attend radio listener discussion groups; conduct key life events celebrations; and refer potential clients to health facilities.

Step 3: Design, test, and produce social mobilization materials and tools

To design support materials for use by the social mobilizers, NURHI held a Media and Materials Development Workshop with program staff, stakeholders and graphic artists. The participants at the workshop designed and pretested prototype social mobilization materials, identified/coined local slang for songs and community events, identified equipment needs, developed “Go referral cards”, branded T-shirts, face caps, wrist bands, pens, shopping bags, hijabs, reflective jackets, beach umbrella, pins and badges. Other materials developed after the workshop were toolkits for NGOs, ‘Be Beautiful’, ‘Be Successful’ for women and men, and family planning method leaflets, GIT Stickers, and FAQ (show link and pictures of the highlighted). These materials are available in Yoruba and Hausa.

Guidelines were prepared for the social mobilizers activities. NURHI also prepared guidelines for social
mobilization activities. NURHI social mobilizers are responsible for knowledge and visibility parades, key life event celebration, radio listening group guidelines, and referrals for family planning services.

Step 4: Select, orient and train social mobilizers

Criteria for selecting social mobilizers were: The social mobilizer must live in urban slums; be an artisan (barbers, hair stylists, tailors or okada mechanic, and drivers); must be between the ages of 18 and 35 years of age; and be interested in volunteering to be a social mobilizer. The four NGOs conducted orientation for the selected Social Mobilizers. In training the social mobilizers, NURHI used an orientation guideline which includes basic family planning information, how to carry out social mobilization activities described above.

Step 5: Implement and monitor social mobilization activities

NURHI social mobilizers conduct the following activities:

Knowledge and Visibility parades: Social mobilizers organize parades at least once every two months, generally before and during family planning outreach services activities to get the community’s attention. Social Mobilizers sing, drum and dance wearing branded t-shirts and caps, perform dramas, use megaphones to talk about family planning, distribute leaflets, refer potential clients to services using the ‘Go referral Cards’.

Key Life Events: Social mobilizers celebrate key life events such as baby naming, wedding and graduation or freedom ceremonies with members of their communities. During these events, a family planning service provider is present to talk about family planning, entertain and answer questions, offer counselling and referrals during these ceremonies, framed photo of the baby, the newlyweds or the graduates is given. For more details refer to the NURHI Guidelines for Key Life Events.

Mobilization for Outreach Services: Each LGA has a monthly and quarterly outreach calendars that is shared with the NGOs. Two days before and during the outreaches, social mobilizers conduct visibility parades, neighbourhood campaigns, distribute flyers and refer potential clients to the outreach using ‘Go referral Cards’.

Radio listener’s groups: Social mobilizers organize radio listening groups in their localities who listen to the NURHI radio program and discuss family planning issues using a discussion guide. For more information about the radio program and listening groups, click here for more information about the radio listening group guidelines.

Monitoring and supervising Social Mobilizers: In collaboration with NURHI, NGOs monitor the activities of social mobilizers using a supervision checklist and through their monthly meetings. Based on the methodology in the NURHI Referral Manual in determining family planning uptake, the total number of referrals (i.e. potential clients that receive the ‘Go Card’) against completed referrals (i.e. clients that received FP services) is analysed.

"Get it Together” Campaign Implementation Process

In determining activities to generate massive demand for family planning, focus on branding of the communication initiative and flagship mass media campaigns were conducted both at the national and site specific levels. The overarching umbrella that all the branding and communication activities come under is called the Get-It-Together (GIT) campaign.

Step 1: Assessing the situation and communication resources

In assessing the family planning situation, NURHI used a number of methods: focus group discussions to gain a better understanding of family planning behavior and its determinants; a quantitative survey based on the (NURHI Baseline Household Survey which was implemented by Measurement Learning and Evaluation (MLE)), was used and other secondary analysis - the 2008 Nigerian Demographic and Health Survey (NDHS) and a Family Planning Social Mapping study to learn about community members’ attitudes toward family planning services and to identify points of entry for social mobilization activities.

Step 2: Analyze the situation and design a demand generation strategy

In 2010, NURHI held a participatory design workshop, with stakeholders from the four initial cities, NURHI
partners and a selected creative agency representative. The participants at this workshop analyzed the various research findings and then drafted the demand generation strategy. The strategy was reviewed, finalized and adopted. The demand strategy links closely with NURHI service delivery, advocacy, and public-private partnership activities. Through a branded media campaign, NURHI directs individuals and couples to family planning services; social mobilizers talk with community members about family planning and refer them for services; the enter-educate radio drama magazine program features satisfied users discussing family planning, modeling FP use and promoting services. To improve family planning counseling, NURHI provided counseling job aids and client materials.

**Step 3: Design & test materials and interventions**

‘Get it Together’ Mass Media Campaign: NURHI worked with an advertising agency Touchstone to design and place campaign media materials. NURHI put together a creative brief that guided the agency to focus on developing a program for 15 – 45 year old women and 20 – 50 year old men living in slums. The agency created concepts for a campaign ‘brand’ that NURHI reviewed and pretested with audience representatives. “Get it together” and a puzzle logo were selected along with the tagline “Know, Talk, Go”, meaning know about family planning, talk with your partner about family planning and go for family planning services. NURHI worked with the agency to design, pretest and produce the “Get it Together” radio and television spots, printed and branded materials.

‘Get it Together’ Entertainment Education Radio Programs: NURHI and partner ARDA designed, pretested and produced a three season 5 separate city-based 26-episode weekly radio program with drama, magazine elements and live call-in. To develop the radio programs workshops were held to develop the design document and write stories and treatments. Click here for more information about the radio design process.

‘Get it Together’ Youth Urban Mobilization: NURHI worked closely with its partner Centre for Communication Program Nigeria (CCPN) to develop and implement a ‘Get it Together’ Youth Urban Mobilization Strategy, that engages young community based barbers, tailors, hairdressers and motorcycle delivery people to discuss family planning with individuals and groups within their communities. Click here for more information about the Youth Urban Mobilization Strategy.

**Step 4: Implement and monitor the campaign**

NURHI launched the ‘Get It Together’ campaign in October 2011 in four cities, with television and radio spots, posters in markets, clinics, airports, motor parks, and office buildings. FP Providers were given branded job aids, badges, site identifiers, biros, flipcharts and leaflets. Social Mobilizers also received branded and printed. In early 2012, CCPN and its partner NGOs trained Social Mobilizers to facilitate radio listening groups, conduct “visibility parades”, key life events, and neighborhood campaigns and refer clients to FPPN services with “Go Referral Cards”. Click here for more information about Social Mobilizers and their activities.

In February 2012, the four NURHI radio programs began weekly broadcasts. Each language program includes a serial drama episode, interviews, music and a weekly quiz plus a live call-in session with a family planning expert. Listeners can win prizes by answering weekly questions through text messaging. Click here for more information about the NURHI radio program.

In each city, NURHI employs an Advocacy and Behavior Change (ABC) Officer who monitors and coordinates mass media radio program and social mobilization activities through regular meetings with partners, radio program monitoring, and tracking referrals by social mobilizers for family planning services. Click here for more information on the activities of NURHI social mobilizers.

**Step 5: Evaluate and Re-plan**

MLE is tasked with conducting the baseline, midterm and final evaluation surveys. Their surveys will measure exposure to the ‘Get it together’ mass media, radio program, and social mobilization activities, knowledge and attitudes toward family planning, as well as contraceptive use. Through this analysis, it is possible to compare people who have
been exposed to the ‘Get it Together’ campaign with those who have not to see if they differ on key behaviors and attitudes.

NURHI Midterm Survey Results (show the link here) showed there have been substantial increases of 3% to 15% in contraceptive prevalence rates (CPR) in the four initial cities between baseline and midterm, a period of less than two years. The data also revealed that the proportion of women who intend to use family planning increased by 7.5 to 10.2 percentage points. After a review of midterm results, activities of the program was reviewed and refined based on the data.

Radio Drama

The NURHI Entertainment-Education Radio Program: Step by Step Implementation from formative research to broadcast

NURHI in collaboration with its partner Association of Radio Drama Artist (ARDA) decided to produce weekly radio programs for each of the four cities that include entertaining hosts, drama, songs, experts, quizzes, vox pops, user testimonials and live call-in sessions.

Step 1: Design the radio program

NURHI and African Radio Drama Association (ARDA) developed the program in two stages; the design workshop and the story-writing workshop. The radio design workshop participants included NURHI staff, family planning experts, stakeholders, writers and community members from the four initial cities. Based on formative research, participants agreed on the audiences, format, objectives, messages, and promotional strategy for the overall program with specific objectives and messages for each weekly episode. There was one design document for all four-site specific radio programs. Click here to view the Radio Design Document.

Step 2: Produce radio program drama and magazine elements with live call-in and design support materials

After the drama and magazine scripts were finalized, ARDA produced the radio drama and magazine elements based on the design document. NURHI developed call-in program host guidelines for the live call-in portion and oriented the family planning experts and on air personality who would appear on the program to talk on how to deal with difficult callers, and familiarize them with the content outlines for each program.

A listener discussion guideline (click here for the radio listening group guidelines) was developed to help Social Mobilizers facilitate listening groups in their localities. One month before the radio program began broadcasts, NURHI oriented the NGOs supporting social mobilizers on how to use to the guidelines.

Step 3: Broadcast and promote programs and review feedback

In February 2012, NURHI’s 26-episode radio magazine drama (season 1) was launched in all four cities, each program tailored to the needs of the city. During these months, the program did not feature a live call-in segment. Due to popular request, NURHI integrated a live call-in during the second phase, which was broadcasted from September 2012 to February 2013.

NURHI and CCPN promoted the radio programs through radio spots, one page flyers, city-specific Facebook pages, weekly bulk SMS reminders to over
250,000 people, and during all social mobilization activities. During each radio program, listeners can text in answers to quiz questions. The announcer reads the winners’ names and the NGOs gives the winner a prize pack which may include a ‘Get it Together’ t-shirts, caps, brochures, shopping bags, beach umbrellas and other items.

CCPN established listener groups in slum areas to listen to and discuss issues raised on the program. Social mobilizers received radios, batteries and discussion guides, and were trained to set up and facilitate listening group discussions.

NURHI Advocacy and Behavior Change Officers in each city listen to the program every week, to ensure it is broadcast on schedule, and to record the questions and comments from listeners calling in or sending SMS the programs. In addition, social mobilizers who facilitated listening groups tear out the page of discussion questions each week, adding feedback from the listeners, and submitted to NURHI.

Step 4: Review, evaluate and redesign subsequent phases of radio program

NURHI provided feedback to ARDA on a regular basis. Also, NURHI held periodic review meetings and provided feedback to ARDA on a regular basis.

NURHI evaluated the reach and effects of the radio program through the MLE surveys. Based on midterm findings Benin City (capital of Edo State) a NURHI replication city started off in 2013. Consequently, a refined radio program was designed with the Phase III Radio Programs. The Benin radio program design was heavier in content and storyline than the initial phase II design document. Key findings and directions from the midterm survey including reinforcing all ideational factors for family planning (knowledge, personal advocacy, approval from government officials and religious leaders talking about FP; and family size preference) and focusing on – Beliefs/Attitudes (addressing side effects, myths and misconceptions); spousal discussion of FP; perceived peer FP use; perceived peer support for FP and perceived self efficacy. The next radio program phase emphasized spousal communication, feature satisfied users, model peer support for FP and strategically addressed misconceptions. Also, the call-in time was extended.