NURHI
Nigerian Urban Reproductive Health Initiative

PHASE II RADIO DESIGN DOCUMENT

Family Planning- A WAY OF LIFE

A Radio Serial Drama/Magazine and Live Phone/text in for urban men and women desiring quality life
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1. **ACRONYMS AND ABBREVIATIONS**

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<tr>
<td>ARDA</td>
<td>African Radio Drama Association</td>
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<tr>
<td>ARFH</td>
<td>Association for Reproductive and Family Health</td>
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<td>CBS</td>
<td>Child Birth Spacing</td>
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<tr>
<td>CCP/N</td>
<td>Center for Communication Programs/Nigeria</td>
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<td>CDC</td>
<td>Community Development Council</td>
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<td>CHEW</td>
<td>Community Health Extension Worker</td>
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<tr>
<td>CPR</td>
<td>Contraceptive Prevalence Rate</td>
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<td>DHS</td>
<td>Demographic Health Survey</td>
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<td>ECWA</td>
<td>Evangelical Churches of West Africa</td>
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<td>FCT</td>
<td>Federal Capital Territory</td>
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<td>FGBMFI</td>
<td>Full Gospel Business Men’s Fellowship</td>
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<tr>
<td>FGDs</td>
<td>Focus Group Discussions</td>
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<td>FMOH</td>
<td>Federal Ministry of Health</td>
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<td>FOMWAN</td>
<td>Federation of Muslim Women’s Associations of Nigeria</td>
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<td>FP</td>
<td>Family Planning</td>
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<td>FPPN</td>
<td>Family Planning Provider Network</td>
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<tr>
<td>IUD</td>
<td>Intra-uterine Device</td>
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<tr>
<td>JHU/CCP</td>
<td>Johns Hopkins Bloomberg School of Public Health/Center for Communication Programs</td>
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<tr>
<td>KAP</td>
<td>Knowledge Attitude and Practice</td>
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<tr>
<td>KW/ST</td>
<td>Kwara State</td>
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<td>LGA</td>
<td>Local Government Area</td>
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<td>MOH</td>
<td>Ministry of Health</td>
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<td>NASFAT</td>
<td>Nasrul-Lahi-L-Fatih Society of Nigeria</td>
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<td>NAWOJ</td>
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<td>NCWS</td>
<td>National Council for Women’s Societies</td>
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<td>NDHS</td>
<td>National Demographic Health Survey</td>
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<td>NURHI</td>
<td>Nigerian Urban Reproductive Health Initiative</td>
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<td>NYSC</td>
<td>National Youth Service Corps</td>
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<td>PPFN</td>
<td>Planned Parenthood for Nigeria</td>
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<tr>
<td>SMS</td>
<td>Short messaging system</td>
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<td>STD</td>
<td>Sexually Transmitted Disease</td>
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<td>TBA</td>
<td>Traditional Birth Attendant</td>
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<td>TFR</td>
<td>Total Fertility Rate</td>
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3. DESIGN DOCUMENT WORKSHOP PHOTOS

4. RATIONALE/JUSTIFICATION FOR THE PROGRAM
Although rich in natural resources, Nigeria has some of the poorest health indicators in the world particularly in the area of maternal and child health. Family planning and contraceptive use have long been associated with reduced maternal mortality by reducing women’s exposure to pregnancies that could result in morbidities or death. Nigeria’s contraceptive prevalence rate of 10% (NDHS 2008) for modern methods has remained stagnant over the past 20 years. Likewise, the total fertility rate (TFR) has been hovering around 5.7 (NDHS 2008). Currently, intention to use contraceptives averages about 28% in the NURHI selected cities.

More than half of Nigeria’s population lives in cities and about 66% of these live slums. There is a high need for FP among urban women who are of reproductive age: 60% of urban women already have a need for FP whilst
statistical analysis of “current (FP) use” and “need for FP” suggests that about 60% of that need for FP is currently unmet.

One major issue facing family planning use in Nigeria has been the high level of method discontinuation as displayed by statistical analysis of the usage data. About 50% of women who have tried a modern method are no longer using it. Many contraceptive users (about 60%) don’t use the method for a longer period of time than their initial treatment,

Commitment among public health and reproductive health professionals and organizations runs deep. Private sector (NGO, faith-based, and for-profit) service delivery capacity is extensive and most Nigerians already access some form of health care from them. In spite of this, the use of modern contraceptives for family planning has remained low. Worthy of note however, is that exposure to mass media messaging on family planning has been shown to be a strong predictor of modern contraceptive use and intention to use contraception.

The Nigeria Urban Reproductive Health Initiative (NURHI) is a five-year project (2009-2014) to reduce barriers to family planning/child spacing use and increase the modern contraceptive prevalence rate in the six Nigerian cities of Abuja, Benin, Ibadan, Ilorin, Kaduna and Zaria. The program has been multi-phased. While the first phase was focused on only four cities: Abuja, Ibadan, Ilorin and Kaduna, this second phase will expand the program to Zaria and Benin. The NURHI project team is made up of four key partners: the Johns Hopkins University Bloomberg School of Public Health Center for Communication Programs (CCP), the Association for Reproductive and Family Health (ARFH) and the Center for Communication Programs Nigeria (CCPN).

A key NURHI strategic approach is to “develop interventions for creating demand for and sustaining use of modern contraceptives among marginalized urban populations.” Project activities are intended to empower consumers to consistently use modern family planning methods by capitalizing on key life events (‘freedom’ graduation, marriage, naming ceremonies and Christmas/Eid) as natural opportunities for discussion and adoption of family planning. Specifically, NURHI demand creation activities will:

- Foster dialogue around family planning – in the home between partners, on the street, at work, in the media
- Increase understanding, appreciation and social approval for family planning
- Reinforce existing modern contraceptive use and reduce discontinuation
- Improve knowledge/ perceptions of family planning methods and the fertility cycle
- Position FP as a natural part of life
- Radio will be a critical medium for NURHI demand creation activities. We envision that the radio program will promote and reinforce other NURHI demand creation activities and that the other activities will provide feedback to the radio program. (See section ## of this report for details of how the NURHI radio program interacts with other activities.

Key Findings from DHS secondary analysis and Focus Group Discussions include:

- Both ideal or desired family size and knowledge of modern FP methods are important factors influencing the need for and use of FP among urban women in Nigeria.
- Gender preference of children and religion are not driving influences on family planning use.
- Regional influences are more powerful than religious in determining a women’s ideal family size, participation in household decision-making and knowledge of FP methods.
- Family planning in Nigeria is framed by fear and mistrust that needs to be changed first.
• Women and men have a number of misconceptions about family planning and some methods in particular. The fear of negative health impact proves to often be a serious barrier in considering family planning.

• Burden of FP use is on the woman. Once the woman has the information and is convinced, she still has to convince her husband/partner about family planning. It was unanimously felt that if family planning is adopted without the husband’s knowledge/approval, there would be suspicion of infidelity, etc. if the woman was discovered.

• Concerns with having many children center on greater responsibility for the man and the burden it creates for him. As a result it was felt, that he ages prematurely. Nowhere was the health of the mother mentioned as a concern.

• Religious leaders wield great influence over decision making in such matters.

• Often when parents are unable to take care of their numerous children, their siblings (of the parents) become responsible.

• FP is seen as not easy to use and highly ‘medicalized’. Only doctors can prescribe or tell you what method is good for you.

• Family planning is considered to be very risky compared to other risks related to pregnancy, abortion, and miscarriage. Sterilization and IUDs are considered especially risky. Modern FP methods are seen as riskier than the risks related to child bearing such as having a child before the age of 18, having closely spaced births, or having more than 6 children. Natural FP methods were seen as less risky in comparison to modern methods.

• However respondents also agreed that one of the primary benefits of having a smaller family was the ability for children to get a better education.

5. JUSTIFICATION FOR RADIO AS THE CHOSEN MEDIUM

Radio is the most common and pervasive medium of receiving information in Nigeria today apart from interpersonal communication. Radio has the capacity to reach a wide audience because it is relatively affordable, accessible, easy to use, and available in a variety of languages and does not require literacy. Almost everybody in urban centres, including those in the slums either owns or has easy access to one. They are portable so people can have access to radio broadcasts on the go, wherever they are, whilst going about their normal everyday business. Cell phones, which have enjoyed constantly increasing reach across most socioeconomic levels, often have radios in-built, contributing to increasing access to radio communication. Currently, radio has about a 60% primetime listenership and over 60% of Nigerians own a radio (DHS) not inclusive of radio-enabled mobile phones.

Radio enjoys a high level of credibility in Nigeria; with most Nigerians believing that information heard on radio is factual. It allows for a variety of communication programming formats and several opportunities for social marketing of family planning messages. Although high exposure to radio communication can mean it can become background noise, and radio messages can be fleeting with listeners unable to rewind to hear something again, radio communication still remains the best choice for target audiences to be entertained, educated and motivated to adopt FP.
6. **AUDIENCES**

**Primary**
- Women – urban, married/unmarried, sexually active, low to medium education and income (18-35)

**Secondary**
- Men – urban, sexually active, married/unmarried, low to medium education and income (25-50)
- Couples
- Older women
- Religious leaders (in immediate environment)

**Tertiary**
- Service providers, Family Planning Provider Network (FPPN), Community members, Aunty’s, other religious leaders etc.

Key desired behaviors for each of the audiences, the barriers to audience members are as follows:

**Primary Audience - Women**

*Overall desired behaviors.*

After listening to the radio program, young women will:
- Believe that using FP is a normal life decision that can help with the challenge of managing life and family
- Have the correct information about FP methods that can be used to delay pregnancy.
- Speak about FP with their partners
- Desire to plan arrival of children
- Be able to appropriately weigh risk of FP use as against other every day risks
- Know a place where they can comfortably and confidently access FP services
- Use modern FP methods to avoid unwanted pregnancy and abortion
- Be willing to share accurate knowledge on safety of FP with their peers
- Speak comfortably about Family Planning with their parents, friends and siblings

**Barriers**
- Lack of communication with partner about FP
- Incomplete knowledge about correct usage, mistrust of product safety and efficacy
- Spouses disposition to FP
- Young women may not know someone who is a satisfied user, unfamiliarity breeds fear
- Expectations from In-laws
- Misconceptions about FP providers (that the doctor is the only person who can dispense FP) Unaware of location of FP services
- Lack of social support for family planning
- Shyness about discussing FP
- Fear of being shunned or accused of cheating if raise FP with spouse

**Facilitators – people and facilitating factors**
- Peers
- Religious/ Traditional leaders
- Friendly partners, In- Laws.
- Desire for better life for family and children
- Perception that child spacing can improve a woman’s life
SECONDARY AUDIENCE

Young Men

Desired Behaviour
- Young men will believe that using FP is a normal life decision that will help with the challenges of family and children
- Desire to plan arrival of children
- Young men will believe that they have a responsibility to use FP
- Young men will speak with or initiate discussion about FP with their partners
- Young men will use FP or actively support their partners’ use of FP to avoid unwanted pregnancy and/or abortion
- Young men will initiate knowledgeable discussion about FP with their peers
- Young men will use condoms to prevent unwanted pregnancies and/or STDs, including HIV/AIDS

Barriers
- Not a fashionable subject for discussion among young men, so there is no approval or sharing of knowledge to make it a way of life
- Many young men look forward to having many children because it is a thing of pride
- Catholics and Muslims generally believe that using any modern FP method is a sin – Except natural methods
- Inadequate information about FP
- Lack of communication with partner about FP

Facilitators—people and facilitating factors
- Planning the family can mean improved education prospects and a brighter future for a couple’s children
- Planning the family can reduce pressure on a man
- Religious leaders, friends/peers have a big influence over men
- Pride in being provider for a successful family

Couples

Desired Behaviour
After listening to the radio programme, couples will:
- Believe there is a safe and modern contraceptive method available to them that fits their life style, personal needs and aspirations for the future
- Believe that using FP is a normal life decision
- Be able to appropriately contextualize risk of FP use as against other everyday risks
- Take action by visiting a FP facility and/or adopting a modern FP method for spacing or limiting purposes
- Stop using family planning for less than two years between pregnancies
- Consider cost for FP an important household expenditure. OR build the expense of FP into their household budget
- Openly discuss their family planning needs
**Barriers**

- Financial barriers such as failure to plan for purchase of family planning commodities
- Rumours and misconceptions about modern family planning methods stemming from incomplete knowledge about correct usage, mistrust of product safety and efficacy
- Unreliable sources of information
- Lack of mutual understanding between couples
- Concerns about identifying methods most convenient to couples’ lifestyles
- Not enough encouragement, awareness or promotion.

**Facilitators**

- Neighbours
- Aunties
- In-Laws
- Health workers
- Religious

**Older Women**

*Desired Behaviour*

- Older women will have correct information about FP to methods to give appropriate counseling to younger women/men
- Older women have positive influence on the in-laws in the use of FP
- Sexually-active older women will have the correct information about FP methods that can be used to delay and/or space pregnancy
- Sexually-active older women will be able to appropriately contextualize risk of FP use as against other every day risks
- Sexually-active older women will know a place where they can comfortably and confidently access family planning services
- Sexually-active older women will use modern FP methods to avoid unwanted pregnancy and abortion.

**Barriers**

- Undesirable side effects from past experience such as excessive bleeding, delayed menstruation and weight gain
- Misconceptions/myths about modern FP use like fibroid, infertility, cancer etc.
- Peer influence through bad undesirable past experience sharing
- Religion and culture that do not support for use
- Lack of proper knowledge of FP
- Male partner’s disapproval of modern FP

**Facilitators**

- Male partner’s approval of FP
- Positive peer group influence
- Positive community/religious leaders influence
- Older women’s children who are informed and using the FP methods
7. **OVERALL MEASURABLE OBJECTIVE**

After listening to NURHI program the audience will:

- Have correct information about family planning
- Know where to access family planning services
- Talk positively and freely about family planning and methods at the household (especially with partner) and community level with peers
- Both women and men take responsibility for FP
- Believe FP is a normal life decision that everyone makes
- Approve of FP and believe others in the community do too
- Have overall positive perception of FP methods

8. **OVERALL PURPOSE**

The overall purpose of the programme is the following:

- To educate the audience on benefits of FP
- To motivate wider acceptance of FP as a normal way of life
- To demonstrate couples making Family Planning a part of their life
- To promote friendly service providers besides doctors
- To demonstrate wider acceptance of FP

9. **OVERALL MESSAGE**

The overall message of the NURHI program is that planning your family can help you and your family members achieve a brighter future.

*Definition*

**Family Planning** is when a couple decides when and at what intervals they want to have children.

*Key Messages*

- Make Family Planning a regular part of your life
- FP is good, effective, safe, and acceptable
- Correct people use FP
- FP gives quality life
- Helps the family manage its available resources so the children can grow healthy and be educated well
- Helps the father, mother and child to stay healthy

10. **OVERALL EMOTION**

The overall emotion to be conveyed by the programme should be:

- Love for children and family
- Love and understanding between couples
- Pride
- Hope
- Young people ambitious for a better future for themselves and their family. Perhaps that this younger generation is doing something new, fashionable and smart by planning and making well thought out decisions about their futures.

11. **OVERALL SETTING - BENIN UPDATE**

Note that this will be the same setting as Phase one for the four primary cities as found in Section 19. ARDA will add in setting information about Benin
12. NUMBERS AND DURATION OF EACH EPISODE

Four of the programs will be 26 episodes at 45 minutes per episode. (FCT, Ibadan, Ilorin and Kaduna/Zaria)

The program for Benin will be 26 episodes at 30 minutes per episode only.

13. FORMAT

The plan is to develop five 26-episode programs with a serial drama and localized magazine elements. As mentioned above four of the programs will have both a 30-minute magazine element and a 15-minute live section. The fifth program for Benin will be a 30-minute magazine program with drama, but no live section. The Benin Magazine format will be clarified at the Treatment workshop in August 2012 and this document will be revised at that time.

As per agreement in the workshop, all four-city groups (FCT, Ilorin, Ibadan and Kaduna/Zaria), all four of the magazine will follow the same basic format. The format schedules, below are quite packed to keep the program fast paced and upbeat. The magazine elements to flank the drama with voices from our listening audience. ARDA will use the same Drama that was used in the first phase in this second phase, but the rest of the magazine will be new, plus the exciting new live portion.

This program is more about social values and social opinion than about medical opinion – so the magazine elements will use community voices more than medical experts and refer listeners to seek counseling.

The broadcast for Abuja will be in Pidgin language and for Kaduna/Zaria it will be in Hausa and for Ilorin and Ibadan it will be in Yoruba.

1. Sig tune, friendly host, (1 minute 30 seconds)
2. Vox pop (1 minute)
3. Serial drama (13 minutes)
4. Music (twice if possible)
5. NURHI Promo Spot
6. ‘Our Real Stories’ (3 minutes)
7. Quiz and Closing. (1 minute 30 seconds)
8. Transition to Live Phone/Text in
9. Live Phone/Text in Two hosts – one male and one female, one radio personality and one health service provider. The live section hosts should be the SAME every week in order to build trust.
   1. live host brief blurb on issue
   2. takes calls and texts
   3. tells answer to previous quiz, announces winners, shares new quiz
   4. Periodically there may be announcements about events (Like if Marie stopes is holding a special FP clinic, YUM events, mobilizer of the month or other.
   5. Closing
Brief description of each format element

**Sig Tune and Friendly Hosts** – Use the same sig tune as in Phase I. Also, please use the same hosts except for in FCT where a host needs to be changed. And the Host(s) must come across as friendly, funny, trustworthy, knowledgeable, etc. The sig tune and host voice will be part of the pretest. At the design document workshop the group approved the overall character and storyline for the hosts for Phase II.

**Vox Pop** – The questions for the vox pop should be provocative, edgy and controversial. They would be linked to the topic of the day. These should be short comments and not more than 3. Consider using the vox pop question developed for Kaduna for the other cities.

**Serial Drama** – Same as Phase I drama for all but Benin.

**Music Program** The music must be what’s popular with our intended audience (a bit edgy and hip) and we need to be sure that the lyrics are appropriate for the program.

**NURHI Promo spot** – This 60-second spot has already been produced. Please check with the city team to find out which one to air within the program (as there are 3 developed per city).

‘Our Real Stories’ or ‘My Story’ – ARDA will use the testimonials provided by CCPN/NURHI as a basis for testimonials. Many of the episodes have been matched with what may be appropriate testimonials in the workshop. Fortunately, also the quality of the audio collected by CCPN consultants seems to have been adequate for using in the ‘real story’ section. ARDA will use the testimonials if possible, but if there is a problem, ARDA can rerecord the testimonial using professionals. What is important is to get a touching testimonial about the issue.

**Quiz** - The questions will be about the content or the characters in the episode. The quiz will be announced during the live portion using the same phone numbers. Please note that the number of prizes will likely be changing.

### 14. NOTE TO THE WRITER AND SCRIPT REVIEW TEAM

**Thoughts for the writer:**

- More links with overall campaign –NURHI is going into a phase II of the ‘get it together’ campaign that encourages young people to use the resources they have and put the puzzle pieces of their life together for a brighter future. The campaign theme is ‘Know about family planning, Talk with your partner, and Go for Family Planning services. The phase II campaign includes TV, Radio Spots and Billboards as well as a number of campaign materials such as shopping bags, pens, badges, wrist bands, posters, danglers, beach umbrellas, site identifiers, bumper stickers. Would be great if these were mentioned in the course of discussing other program aspects.

- The ‘Get it Together’ Campaign should be mentioned at the opening and closing of each program.

- Please ensure that the phone numbers for the quiz are read slowly and mentioned twice for each episode.

- Please include a radio spot from the ‘Get It Together’ campaign in every episode.
In this Phase II we want to make sure that the program is speaking to both married AND unmarried young people. So, we have replaced husband and wife with more broad terms of couple or partner or man and woman. Please try to ensure that the program also reaches out to those who are not married yet but in a culturally sensitive way.

Please keep this program with an urban feel and energy, colourful characters, use humour.

Though this document refers to the term ‘Family Planning’, please use the terms Child Birth Spacing in Kaduna to be culturally sensitive.

Please continue to show some of the ‘slice of life’ in the program that ‘normalize’ the concept of family planning by demonstrating how that concept can be discussed or acted on during regular events – like ‘freedom’ graduations, weddings, baby namings, Christmas/Eid. Another aspect of ‘slice of life’ is to have characters in different life stages and realistically show what they’re thinking and going through. For example, someone who is unmarried sees FP very differently to someone who is married – and that we need to keep these ‘life stages’ in mind.

NURHI is promoting integration of services – that is, that someone may go to the health services for questions about breastfeeding or child immunization – get more information on FP at the same time.

When it comes to the magazine elements, we trust that your team will be provocative, ‘edgy’ and getting audience real reactions to spark discussion.

We want to promote clients to use services from a new network called the Family Planning Provider Network (FPPN). We want clients to know how to find quality care by accessing clinics or pharmacists with the logo, but we do not need the audience to know what ‘FPPN’ itself means. But, so you understand, it is a new network of FP service providers including clinical facilities and PHCs and nonclinical facilities such as pharmacists and patent medicine vendors who have been trained to provide quality services. Big square signs that say ‘Family Planning services available here’ and there is the puzzle piece logo can recognize the FPPN members. There are also round danglers that say ‘Ask Me about Family Planning’ on one side and ‘Family Planning Available here’ on the other side with the puzzle piece logo and ‘get it together’ tagline.

Thoughts for the Script review team

We must increase promotion for the two weeks before Phase II and during the program because we want to increase listenership and because the times for the radio programs will be changing in 3 out of four cities. Also, Benin will be a new city.

The two weeks before the Phase II launch is an opportunity to do a press release. It is really our only opportunity of Phase II because it is the only part that would be considered ‘newsworthy’ enough to be covered in the media. If GIT campaign is launching at the same time, opportunity to do a press release for both. Also, would be nice if the DEVCOMS supported this effort.

A NURHI Staff member must be at all live call in recordings in each city. This will be covered by the NURHI site office budget.
The host that is a health service provider will be paid transport and refreshments by the NURHI office. Also if there is a guest to the live call in such as an in law, this would come from NURHI side.

It is expected that the NURHI representative on site for recording will send a one-page report (format will be provided) detailing what transpired to the DG with a cc: to CCPN and ARDA. This feedback is an important mechanism for us to be able to respond to audience needs and questions. The live call in portion affords us this opportunity, but we must use it to be responsive.

It is a policy that NURHI will respond to every question via text or phone that is sent into the radio program. This will be the ABCD officer’s responsibility. Either they answer the question themselves or get someone else to respond. Also, please keep track of the number of responses and the content of the questions – so that can feed into either the live call in or the design for Phase III.

15. TOPIC SEQUENCE

The following is the proposed topic sequence for the 26 episodes:

1. Introduction (no message)
2. Couple Communication: Communication Strengthens a Relationship
3. What is FP
4. Benefits of FP in General
5. Modern FP is Safe
6. Benefit of FP on Quality of Children’s Education
7. Role of Men and Women in FP
8. FP Provider is Friendly
9. Family Planning Improves A Woman’s Life and Saves Lives
10. Community and Religious Leaders
11. Couple Communication: Discussion of When to Have Children and Spacing
12. FP Method: General
13. FP Service: Infertility Management
15. How Male Partners Can Support FP
16. FP Methods: Male and Female Condoms
17. Couple Communication: How to Discuss FP with Your Partner
18. FP Methods: Injectables
19. FP Methods: Tablets (Pills) and Implants
20. How In-laws Can Support FP
21. Couple Communication: Discuss FP Before and After Marriage
22. FP and Cost
23. FP Method: IUD – the ‘Loop’ or ‘Coil’
24. Sticking with FP
25. How Friends and Community Can Support FP
26. FP is a Normal Life Decision
16. SPECIFIC CONTENT FOR EACH EPISODE

EPISODE 1: Topic: Introduction
MEASURABLE OBJECTIVES: After listening to this episode, the intended audience will:

**KNOW:**
- The time and station for listening to the radio program
- The names of the characters in the program

**FEEL:**
- Interested and excited to listen to the radio program

**DO:**
- Tell family and friends to listen to the program including the time and station

**PURPOSE:**
- To motivate audiences to listen to the program regularly

**CONTENT:**
Story
This radio program is a part of the ‘Get it together’ campaign of NURHI which gives information about FP and help people know about modern FP methods, where to access FP in their communities. The Get it together’ program has engaged religious and opinion leaders, service providers and users to speak on radio and TV, newspapers and community events at Churches and in mosques in support of FP. You can also find out the facts on FP from the ‘Get it together’ campaign materials as the Billboards, beach umbrellas, leaflets and the new Frequently Asked Questions (FAQS) available with the Social Mobilizers and at FP Service centres.

Include the days, time and listening station of the program.

If there is any quiz or other interactive activity, explain to the audience how it will work.

Explain about the exciting format of the second phase to include a live call in portion and that we are re-airing the drama due to popular demand.

**SIMPLE DOABLE ACTION:**
Tell family and friends about the radio program

**LIVE CHAT**
**TALKING POINTS**
- Talk about the characters in the first episode.
- Explain that the exciting format of the second phase includes a live call in portion and that we are re-airing the drama due to popular demand.

**PROVOCATIVE QUESTIONS**
- Are you comfortable telling your partner or friends to listen to family planning Radio program?
- Is there anything you’d like to know but never could ask about family planning?
- How can a Radio program about family planning help you?
EPISODE 2: Topic: Couple Communication: Communication Strengthens a Relationship

MEASURABLE OBJECTIVES: After listening to the episode, the audience will:

KNOW
- How improved communication between couples can strengthen a relationship by increasing the love and trust

FEEL
- Confident that speaking more openly and often with your partner can improve a relationship
- Pride that you are a person who opens or has conversations with your partner that will help continue a good relationship or improve your relationship

DO
- Talk to partner more frequently

PURPOSE
- To educate that improved communication between partners is positive for a relationship
- To motivate audience members to talk to their partners

WHY IS THIS AN ISSUE?
This is an issue because especially young couples don’t discuss issues with each other. Women talk to woman and men talk to men. Socially they don’t get a chance to observe couples having conversations. Many couples don’t discuss issues with each other perhaps because they are worried about the other person’s potential negative reaction. Sometimes they simply don’t know how to start the conversation. This episode is about general couple communication (not directly in terms of FP).

CONTENT:
Open communication means talking honestly and freely about everything having to do with a couple, what you want to do, where you will go, what you’ll eat, your ambitions for yourself or your children, decisions about money, health, housing, school, clothes, job, family, relationships with others, religion, etc. A couple who makes decisions about these issues together will have a stronger relationship. (Note: this episode is about communicating with your partner in general and not about FP)

How open communication between couples improves your relationship:
- Helps to understand what the other person is thinking or their desires – and when these are better understood there will be increased love, trust and self esteem among partners.
- Two can do more than one. If a couple is united in their ambitions for their family and children, they can achieve more
- Frequent communication between couples avoids misunderstandings

Tips on how to talk to your partner
- Start with non-controversial issues and after trust and openness is established, then tackle the more challenging issues.
- Practice what you will say
- Ask questions and invite the other person to share how they feel
- Listen carefully to answers
- Show interest in the other person’s point of view
- Appreciate the other person for discussing, listening, sharing opinions
SIMPLE DOABLE ACTION:
Write down three questions you’d like to ask your partner (or friend if you don’t have a partner)

LIVE CHAT TALKING POINTS

- Open communication between a couple helps them to understand what the other person is thinking or their desires – and when this is better understood there will be increased love, understanding, trust and self esteem between them.
- Couples should be able to talk about anything openly and freely. Ie. about what you want to do, where you will go, what you’ll eat, your ambitions for yourself or your children, decisions about money, food, health, housing, school, clothes, job, family, sex, relationships, religion, etc

PROVOCATIVE QUESTION

- What are some of the things you wish you could talk to your partner about, but feel like you can’t?
- In what ways can you improve communication with your partner?
EPISODE 3
Topic: What is Family Planning?

MEASURABLE OBJECTIVES: After listening to the episode, the audience will:

KNOW
- What family planning is
- What ‘quality of life’ means and how FP can contribute to better quality of life
- Where to access information about FP

FEEL
- **HOPE**: that using the knowledge on family planning can give you a better quality of life
- **PRIDE**: for being someone who knows how family planning to lead to better quality of life

DO
- Speak freely on what family planning is

PURPOSE
- **To educate** about the basic facts of what family planning is
- **To motivate** audience members to talk about what family planning is

WHY IS THIS AN ISSUE?
Family Planning has a negative reputation among many Nigerians. Many have the misconception that Family Planning is all about reducing your number of children and using risky medical interventions that cause major complications in women such as infertility. They see FP as ‘against religion and culture’ and also that FP is not a normal life decision. Traditional methods have been used for a long time so why change to modern.

CONTENT:
**NOTE:** Though this document refers to the term ‘Family Planning’, please use the terms Child Birth Spacing in Kaduna to be culturally sensitive.

What family planning is:
- FP is a way of life; it is a decision taken by an individual or a couple as to when to have children by choice and not by chance ‘healthy fertility’
- It’s an affordable, safe and effective way to have the children when you want them
- FP is practiced by respected and responsible people
- It’s a way of life that promotes quality life for entire family
- Family planning also includes helping couples who may be having infertility problems have children
- It’s a ‘rest’ for the mother in between pregnancies

FP is a no different from any of the many essential decisions made over the course of our lives; just as one must decide who to marry, where to live, where to take your children to school, type of food you want to eat, family budget.

Improved quality of life means providing an opportunity for all to have:
- Better health for all family members
- Improved education prospects for children
- Share a good relationship and affection between a couple
- Adequate accommodation, food, clothing
- Possibility of family savings
- A more stress-free and peaceful life for men and women, who can thus stay youthful for longer
There are many choices available for planning the family. Couples can find out about these choices by listening to this radio program or by visiting one of the following health providers: Health facilities, Patent medicine vendors, Pharmacies, Family Planning Provider Network (FPPN) Look out for a logo that has the three puzzle pieces in blue, yellow and orange with ‘Get it Together’.

Note to Writers:
- In Kaduna please use the term ‘child spacing’.
- NURHI definition of what family planning is relates to both married and unmarried persons. Please be sensitive in your use of words.

SIMPLE DOABLE ACTION:
Share what good things you have heard about what FP is with someone.

LIVE CHAT TALKING POINTS
- FP is a way of life; it is a decision taken by an individual or couple as to when to have children by choice and not by chance ‘healthy fertility’.
- FP is an affordable, safe and effective way to have the children when you want them.

PROVOCATIVE QUESTIONS
- How do you describe what family planning is to other people?
- How do you think people in your area are planning their family?
EPISODE 4: Topic: Benefits of Family Planning in General

MEASURABLE OBJECTIVES: After listening to this episode, the audience will:

KNOW: ● The benefits of FP

FEEL: ● Curious to learn more about FP
       ● Confident that Family Planning has many benefits

DO: ● Discuss benefits of FP with family or friends

PURPOSE
• To educate the audience on the benefits of FP
• To motivate them to discuss the benefits of FP openly
• To reinforce the concept that FP improves quality of life

WHY IS THIS AN ISSUE?
When people talk about Family Planning they often don’t talk about the benefits perhaps because they don’t know what they are, or they may simply feel that FP is an unpopular thing to discuss positively in the community. Many people don’t even know someone who is a satisfied FP user. Thus, people may not link using a Family Planning method with being able to achieve their aspirations.

CONTENT:
Family planning can improve a couple’s quality of life,
Some main benefits of planning your family are:
1. Improved quality of education for your children.
2. Reducing death of women and children: When a woman spaces birth of her children, it gives her time to recover from the stress (change in body functioning, meeting the needs of the baby-feeding, changing diaper, washing clothes) of one birth before the other and gives her time to take care of other children. This improves health of children.
3. FP prevents unintended pregnancies and abortion.
4. Reduces stress in men - if they plan their families it will be easier to cater for the family’s needs.
5. Reduces burden on the entire community (when parents can adequately care for their children, the community does not have to bear the burden of raising delinquent children).

SIMPLE DOABLE ACTION:
Talk about the benefits of family planning with one other person.

LIVE CHAT TALKING POINTS
• Family planning can improve the quality of life of the father, mother and children.
• Family planning prevents unintended pregnancies, abortions and untimely death.

PROVOCATIVE QUESTIONS
➢ Who bears the burden of an unplanned family?
➢ How could a well planned family reduce the stress in your life?
EPISODE 5
Topic: Modern Family Planning is Safe

MEASURABLE OBJECTIVES: After listening to this episode, the audience will:

KNOW: ● Modern family planning is safe

FEEL: ● Confident to use modern family planning

DO: ● Seek more information on modern family planning

PURPOSE
● To educate audience on the safety of modern family planning

WHY IS THIS AN ISSUE?
There are a lot of misconceptions about Family Planning— that it doesn't work, that it will harm the mother, cause infertility. Side effects of modern methods are grossly exaggerated and fear outweighs reality. So, women (and couples) make decisions based on rumours and fear rather than on information that could help them in their lives.

CONTENT:
There are several modern family planning methods available to women and men to help them achieve their family goals and aspirations.
Individuals should talk to a service provider to help decide the method that is best suited to their needs.
Family planning products are safe. They often come with simple direction for use. Accessing family planning through trained family planning providers makes it safe because they guide clients according to directions for use.
All temporary methods are reversible, i.e. they do not affect the fertility of women. They can be withdrawn or stopped whenever the couple desires and a woman returns to her fertility.

SIMPLE DOABLE ACTION:
Visit a skilled FP provider for more information.

LIVE CHAT TALKING POINTS
● Modern Family Planning/ Child Birth Spacing methods are safe and effective if carried out by trained, skilled service providers.
● All temporary methods are reversible. Users are able to return to fertility after discontinuing use.

PROVOCATIVE QUESTIONS
➢ What do you know about FP?
➢ Where can you get FP in your community?
EPISODE 6
Topic: Benefit of FP to Quality of Children’s Education

MEASURABLE OBJECTIVES: After listening to this episode, the audience will:

KNOW:
- Family size will affect quality of life, particularly children’s education

FEEL:
- Empowered that they can influence the quality of life of their family, particularly their children’s education
- Confident that their decision to use family planning can set their children up for a brighter future.

DO:
- Tell others that determining family size can improve children’s education

PURPOSE
- To reinforce that FP improves quality of life, particularly young people’s education
- To demonstrate how FP affects the young people’s education

WHY IS THIS AN ISSUE?
People do already link family size and improved children’s education. It is therefore important to reinforce this desire in a way that feels achievable to our intended audience since they aren’t planning families yet because of all the other barriers – wanting large families, not a culture of planning for the future, believe that somehow be provided for by God/Allah.

CONTENT:
- A good life needs to be planned, so plan your family for better quality
- Improved quality of life for your family depends on how well you provide for them (education, quality care and affection, proper accommodation, nutritious and sufficient food)
- Some ways that a planned family can benefit children’s education are:
  (i) The possibility that children will be able to go to better schools and you will be able to train them to any level they desire to attain, fulfilling the children’s aspirations
  (ii) With more resources, you will be more likely to be able to give all children equal educational opportunities so that there is unison and thus unity within the family.
  (iii) Allowing for better and more parent involvement in monitoring children educational performances
  (iv) Families will have the resources to enable their children to stay in school instead of spending time selling or helping to bring in income.

The benefit to parents is pride that they have done all they can to give their children opportunities for a better future.

SIMPLE DOABLE ACTION:
To begin to desire the quality of life that FP promotes.

LIVE CHAT TALKING POINTS
- Family planning enables families to have enough resources to give their children better opportunities to pursue their education.
- Family planning helps couples be better parents (by fulfilling their children’s educational aspirations and monitoring them better).

PROVOCATIVE QUESTIONS
- How can your decisions about family planning now affect your children’s educational outcome?
EPISODE 7
Topic: Role of Men and Women in FP

MEASURABLE OBJECTIVES: After listening to this episode, the audience will:

KNOW:
- FP is both men and women’s responsibility

FEEL:
- Responsible to discuss FP with their partners and friends

DO:
- Take responsible actions to plan families

PURPOSE
- To educate men and women about their responsibilities in relation to FP
- To demonstrate a man taking responsibility

WHY IS THIS AN ISSUE?
According to research, everyone sees FP as a woman’s responsibility only to raise the issue in discussion. It is the man’s role to decide whether to use FP or not. So, a woman is supposed to raise the issue, but can’t do anything about it on her own. And a man is not supposed to find out about or raise Family Planning, but only decide. This leads to lack of joint action.

CONTENT:
Family planning affects everyone in the family, not just the woman, so BOTH men and women must take responsibility to ensure that they are having children by choice and not by chance.

Sexually active men and women can take responsibility by:
- Making joint decisions – both partner’s involvement and actions are needed to plan a family or space births.
- Talk to their partner about whether they want to have children at that time or not.
- Treat their partner with trust: Listen to a partner who wants to talk about family size or timing of children or possibility of using a family planning method. Trust that he/she is committed to the relationship and wants to improve the quality of family’s future.
- Thinking about the future when making important decisions for today. How many children can you adequately cater for? What are your hopes for your children’s future, etc.
- Men can give emotional and financial support to women if they choose to use a family planning method and accompany her to the clinic.
- Know the facts about modern Family Planning methods.
- Go together to talk to a provider.

SIMPLE DOABLE ACTION:
Think of a situation when you and your partner made a decision together (on any topic) and what steps you went through to make that decision.

LIVE CHAT TALKING POINTS
- Family planning affects everyone in the family, not just the woman, so BOTH men and women must take responsibility to ensure that they are having children by choice and not by chance
- Men can give emotional and financial support to women if they choose to use a family planning method and he can accompany her to the clinic.
PROVOCATIVE QUESTIONS

- Why would a man support his partner to use family planning services.
- How could you support your partner to use Family Planning services?
EPISODE 8
Topic: FP Provider is Friendly

MEASURABLE OBJECTIVES: After listening to the episode, the audience will:

KNOW:
- FP providers are friendly
- What to expect when you go to a FP clinic
- Where to locate friendly FP providers

FEEL:
- Confident to approach friendly FP providers

DO:
- Visit friendly FP providers

PURPOSE
- To encourage the audience to seek information from friendly FP providers
- To inform the audience on where to locate and find friendly FP providers

WHY IS THIS AN ISSUE?
There is a perception that Providers don’t listen and are too busy to talk to couples, that FP methods will not be available, that the provider will not keep a person’s information secret. People, especially women, don’t know where they can get FP services (even if they know where to get other services)

CONTENT:
- **FP providers are nurses, community health officers or community health extension workers.**
- FP providers are reliable because they are trained and know what they are doing.
- FP providers are caring, give a warm welcome, and pay attention to their clients.
- FP providers do not reveal secrets, can be trusted and are found at your nearest hospital or chemist.
- Follow the logo the three puzzle pieces of blue yellow and orange with the ‘get it together’ tagline to find the friendly provider nearest you.

Clients can speak openly and honestly to their provider and should be sure to ask any questions they may have because the provider will give complete and correct information and will keep the conversation confidential (i.e. not tell anyone).

What to expect when you go to a FP clinic.
- You will be welcomed warmly
- You will be counseled on the modern family planning methods available
- You will be given an opportunity to decide which method is best for you
- The family planning methods are free in Government hospitals although you may be expected to pay a little token for consumables e.g (cotton wool)

SIMPLE DOABLE ACTION:
Locate a friendly FP provider

LIVE CHAT TALKING POINTS **Suggest that a FPPN member who is a pharmacist is invited as the guest for this program**
- FP providers are trained nurses, community health officers and community health extension workers. They are reliable and know what they are doing.
- FP providers are respectful, caring, friendly and discreet (they won’t share your secret).
- Look out for the logo to know where you can obtain quality family planning services. It is a three puzzle pieces of blue, yellow and orange with the get it together written under it.

PROVOCATIVE QUESTIONS
How would you like family planning providers to treat you when you go to their clinic?
EPISODE 9
Topic: Family Planning Improves Women’s Life and Saves Lives

MEASURABLE OBJECTIVES: After listening to this episode, the audience will:

KNOW:
- That family planning can improve the life of the woman and of other members of the family
  - That family planning saves lives.

FEEL:
- Empathy for women in their family
- Protective of women in their family

DO:
- Men will support their partners in using family planning

PURPOSE
- To educate our audience on how family planning improves women’s life and saves others.

WHY IS THIS AN ISSUE?
People see pregnancy as a normal process for women, and children as a blessing. There is a recognition that birth spacing is important, but they are not making the decisions that will give women that break in between pregnancies.

CONTENT:
- Family planning improves women’s life by ensuring that her body has enough time to recover from the strains of one pregnancy before embarking on another. Pregnancy comes with a lot of stress for a woman; this is because the baby now shares her blood, body fluid and nutrients as well as energy.
- Moving around with the weight of another human being inside of her for nine months is a burden that is difficult to describe. During delivery, the woman is said to be between life and death until the baby comes out. She also loses a lot of blood. This process exerts a lot of pressure on the women both mentally and physically.
- Maternal and child mortality are prevalent among women who have had too many births because the woman’s tissues are already weak and cannot stand the strain of pregnancy and delivery; thus, both mother and child can lose their lives in the process. This can be avoided if a couple practices FP.
- When a family has a manageable size of children who are properly spaced, the woman has enough time for herself, and so she feels and also looks stronger, body fluid and nutrients as well as energy.
- Family planning can save a man from unnecessary stress that could lead to untimely death. This is because when a man has the number of children he can comfortably take care of, he will have greater peace of mind. When his family is comfortable, he is able to concentrate on his job.

SIMPLE DOABLE ACTION:
Talk to the women in your life about what you’ve heard and encourage or support them to go and see FP provider

LIVE CHAT TALKING POINTS
- Family planning improves women’s life by ensuring that her body has enough time to recover from strains of one pregnancy before embarking on another.
- Family planning can save the lives of men, women and children by improving health and reducing stress.

PROVOCATIVE QUESTIONS
- In your own opinion, how many years should be between one child and another to reduce all forms of stress?
- Why do women really need a break between pregnancies?
EPISODE 10  (note: the guests for the day should represent the two religious leaders)
Topic: How Community and Religious Leaders Can Support FP

MEASURABLE OBJECTIVES: After listening to this episode, the target group will:

KNOW:
- That many religious and community leaders are in support of modern FP
- Religious texts to quote that support Family Planning

FEEL:
- **Confident** that many community and religious leaders support FP

DO:
- Speak positively of the religious attitudes towards Family Planning with partner, family and friends

PURPOSE
- To show that community and religious leaders support modern family planning

WHY IS THIS AN ISSUE?
There is a perception that some Muslim and Christian religious persons and community leaders are against modern Family Planning.

CONTENT:
Many community leaders and religious leaders support family planning. Some direct quotes from texts or major religious leaders are as follows:

**FCT**
- Imam Abdullahi- FP is essential for protection of our women's health and provision of sound moral, traditional, formal and Islamic upbringing of our children, 2011.
- Sheikh Ibrahim Yusuf the Baba Addini of Bwari- Islam permits FP. It goes beyond timing pregnancies and encompasses allocating time and resources to social, economic, moral and spiritual aspects of every Muslim's adult/ family life, 2011.

**Ilorin**
- 'I support child spacing' HRH, the Emir of Ilorin, Alhaji Sulu Gambari '...I had been an opponent of family planning due to lack of knowledge. No one has ever told me the real benefits of family planning... But, with all I hear, I am no more opposed to family planning and ready to give my wife a 100% support. I am also ready to support this project in my own little way because it is not only beneficial to individual families but to the society at large. I will become a fervent supporter from today.' Pastor L. A. Bamidele, Secretary Irepodun LGA.

**Ibadan**
- 'Islamic teaching is ever in support of family planning. Family planning is meant to have a conducive family set up that will make you live well in this world and as well be able to perform good... and secure a better place for you in the hereafter.' Sheikh Basairi, Islamic Scholar

"The bedrock of any nation is having a well planned family set up, which in turn assists the productivity of the nation"  *Former Vice Chairman, Ibadan Southwest local government*

**Kaduna**
- 'Christianity supports childbirth spacing for the good health of the mother and child, which is not just their constitutional right but divine privilege. Birth spacing is the responsibility of the men as well as women. Men should be aware of the health benefits of birth spacing and the different methods available. They should support women to space pregnancies - Reverend Yunusa S. Nmadu CAN Secretary, Kaduna State Chapter, July 27, 2011
'Islam not against family planning... couples were free to determine the type of contraception they wanted’ Sheikh Abubakar Mahmud Gumi, June 28, 1986

(note to writers) pick the one relevant to your location

Religious and Social leaders can support family planning by:
- Speaking positively about FP in public and private conversations.
- Talking about their own experience of planning their own families (or experiences from their own families).
- Referring young couples to appropriate health providers for Family Planning information or services.

SIMPLE DOABLE ACTION:
Look up the religious texts that support family planning.

LIVE CHAT
TALKING POINTS
- That both religions and tradition support family planning. More religious and traditional leaders need to speak out often in public and encourage their followers to embrace family planning so as to improve the health and wellbeing of their members and the society at large.

PROVOCATIVE QUESTIONS
- Call in and ask the religious leader questions about family planning.
EPISODE 11
Topic: Couple Communication: Discussion of When to have Children and Spacing

MEASURABLE OBJECTIVES: After listening to this episode, the audience will:

**KNOW:**
- The importance of discussing with partners when you want to have children and how many

**FEEL:**
- Empowered to discuss with your partner when you want to have children, how many and how many years apart.

**DO:**
- Discuss the desired size of their family with their partners

**PURPOSE:**
- To motivate couples to discuss the size of their family
- To demonstrate the benefits of discussing family size

**WHY IS THIS AN ISSUE?**
Many couples don’t talk about size of family because it is seen as the man’s role to make the ‘decision’ rather than a discussion between partners. Women also fear raising issues related to family planning for fear of the other person thinking they are cheating.

**CONTENT:**
Spousal communication on family size will ensure that couples have an understanding of the size of their family and agree on the number even before or after they are married.
- When couples know the number of children they want to have they can allocate and plan for the available resources by thinking about expenses of quality education, health care, nutritious food, clothing, etc.
- Raising the issue of how many children you want to have with your partner shows a commitment to the family’s prosperous and quality future, and is the sign of a caring, trusting partner.
- For instance, couples might ask one another how many children they each would like to have and reach an agreement. This would eliminate the possibility of trading blame years into the marriage when they would have gotten more children than they can cope with.
- In discussing family size couples should also decide the method of family planning they want to adopt.
- Discussing family size also includes spacing between one child and another.
- When couples do not agree on the number of children they want to have, they tend to have more children than they can cater for; this could lead to their giving out their children as house helps.
- A well-planned family can afford to send their children to a school of their choice, eat well, go where they want and not just settle for what is available, because they will be able to have a choice.

**SIMPLE DOABLE ACTION:**
Begin to visualize a happy, healthy and manageable family size.

**LIVE CHAT TALKING POINTS**
- Couple communication on family planning is when couple have a mutual understanding on the desire family size and how many years of space between children.
- When couples know the number of children they want to have, they can allocate and plan quality of education, health care, nutritious food, clothing, shelter etc. within available resources.

**PROVOCATIVE QUESTIONS**
- How long do you think a woman that just gave birth should wait before getting pregnant again? Why?
- When should a couple discuss how many children they want and the timing?
EPISODE 12

Topic: Family Planning Methods: General Information

MEASURABLE OBJECTIVES: After listening to this episode, the audience will:

KNOW:
- The methods of family planning

FEEL:
- Feel confident that they know about the range of family planning methods

DO:
- Talk to others about family planning methods
- Seek further information about FP methods

PURPOSE:
- To educate the audience on the various family planning methods available

WHY IS THIS AN ISSUE?
People have many misconceptions about FP and don’t know where to get correct information.

CONTENT:
- There are different kinds of modern family planning methods that are safe and reliable.
- Using modern family planning is a normal life decision
- They have been extensively tested and are approved by NAFDAC.
- There is a method option for everybody

The different kinds of safe and effective family planning methods, which help a couple time their births:
- Male and female condom
- Tablets or pills
- Injections
- Loop or Coil
- Implants
- Vasectomy or Tubal ligation

Some methods are temporary (condom, tablets, injections, loop or coil, implants) and a woman can become pregnant after she stops using the method. Vasectomy and tubal ligation are permanent methods.

The modern methods, mentioned above, are much more reliable than traditional Family Planning methods (such as withdrawal or standard days method). All these methods are widely available, safe and affordable.

They are available in your community from nurses, health providers, pharmacists, or doctors:
- Health facilities, Pharmacies, Patent medicine vendors

SIMPLE DOABLE ACTION:
Have a discussion with someone about FP methods

LIVE CHAT
TALKING POINTS
- There are different types of FP methods that are safe and reliable like; implants, IUD, vasectomy, tubal ligation, condoms, pills and exclusive breast feeding.
- The modern methods, mentioned above, are much more reliable than traditional Family Planning methods (such as withdrawal or standard days method).
- A client can choose the right FP method that suits them based on discussion with a service provider during counseling.

PROVOCATIVE QUESTIONS
- What would you like to know about modern FP methods?
EPISODE 13
Topic: Family Planning Methods: Infertility Management

MEASURABLE OBJECTIVES: After listening to the episode, the audience will
KNOW:
- Infertility can sometimes be overcome, so couples who are having problems should discuss
  with a health provider.
- Infertility can stem from a problem with the man as much as from a problem with the
  woman.
- Open discussion between couples about sex and fertility can often lead to a solution of
  problems
FEEL:
- Greater confidence to discuss issues around fertility and sex with partners
DO:
- Talk to others if you are having a problem with having a baby
- Share information with others about the advisability of seeking help from a health provider
  if you are having difficulty having a baby.

PURPOSE
- To demonstrate how couples can talk to each other about desired family size, sex and reproduction

WHY IS THIS AN ISSUE?
People think family planning only means having fewer children. They don’t realize that family planning also
means helping couples have children when they want them.

CONTENT:
- Helping couples have children when they want them is an important part of family planning and is included
  in FP services offered.
- If a couple is having difficulty conceiving, this may be due to the man or to the woman.
- Sometimes couples may plan their family but have difficulty getting pregnant at the desired times. This is
called infertility. If the man and the woman can have open discussion about the issue and then go to visit a
health provider, that provider may be able to help them overcome their problems and have children.

SIMPLE DOABLE ACTION:
Find a pamphlet on family planning.

LIVE CHAT TALKING POINTS
- Family Planning/ Child Birth Spacing is not just for couples who want to space their pregnancies but
  also for couples who want counselling on getting pregnant.
- FP providers are able to help some couples having difficulties in getting pregnant overcome their
  problems and have children.

PROVOCATIVE QUESTIONS
- If you are married, how many children did you plan to have before getting married? And if you
  are not married, how many children do you plan to have after marriage?
- Do you know that family planning providers can assist some couples in getting pregnant?
EPISODE 14
Topic: Benefit of FP: Promotes Love and Healthy Sexual Relationship

MEASURABLE OBJECTIVES: After listening to this episode, the audience will:

KNOW:
- Couples who plan their families have healthier sexual relationships
- Family planning can promote love between couples

FEEL:
- Confident that using FP can increase love between couples and improve their sexual relationship

DO:
- Tell others that using a FP method improves love between couples and improves sexual relationship

PURPOSE
- To educate couples to adopt FP to improve their sexual relationship and love for each other

WHY IS THIS AN ISSUE?
Couples get busy with having and raising children. They forget to pay attention to their own sexual health or loving relationship with their partner. Even if they want to space their children, many are nervous to talk about modern family planning (for all the reasons mentioned elsewhere in the document). Some couples see family methods as things that get in the way of sex rather than increasing sexual pleasure or frequency.

CONTENT:
Adoption of FP leads to healthy sexual relationship, which in turn leads to:
- Happiness
- Intimacy
- Long life

Adoption of FP also does the following:
- Reduces the fear of unintended pregnancy with every sexual relationship.
- Increases trust among couples because they have discussed their wishes for the family and made decisions based on their commitment to their relationship and family.
- Some women get pregnant easily and this can cause tension between the couple if one is worried about getting pregnant. With the use of family planning, this fear is eliminated and the couple can enjoy a more relaxed sexual relationship.
- If a man and a woman sit down to discuss the issue of Family planning, each party would feel that they have a stake in the relationship. This breaks down the barriers that couples often have about discussing the issues around sex.
- Couples who talk about family planning and sexual issues can easily build a trusting relationship in which each is free to advance opinions that can enhance their sexual relationship.

SIMPLE DOABLE ACTION:
Couple should discuss the program they have heard.

LIVE CHAT TALKING POINTS
- Couples who talk about family planning and sexual issues can more effectively build a trusting relationship.
- With the use of family planning, the fear of unwanted pregnancy is eliminated and the couple can enjoy a more relax and satisfying sexual relationship.

PROVOCATIVE QUESTIONS
- Can fear of unintended pregnancy cause tension between you and your partner?
- How can physical intimacy contribute to harmony, love and trust between couples?
EPISODE 15

Topic: How Men can support FP

MEASURABLE OBJECTIVES: After listening to this episode, men will:

KNOW:
- The roles of a responsible man in family planning
- The benefit of being a responsible man in FP

FEEL:
- Empowered and proud to fulfill their responsibilities in the family

DO:
- Fulfill their responsibilities as a responsible man regarding FP

PURPOSE
- To inform men about their responsibilities regarding FP
- To show a positive example of a responsible man i.e. to demonstrate a responsible man, talking as a responsible man
- To encourage male partners to fulfill their responsibilities regarding FP

WHY IS THIS AN ISSUE?

Men see raising the issue of modern Family Planning as a ‘woman’s issue’. He is the decision maker. He is busy with other important things. He wants to be perceived as successful which is equated with having many children. He doesn’t want to be seen as a man who is controlled by his woman (if he talks about FP or starts doing ‘womanly’ things.)

CONTENT:

What are men’s responsibilities?
- To know the facts about FP
- To save and provide money for FP
- To talk with their wives about their family e.g. how many children they want to have that they can cater for, do they want to space their children etc.
- To be open to the discussion topic if his partner raises the issue of FP
- To support (any funds, emotional support, needed permission) his partner to get an FP method

Why should he feel proud?
- Supporting FP means providing a better life for his family

Benefits of being a responsible man
- He will feel less money stress; he will have reserve money in his pocket
- He will ‘stay young’ (not age prematurely as mentioned in the research)
- He will have more time for the family and more influence on his children

Note to writers: Some adjectives used to describe men that supported FP from the qualitative research were “exposed”, “reasonable”, “focused”, “calm” and “cooperative”.

SIMPLE DOABLE ACTION:

Think of someone around who is practicing and is a role model for FP within your environment.
Get a pamphlet about FP and read it.

LIVE CHAT TALKING POINTS
- Men in a relationship should know the facts about FP
- Men should be open to FP discussions even if his partner raises it and give adequate support (Financially, emotionally, etc).
PROVOCATIVE QUESTIONS

- How would you respond if your partner starts a conversation on Family Planning?
- Whose responsibility is family planning? The man or the woman or both?
EPISODE 16
Topic: Male and Female Condoms

**MEASURABLE OBJECTIVES:** After listening to the episode, the audience will:

**KNOW:**
- How male and female condoms prevent pregnancy
- Where to get condoms
- Advantages and disadvantages of male and female condoms

**FEEL:**
- Safe to use male and female condoms

**DO:**
- Inquire more about the use of condoms and its advantages as well as use them if appropriate to their needs

**PURPOSE**
- To educate the audience about male and female condoms, their advantages and disadvantages

**WHY IS THIS AN ISSUE?**
Audience members have misconceptions about FP methods and don’t know where to go for more information. Main barriers to condom use are: low sensation and unreliable and fear that if the condom breaks, she will be accused of infidelity.

**CONTENT:**
- Male and female condoms are easy to use, cheap, readily available and effective.
- Male and female condoms prevent unwanted pregnancy and sexually transmitted diseases by stopping direct contact between the male and female private parts.
- Male and female condoms must be used correctly for every sexual intercourse. A health provider can provide information on correct use.
- Male and female condoms are available at your nearest hospital and chemist.
- Registered condom brands available in Nigeria are of the best quality.
- For more information, contact your nearest health worker.

**Advantages**
- Male and female condoms are easy to use, affordable and readily available.
- Male and female condoms protect against unwanted pregnancy, sexually transmitted infections and HIV.
- Male and female condoms can be used soon after childbirth, whilst breastfeeding.

**SIMPLE DOABLE ACTION:**
Always be prepared with a condom. Get your condoms.

**LIVE CHAT**
**TALKING POINTS**
- Male and female condoms are easy to use, affordable and readily available.
- Male and female condoms protect against unwanted pregnancy, sexually transmitted infections and HIV. Check to see what’s in the FAQ.
- Registered condom brands available in Nigeria are of the best quality.

**PROVOCATIVE QUESTIONS**
- How can using a condom with your partner show that you love and trust them?
EPISODE 17
Topic: Couple Communication: How to Talk to Your Partner about FP

MEASURABLE OBJECTIVES: After listening to this episode, the audience will:

KNOW: • How to discuss FP issues with partner
  • Benefits of talking to their partner about FP

FEEL: • Confident to discuss FP issues with their partner

DO: • Begin to discuss FP issues with their partner

PURPOSE
• To reiterate the benefits of couple communication
• To demonstrate to couples how to discuss FP issues

WHY IS THIS AN ISSUE?
Many couples do not talk about planning their families with their partners because they don’t know how to start the conversation. There’s a lot of fear that if you raise the issues at the wrong time or in the wrong way that your partner will react poorly. And there’s pressure that if the issues are raised appropriately and convincingly, then the discussion will end in a decision that is mutually beneficial.

CONTENT:
The steps to discussing family planning with a spouse or partner are as follows:
• Find out the facts about family planning methods from a trusted source of information – perhaps a radio program, brochure or from a service provider.
• Find a good time to have the discussion – when the other person is relaxed and happy, perhaps after a favorite meal.
• Share that family planning is the way a couple decides how many children to have, when to have the children and how to space them, saying that if a couple plans their family, they can have a family size that they could cater for; this would enable them to send their children to schools of their choice, and also allow the couples to have time for each other. This would in turn improve the bond of love among them.
• Share ideas for using a family planning method that is right for your family’s needs.
• Discuss, listen to each other and reach an agreement between both.
• Act on your decision.

The benefits of couples discussing FP issues are
• Improved relationship between partners.
• Children will be planned in a way that your family can cater to their needs and maintain the health and peace of mind of the woman and the man.

It is often the woman who initiates FP discussions but both men and women can initiate the conversation.

SIMPLE DOABLE ACTION:
Find out the facts about family planning from a service provider near you.

LIVE CHAT TALKING POINTS
• It is often the woman who initiates FP discussions but both men and women can initiate the conversation. However before you do, find out the facts about family planning.
• Find a good time to have the discussion – when the other person is relaxed and happy, perhaps after a favorite meal.
PROVOCATIVE QUESTION

- When is the best time to start the discussion on family Planning?
- Who should start a conversation on Family planning? The man or the woman.
EPISODE 18
Topic: Family Planning Method: Injectables

MEASURABLE OBJECTIVES: After listening to the episode, the audience will:

KNOW:
- How injectables prevent pregnancy
- Where to get injectables
- Advantages and disadvantages of injectables

FEEL:
- Safe to use injectables

DO:
- Inquire more about the use of injectables and its advantages as well as use if appropriate to their needs

PURPOSE
- To educate the audience about injectables
- To motivate the audience to find out more about injectables

WHY IS THIS AN ISSUE?
There are many misconceptions about injectables that are often exaggerated side effects. This is the most popular modern contraceptive method for women and considered the least risky. If couples had correct information then they would be more likely to consider injectables a viable choice for them.

CONTENT:
- Family planning injections are given to women for purpose of preventing pregnancy.
- There are two kinds of injectable available for free at government clinics. They are every two months or every three months.
- Family planning injections work by stopping a woman’s body from releasing an egg every month, and are given by a trained health worker at your nearest hospital and pharmacy.
- Family planning injections are safe for breastfeeding mothers whose infants are more than six weeks old and are effective when taken on time.
- The injections may cause changes in menstruation. This is normal, but if you have questions, contact your provider.
- **If you have any questions, go to a health worker.**

SIMPLE DOABLE ACTION:
Find a person who is using injectables and ask about their experiences.

LIVE CHAT TALKING POINTS
- Family Planning Injectables are safe methods of preventing pregnancy. They are available in two forms; two-month protection or three-month protection.
- FP Injectables are safe for breastfeeding mothers. They work by stopping the woman’s body from releasing eggs monthly. Injectables are given by trained providers and may cause changes in the menstrual cycle, which is normal.

PROVOCATIVE QUESTIONS
- Why would some consider using Injectables as their choice FP method?
- What questions do you have about the injectables?
EPISODE 19

Topic: Family Planning Method: Tablets (Pills) and Implants

MEASURABLE OBJECTIVES: After listening to the episode, the audience will

KNOW:
- What pills and implants are with regards to family planning
- Where to get both tablets and implants
- Side effects of tablets and implants
- Advantages of tablets and implants

FEEL:
- Feel safe to use either family planning pills or implants

DO:
- With knowledge of what FP pills and implant do, decide whether to use.

PURPOSE
- To educate and inform the audience on family planning pills and implant.

WHY IS THIS AN ISSUE?
There are many misconceptions about the pill and implants. If couples had correct information, they would be more likely to consider pills and implants.

CONTENT:
The pills are small round tablets that are taken every day to prevent pregnancy.
- There are 28 or 35 tablets in a card and sometimes all the tablets are white and sometimes there are red and white pills.
- There are two types; one for breast-feeding mothers and the other for non breast-feeding women/mothers.
- Family planning tablets reduce period pains and work well for *‘sicklers’* as well as protecting against some cancers.
- Family planning Pills work when taken correctly and you can get pregnant as soon as you stop taking pills.

Implants are put in the arm and can prevent pregnancy for 3 to 5 years, depending on the type of implant a woman chooses.
- Implants begin to work immediately they are put in the arm and you can get pregnant as soon as you remove the implant.
- Services are available at your nearest hospital

SIMPLE DOABLE ACTION
Seek more information from your nearest health worker

LIVE CHAT TALKING POINTS
- Pills are small round taken every day to prevent pregnancy. There are separate types for breast-feeding and non breast-feeding mothers.
- Pills are beneficial to women by reducing period pains and increasing blood count. They also protect against some cancers and fertility returns as soon as you stop taking them.
- Implants work for either 3 to 5 years. It begins to work once fixed under the arm. Fertility returns immediately after removal. Implants are inserted only in hospitals.
PROVOCATIVE QUESTIONS

- Why would some women consider using FP pills?
- Why would some women consider using Implants?
**EPISODE 20**
**Topic: How In-laws Can Support FP**

**MEASURABLE OBJECTIVES:** After listening to this episode, the target audience will:

**KNOW:**
- The roles that in-laws can play in supporting young couples in FP

**FEEL:**
- Positive that in-laws can be important support for young couples in FP (i.e. in-laws support couples goals of a future happy life)

**DO:**
- Have a positive attitude towards young couples practicing family planning

**PURPOSE**
- To educate the audience about the roles in-laws can play in FP for young couples
- To motivate in-laws to support FP for young couples

**WHY IS THIS AN ISSUE?**
In-laws have a huge influence over a young couple and want the success of the young couple. While in-laws are known to be strong promoters of having lots of grand children, sometimes they can be positive towards couples planning families using modern methods.

**CONTENT:**
In-laws are influencers of young couples; they are respected, they have more experience, couples look up to them for help.

**How can in-laws play a positive role?**
- They can be sympathetic to the young couple knowing the hardships of having a life without FP (jobless, poor living condition, children would not get the education they desire).
- In-laws can sit down with the young couples and talk to them on how to plan their lives.
- Sometimes a daughter-in-law may come to the parents for support in convincing her husband. In-laws can be supportive to help convince their son.
- In-laws may know where couples can access FP.
- If a young couple is using FP the in-laws can be positive about it.

**Why would an in-law support the couple?**
- When in-laws talk to young couples about FP and how to have a quality life, then the in-laws themselves would have a happier home and extended family
- In-laws feel a sense of pride that the couples are living well (happy couple happier in-laws)
- If the young couple is practicing FP and have a better quality life, then the in-laws also would be less burdened by financial difficulties

**SIMPLE DOABLE ACTION:**
- Parents-in-law should recommend the radio program to the young couple
- They could also be referred to service points (marked by the logo) for more information on family planning

**LIVE CHAT TALKING POINTS** (guest should be a father/mother in-law who supports family planning)
- Discuss the benefit of family planning to young couples from a parent in-law’s perspective (health of the mother and children, economic wellbeing of the family)
- How can in-laws support their children in using family planning (be supportive of child spacing, share their experiences with a young couple, find out the FACTS about FP and share, accompany couple to the clinic)
PROVOCATIVE QUESTION

- In what ways can in-laws support a couple in using family planning?
EPISODE 21
Topic: Couple Communication on FP Before and After Marriage

MEASURABLE OBJECTIVES: After listening to this episode, the audience will:

KNOW:
- The need for couples to discuss issues on family planning before and during marriage

FEEL:
- Comfortable discussing issues of family planning with their partner

DO:
- Discuss FP with their partner

PURPOSE
- To reiterate the importance of couple communication before and during marriage
- To inspire couples to adopt an attitude of discussing FP issues

WHY IS THIS AN ISSUE?
Couples thinking about getting married often don’t discuss their expectations about when they want to have their children and how many. Also, people think that unmarried people don’t or shouldn’t have sex – so correct advice or contraceptives are not easily available.

CONTENT:
It is important for couples to discuss their goals and aspirations for their family even before marriage. Coming together to discuss their goals and aspirations improves their relationship.

- Couples may want to discuss what type of home they will want to live in and where, what the size of their family should be, and what they plan to do about their children’s education including the kind of school the children should attend.
- Issues about whether the woman should work or stay home to take care of the family and where to spend their vacations should also be discussed.
- How and when to start using family planning and if it should be included in the family budget is also a fundamental issue and a normal life decision.
- Discussions like these help couples to know exactly what to expect in a relationship and marriage, and also gives the family direction. This enhances mutual trust and reduces external influences and sources of conflict.

SIMPLE DOABLE ACTION: Ask your partner what he/she thinks of the topics and ideas from the program.

LIVE CHAT TALKING POINTS
- It is important for couples to discuss their goals and aspirations for their family even before marriage. Coming together to discuss their goals and aspirations improves their relationship.
- Discussions on what to expect in a relationship, marriage and family size expectations enhances mutual trust and reduces external influences and conflict.

PROVOCATIVE QUESTIONS
- What are the advantages of discussing family planning with your partner before or during marriage?
- Why is it important for couples to talk about family planning before marriage?
EPISODE 22
Topic: FP and Cost

MEASURABLE OBJECTIVES: After listening to this episode, the audience will:

KNOW: • FP is affordable
FEEL: • Confident that they can afford FP commodities
DO: • Visit providers to enquire about the cost of FP products and services

PURPOSE
• To inform the audience that FP services and commodities are affordable

WHY IS THIS AN ISSUE?
Most people often assume that Quality FP services are beyond their reach. Even if the contraceptives are now free from public clinics, people still need to take time off work, have funds for transportation and perhaps child care while visiting the health facility. Also, modern family planning is not seen as a priority in the short term – perhaps not as important as a pair of shoes or a beer.

CONTENT:
There are family planning products that a woman can use to prevent pregnancy for 1, 2 or 3 months or even as long as 3 – 5 years that can be accessed for free in government hospitals. However, you can be charged a moderate fee for consumables. In private hospitals there are modest charges for family planning services. Even if you have to pay, family planning is a good investment. For instance the male condom cost as low as N20, while the female condom can be bought for as low as N50. Other items that costs the same or less are a recharge card? A shirt? A drink? Snacks? This is a lot less than the cost of abortion especially with all the risks involved or the cost of raising a child you can’t afford. A visit to an FP provider could put your mind at rest.

SIMPLE DOABLE ACTION:
Visit an FP clinic to confirm the price of FP products and services

LIVE CHAT TALKING POINTS
• FP products are actually quite affordable for most people especially when compared to the cost of many non-essential products (such as a recharge card or a drink)
• The benefits of family planning (health of mother, peace of mind, intimacy and understanding between a couple) far outweigh the cost of the services

PROVOCATIVE QUESTION
• How much are you willing to pay for intimacy and peace of mind?
EPISODE 23

Topic: FP Method: Coil or Loop (IUD)

MEASURABLE OBJECTIVES: After listening to the episode, the audience will:

KNOW:
- What the coil (or loop) is and how it works
- Side effects and advantages of using the coil (or loop)

FEEL:
- Interested in learning more about the coil (or loop)

DO:
- Seek more information and advice from the health worker

PURPOSE
- To educate the audience on the coil or loop method, its advantages and how it works.

WHY IS THIS AN ISSUE?
There are many misconceptions about the coil (or loop). If couples had correct information, they would be more likely to consider coil (or loop).

CONTENT:
- The coil or loop is a very small family planning method that is put inside a woman’s womb.
- The coil or loop works by blocking the mouth of the womb preventing the male and female eggs from meeting.
- Women using the coil or loop may experience more menstrual flow for some time but this is normal. If you have any questions or concerns contact your provider.
- The coil works for as long as 10 years and can be removed at anytime pregnancy is desired and fertility returns immediately it is removed. It is good for breastfeeding mothers and can be used after childbirth.

SIMPLE DOABLE ACTION:
Talk about what you learned on this episode with someone.

LIVE CHAT TALKING POINTS
- The coil/ loop is a very small FP device put inside a woman’s womb to prevent pregnancy for up to 10 years, which can be removed anytime pregnancy is desired. It has to be fixed by a trained health provider in a FP clinic.

PROVOCATIVE QUESTIONS
- Why would some women choose the coil or loop as their FP method?
- Do you have any questions about the IUD?
EPISODE 24
Topic: Sticking with FP

MEASURABLE OBJECTIVES: After listening to this episode, the women will:

KNOW:
- The benefits of staying with FP

FEEL:
- Confident that they can maintain FP

DO:
- Committed to a method at all time

PURPOSE
- To reinforce the benefits of staying with FP
- To encourage continued and consistent use of FP

WHY IS THIS AN ISSUE?
Some women start modern family planning methods and then quit. (This is called method discontinuation). They often don’t go back for the refill or next shot. The reasons are lack of family support, side effects (linked to poor counseling), contraceptives not available etc.

CONTENT:
Sticking to a FP method means using your methods at the right time (i.e. tablets are daily, injections every number of months, etc) and ensuring that a couple is protected against unintended pregnancy. This takes commitment on the part of both partners. Commitment means both men and women taking responsibility for FP by:

1) Talking about the family planning method with your partner, 2) Being aware of your partners’ needs and concerns, 3) Ensuring supplies, financial resources and the ability to go to the services, 4) Accompanying a partner to counseling or services.

Sometimes a person might have a question about a method side effect or may even want to try a different method. Don’t wait – go to ask a health provider immediately for advice on methods. In order for family planning to work – meaning that you are having children when you want them – it is critical for a couple to make sure they are always protected from unwanted pregnancy.

Benefits of maintaining use of FP to women/ couple
- They enjoy regular and continuous sexual relationship with partner
- They experience good health, improved wellbeing (food, clothes, social events)
- They follow personal aspirations and dreams (pursuing education, travelling the world, doing business)

SIMPLE DOABLE ACTION:
Create a system for yourself to make sure you’re taking a method on time (like a calendar or a beeping reminder on a cell phone or have your partner remind you).

LIVE CHAT TALKING POINTS (the guest should be an experienced service provider)
- Sticking to a FP method means using your methods at the right time (i.e. tablets are daily, injections every number of months, etc). It also means that if you choose to change methods, to ensure that you are always protected against unwanted pregnancy. This takes commitment on the part of both partners.
- Sometimes a person might have a question about a method side effect or may even want to try a different method. Don’t wait – go to ask a health provider immediately for counsel on methods.

PROVOCATIVE QUESTION
- What should you do when you have concerns about any method?
- How can a couple ensure that they are protected against unintended pregnancy?
EPISODE 25
Topic: How Friends and Community Can Support FP

MEASURABLE OBJECTIVES:
After listening to this episode, the target audience will:

KNOW:
- The roles that friends/community can play in supporting young couples in FP

FEEL:
- Positive that friends/community can really help a young couple have a better life

DO:
- Support couples that are your friends or in your community to plan their families

PURPOSE
- To educate the audience on the positive roles friends/community can play in FP for young couples
- To motivate friends/community members to support FP for young couples

WHY IS THIS AN ISSUE?
Couples may talk to friends and community members and seek out help. But sometimes friends and community members are less positive or they may be spreading rumors.

CONTENT:
Friends/community members have great influence over a young couple when they approve or disapprove of actions a young couple takes as well as by the kind of information they share and the attitudes they show towards the young couple.

How can friends/community play a positive role?
- They can ask a young couple what their plans are for their family size or children’s education
- Friends can talk to the young woman or young man about family size discussion, how to talk to their partners about issues important to them
- Friends/Community can show a couple where to access correct FP information or services.
- If a young couple is using FP the friends/community can be positive about it
- If a friend is a satisfied FP user, then he or she should talk to their friends about it.

Why would friends/community support the couple?
- When friends or community support a young couple in family matters, then the community can feel satisfaction or pride of having helped someone.
- When a friend/community member helps a young couple, that young couple may also help them back some day.

SIMPLE DOABLE ACTION:
Friends encourage young couples who want to practice family planning

LIVE CHAT TALKING POINTS
- Discuss how important friends and close community members can be to a couple’s decision to embrace family planning (support, positive feedback)
- Friends can talk to the young woman or young man about family size, how to talk to their partners about issues important to them
- Friends/Community can show a couple where to access correct FP information or services.

PROVOCATIVE QUESTIONS
- Why should friends and community members support a young couple to practice FP
- Can some one tell us about a time when you supported a friend or community member to practice FP?
EPISODE 26
Topic: Family Planning is a Normal Life Decision (Recap)

MEASURABLE OBJECTIVES: After listening to this episode, the audience will:

KNOW:
- FP can prevent unintended pregnancy, abortion, STIs and HIV/AIDS and untimely death.
  * Family planning promotes quality of life of all family members.

FEEL:
- Secured that FP can protect them from unintended pregnancy, abortion, STIs and HIV/AIDS
  * Confident that family planning is a normal life decision they can easily adopt to better their lives.

DO:
- See FP as a way of life

PURPOSE
- To inform and educate the audience that FP can be used to prevent unintended pregnancy, abortion, STIs and HIV/AIDS and untimely death.

CONTENT:
Recap of the main messages, methods and advantages of FP covered in the previous episodes.

SIMPLE DOABLE ACTION:
Make up your mind to use the information in the program

LIVE CHAT
TALKING POINTS
- Modern Family planning methods are the Male and female condom, Pills, Injectables, Loop or Coil (IUD), Implants or vasectomy and tubal ligation
- Family planning is a way of life.

PROVOCATIVE QUESTIONS
➢ How has your opinion on family planning changed having listened to this Radio program?
### 17. **SUPPLEMENTARY ACTIVITIES AND MATERIALS**

<table>
<thead>
<tr>
<th>YUM Elements</th>
<th>Phase II Plan. Continue what we’re already doing and…</th>
<th>Responsible</th>
<th>When</th>
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| 1 Visibility and Knowledge Parades-Quarterly parades to increase referral, awareness and knowledge, distribute FP leaflets and to promote radio program | - Increase to every two months  
- CCPN to review budget with NGO in August/Sept | CCPN | Aug/Sept 2012 |
| 2 Radio Quiz Winners-Every week there is a radio quiz with prizes to promote listenership. Right now listeners have to pay to send in a quiz answer | - Reduce winners to two persons/week  
- Improve quality of prizes to increase the number of people responding to quiz questions  
- Some gift ideas are Umbrellas, Towels, Mugs, T-shirts, Radio player, phones, Plastic buckets, fans, refreshment, bowls, hand towels, Fez Cap, biro, note pads  
- CCPN will check into ‘audience getting free sms for quiz answering’  
- CCPN and NURHI to review budget in August/Sept 2011 | CCPN/ NGO | Aug/Sept 2012 |
| 3 Radio Discussion Group-NURHI holds about 150 radio discussion groups in the four cities | - Develop new Radio Discussion Guide in card form, translate into local languages and train mobilizers on use  
- Develop banners with updated timings | RDG Guide: ABCCDCO  
Translation: CCPN  
Printing: ABCCDCO | RDG Guide – must be ready by 1st week in September |
| Radio Promotion and Download-Promo- All YUM members promote the radio program at every opportunity using leaflets  
Download-After broadcast, audio files are available for download from the NURHI website | - YUM will actively promote Phase II radio two weeks before launch through parades and using new flyers  
- Develop new flyer for each city | New city flyer: CCPN (coordinates with ARDA) | Two week prelaunch promo (1 – 2 week September) |
| Social/Special Events-Dance, Football, Music, Drama, Board games | - For social mobilisers to raise awareness and increase knowledge on FP  
To be carried out during special international days; such as WAD, WPD, MCH, etc.  
- CCPN to come up with strategic concept paper | CCPN | August 2012 |
<table>
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<th></th>
<th><strong>Religious Events</strong>- Mobilisers hold regular events to raise awareness and sustain FP awareness</th>
<th><strong>Use newly developed GIT 3-in-1 roll up banner</strong>&lt;br&gt;<strong>Yemi doing design on how to 'scale up'</strong></th>
<th>CCPN</th>
<th>Planning in Aug/Sept</th>
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<tr>
<td>5</td>
<td><strong>Face Book</strong>- Each city's FB page posts updates, photos, comments, discuss issues, see news. Links to NURHI website and other pages. Reaches a wider audience to increase knowledge and engage listeners and stakeholders Promote radio program</td>
<td><strong>Post weekly Radio Quiz questions and answers</strong>&lt;br&gt;<strong>Post local and international FP news</strong>&lt;br&gt;<strong>Post pictures of winners of radio drama quiz and GIT activities</strong></td>
<td>ABCDCCO/CCPN</td>
<td>On going</td>
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<td>6</td>
<td><strong>Bulk SMS</strong>- Send bulk sms to promote Radio drama. And also to raise FP knowledge</td>
<td><strong>CCPN to expand data base and</strong>&lt;br&gt;<strong>Increase flow to at least twice a week</strong></td>
<td>CCPN</td>
<td>On going</td>
</tr>
<tr>
<td>7</td>
<td><strong>YUM Mobilizers</strong>- YUM mobilizers encourage their friends and family to listen to the program and will reinforce the main messages. This group also provides feedback.</td>
<td><strong>YUM Social Mobilisers</strong>&lt;br&gt;<strong>Increase number of mobilizers in FCT (Q1)</strong>&lt;br&gt;<strong>Increase mobilizers motivation</strong>&lt;br&gt;<strong>Conduct two days re-orientation for SMs using the FAQs to increase FP knowledge</strong>&lt;br&gt;<strong>Institute mobilizer of the month Award</strong></td>
<td>CCPN/NGO/BCC Consultant/ABCDCCO</td>
<td>Year 4</td>
</tr>
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<td>8</td>
<td><strong>Key Life Events</strong>- These incorporate FP discussion into celebrations such as naming, wedding and graduation. It also promotes radio program at events</td>
<td><strong>Continue program</strong>&lt;br&gt;<strong>Produce new roll-up banners for increased publicity in Year 4</strong></td>
<td>CCPN</td>
<td>Year 4</td>
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<td>9</td>
<td><strong>Group/Associations Meetings</strong>- Mobilizers and staff speak at meetings to create and sustain awareness, increase referrals, address concerns and promote radio program listening</td>
<td><strong>Continue speaking – and scale up</strong></td>
<td>BCC Consultant/NGO</td>
<td>On going</td>
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<td>10</td>
<td><strong>Referrals</strong> Social mobilizers and others make referrals using the ‘GO’ Card</td>
<td><strong>CCPN to review cards</strong>&lt;br&gt;<strong>HQ to review retrieval system</strong></td>
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<td>11</td>
<td><strong>BCC/IEC YUM Materials Distribution</strong></td>
<td><strong>CCPN to replenish</strong></td>
<td>CCPN</td>
<td>September, 2012</td>
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</tbody>
</table>
### SYNERGIES WITH OTHER PROGRAM ELEMENTS

1) **Services**
   The radio program promotes FPPN services sites and models friendly providers. In Phase II, the program will continue to promote and model service providers by interviewing FPPN members on the radio.
   Also, Marie Stopes is providing two week FP clinics in each of the NURHI cities in rotation. Marie stopes is known for quality services and these clinics have proven to be very popular.

2) **‘Get it Together’ overall Campaign**
   The radio program will reinforce the main messages of the ‘Get it Together’ campaign, integrate the campaign PSAs into the radio program and incorporate the logo description and tagline.
   The ‘below the line’ materials are: shopping bags, pens, badges, wrist bands, posters, danglers, beach umbrellas, site identifiers, bumper stickers.

3) **Advocacy**
   The radio program will reinforce advocacy efforts by modelling positive social and religious leaders. The advocacy program can provide the radio program names and phone numbers of local level ‘champions’ for potential interview. Also, the local level advocates can promote radio listenership in their communities.
18. ROLES, RESPONSIBILITIES AND TIMELINE

See Workplan in separate file.

19. AUDIENCE DETAILS BY GEOGRAPHIC SETTING

A. KADUNA

The audience consists of urban men and women living in slums in Kaduna:

Language: Hausa

Religion
Mostly Muslim, some Christians, Animists (Magguzawa)

Marital Relationships:
This depends on the religion prevalent in the area, Northern Kaduna is populated by Muslims and somewhat polygamous, whereas the south is mixed, mainly Christian and monogamous.

Statistically speaking from the preliminary NURHI data:
Polygamy among women currently married/living with a man as if married was 17.0% of 458. This means that nearly 1 in every 5 married (or cohabiting) women surveyed was in a polygamous relationship.

Polygamy among the full sample of women was 7.7% of 1012. This means that of all the women surveyed by NURHI in Kaduna, about 1 in 13 women was in a polygamous relationship.

Occupation—Men:
Males are generally involved in blue-collar jobs, e.g. trading, construction work, driving commercial vehicles, riding commercial motorcycles (achaba). They may also be butchers, tailors, clerics, traditional medicine salesmen, mairuwa (water sellers), or may also be engaged in subsistent farming, though only making enough to feed themselves, nothing is saved or invested.

Women:
Women in the north of Kaduna tend to be housewives, some of whom may be in seclusion (purdah). They are usually involved in food processing (e.g. dan wake, awara, masa etc.), water and fuel (firewood) fetching, knitting, pomade-making, petty trading and hawking. In southern Kaduna most women knit, sew and cook food to sell in the metropolis (buka). Some are domestic staff as well.

Avg. number of Children/Family:
Due to polygamous relationships, the average number of children per family is 10-15, assuming 5 children per woman. In addition, many families might inherit and raise some orphans or children of poorer relatives in the rural areas, along with their own children.

Economic Status:
On average, poor or low income.

Environment:
Urban slum; the dwellings in the North are an adaptation of the rural Hausa home dwelling with a *zaure*. The main difference is the houses have a zinc/tin roof and the mud walls are plastered with cement in some cases. Increasingly some families rent out rooms to non-family members, this means the usual isolation of females from males is getting impossible to enforce. In the Southern part of the city, many unrelated families rent rooms in a big tenement house with a large compound or yard, usually with rooms built around a yard. All tenants share toilets and kitchens.

Respected Authority Figures:
For Kaduna North these figures are the *Masu Ungwa*, and the religious figures such as the Sheikhs, Imams and Mallams. In the South it’s mainly the church groups primarily ECWA and COCIN and the various associations based on ethnic or occupational groups e.g. the NURTW.

Influencers:
Religious leaders have a big influence. Indian movies, Hausa home videos, and football stars of the various foreign and local leagues also influence young people. Games are available for viewing at community viewing centers and some privately run viewing rooms which charge an entrance fee. The whole community listens to their Mai Ungwa, a position which in Kaduna, is recognised by the state government. They have a formal structure with a Chairman at the top and his deputy the Vice Chairman, PRO, Welfare Officers, Secretary, Treasurer, Financial Secretary etc. Meetings are held weekly.

Role Models:
People in the “posh” areas, Malali, Ungwan Rimi. Also people known for their religious piety and knowledge. Those who are rich but give to the poor.

Community:
In the northern part there is a strong communal spirit. The northern part is still relatively homogenously Hausa/Fulani with few non-Hausa traders who often times operate and own Chemist shops, auto spare parts and hardware shops. In the Southern parts you have a more cosmopolitan feel due to the conglomeration of ethnic groups living together. There is neighborliness and a community feeling based on living in close proximity or attending the same religious institutions for instance.

Entertainment Sources:
These include radio, folklore stories, video viewing, and cultural events. The men like sitting in groups at the Majalisa. Females enjoy ceremonies such as weddings and naming ceremonies, while teenagers like going to the viewing centers or visiting each other.

Access to Media:
While radio plays a role in entertainment, it also provides nearly 100% of information. TVs are also very popular but lack of constant electricity is a constraint.
Typical daily food:
Tuwo and mia (a thick porridge made from a grain flour and a meat and vegetable soup or stew); fura-da-nono (Fresh milk or yogurt mixed with a ground grain base), occasionally rice, Danbur, Rama, gwete, brabisko, koko, kose, kasara, kwasai, masa, miyan kuka, Taliya (Local Spaghetti), garau-garau, (rice with pepper and oil), Sweet potatoes (fried), meals are eaten 2 or 3 times a day depending on the pocket of the husband.

Meeting places:
Market places, farms, local provision store, mosque, local clubs, viewing centers, Majalisa, wedding parties and traditional events. For non-Hausa people, church meetings, ethnic associations, club meetings and re-unions, cultural dance clubs are some of the meeting places.

B. IBADAN

Female and Male audiences residing in Ibadan URBAN SLUM:

Slums in Ibadan:

Ethnicity and Language:
All ethnic groups are found in these areas but majority are Yoruba.

Religion:
Christians, Muslims, Traditional adherents of Ogun, Orisha, Shango and Ifa. Many Christians and Muslims also mix traditional religious beliefs and consult priests of those faiths as necessary (Babalawo, pastor or prophet, alpha). There is an overriding belief in reincarnation and a reverence of the ancestors. Generally, adults decide on their eventual religious beliefs despite being born into one faith or the other. It is common to have mixed faith marriages and siblings adhering to different faiths.

Marital Relationships:
Polygamy is culturally acceptable and is practised by both Christians (though disapproved by many denominations) and Muslims (approved up to 4). Modern attitudes are making monogamy an attractive and more common norm these days, though some husbands might keep mistresses outside the home.
Statistically speaking from the preliminary NURHI data:
Polygamy among women currently married/living with a man as if married was 18.6% of 1309. This means that nearly 1 out of every 5 married (or cohabiting) women surveyed was in a polygamous relationship.

Polygamy among the full sample of women was 12.2% of 1986.
This means that of all the women surveyed by NURHI in Ibadan, nearly 1 in 8 women was in a polygamous relationship.
Occupation:
Men are predominantly artisans, welders, mechanics, tailors, and masons. They are also butchers, traders, bus drivers, bus conductors, okada riders. Many were involved with the railways and Post and Telegraph services known as P&T worker. Some are laborers or work at very junior levels with the local or state government in the civil service. The women are very independent and deal mostly in trading activities, hair dressers, food vendors etc.

Avg. number of Children/Family:
It is not socially allowed to count one’s children and though urban, most of Ibadan is very much traditional still and desire for many offspring (5-6) is the norm.

Economic Status:
On the average, poor or low income. High rate of poverty, unemployment and youth militancy and gang activities. Youth are easily lured to unleash violence against political opponents of their sponsor or “god father.”

Environment:
Mud houses with tin/zinc sheet roofs. Some storey buildings also built with mud and with steep steps meandering up the building. Domestic animals like goats, sheep, and chickens can be found freely on the streets. Roads are mostly not tarred or are worn out with potholes.

Respected Authority Figures:
The Olubadan, Baales, Religious leaders, elderly relatives.

Influencers:
Young people are influenced by popular musicians, actors and actresses of the Yoruba film genre. They imitate their peers and respect people they know who have made good financially through whatever means.

Community:
In some parts of Ibadan, people live in homesteads in close proximity to each other as extended family structures. Everyone knows everyone else and is involved in the smallest details of each other’s lives. Even in the more cosmopolitan areas of the city, there is a strong neighbourhood and community feeling as people share facilities and privacy is discouraged.

Access to Media:
Radio, TV, Yoruba films, language newspapers

Entertainment:
Masquerades (Oloolu) are common features of these areas and they restrict women’s movement once they come out. So during these periods, women stay indoors from dusk till dawn. Other masquerades (Alapansanpa) cane carrying ones that chase people who tease them.

Night Life:
People sit outside with their radios. They also enjoy parties (owambe). They love celebrations, funerals and memorial parties, weddings and naming ceremonies and will turn out in uniform attires known as aso-ebi. They love to sing and dance and spray money on
dancers to demonstrate their appreciation. Yorubas also engage in praise singing and every child has a praise song called *Oriki*.

**Historical Sites:**
*Mapo Hall* on Mapo Hill is a remarkable structure built in 1926 through communal effort.

**Fashion:**
*Women*—Ankara and lace (*Iro* and *Buba*)
*Men*—*Buba* & *sokoto* and *agbada*

**Food:**
*Amala* (white or black), *Iyan* with *gbegiri*, *ewedu* or *efo riro*

**Drink:**
*Emu* and *ogogoro*

**Special Snack:**
They drink *garri* a lot, eat *boli* (roasted *Plantains*) and roasted *yam*.

- *Ibadan people love war and revenge. The young men are commonly in gangs for trouble due to lack of education and unemployment. So many are primary and secondary school dropouts*

C. **ABUJA FCT**

Audiences residing in *Abuja FCT*:

**Location:** *Abuja Urban Slums.* These include Karu Village (Behind Karu Market zone), Mpape, Kado village, Kubwa village.

When Abuja was appropriated by an act of law and turned into the Federal Capital Territory, indigenes, mainly Gbagyi, were compensated and relocated outside of the area to enable the planning and development of infrastructure from scratch. However, many of those who left found their ways back to settle outside of the immediate or planned parts. Other settlers from other parts of Nigeria who came to the FCT prospecting for one of the numerous construction jobs at the time proliferating the brand new city, began to arrive in those shanty communities in a quest for cheaper accommodation. Some of the earlier settlers count as far back as 20 to 30 years since arrival. Majority of them have become so entrenched that their own children and grand children only know these places as home and can now barely trace their roots to any other place.

Living conditions in these areas are quite difficult. They are densely populated with people from all parts of Nigeria, for example, Gbagysis, Hausas, Igbos, Yorubas, Efiks.

**Housing Structure:** Some of the houses are built with mud especially in the Kado, Mpape and Kubwa areas. They are so closely built together and quite often, some of them have makeshift doors that really do not need any locks. Some of these houses are also constructed with zins and are poorly ventilated.
**Road Network:** In most cases, these areas do not have access roads. Where available, it is often a treacherous, bumpy track that will task your driving skills to manipulate and because the areas were never planned structurally, most people would have built their shacks on where the roads ought to have been and so people driving in would have to do a lot of meandering to get to their destination or in some cases, park and continue the journey on foot.

**Beliefs:** Christians, Moslems, Traditional worshippers. A lot of them also believe in consulting mallams or babalawos for solution to certain problems even though they have strong Christian or Muslim backgrounds. Churches are seen at every corner, some in makeshift shacks and some in proper buildings. Mosques are also found at every entrance into every street or corner. Other signs indicating that you can get some other religious help are advertized on mounted signs.

In time past, people often looked out for each other. Burglaries and armed robbery were not at all common in most of these areas but lately, some families have begun to experience the onslaught of crime.

**Leadership:** They have chairmen and some other people that assist in the leadership of the communities. They also have constituted volunteer vigilante groups that take care of the communal security. The people are made to contribute a monthly N300 per family as security vote and this is kept with the chairman to pay the young men who provide the service.

**Challenge:** In Kubwa area, it was discovered some time ago that the community vigilante group was responsible for the spate of armed robberies in the area. Someone took the trouble to investigate and found that this was so. A particular street was discovered to be a hideout and a hemp smoking area for the hoodlums before their operation. There is a high youth unemployment rate as well as extreme poverty in the shadow of ostentatious living by politicians and some government officials; coupled with this is the very high cost of living.

**Jobs:** Majority of the people are artisans: hair dressers, okada riders, butchers, market women. Another feature is some Hausa traders who deal specifically in vegetables like carrots, lettuces, cabbage etc. These are often seen arranged in neat and colourful rows in certain areas of the villages or hawked in wheelbarrows and people are seen at all hours of the day stopping to buy these vegetables. Food is quite cheap in these areas and people come from the city center in search of cheaper foodstuff from these areas.

**Slangs:** The Lingua Franca in these urban settlements is Pidgin English and the use of common slangs and colloquialisms as well as a mixture of words from the numerous languages around. Common ones include: e go jell, e go be, save (to mean see you later or bye).

**Note about polygamy in FCT:**
Statistically speaking from the preliminary NURHI data:

*Polygamy among women currently married/living with a man as if married was 10.9% of 378.*

This means that nearly 1 out of every 9 married (or cohabiting) women surveyed was in a polygamous relationship.
Polygamy among the full sample of women was 5.9% of 699. This means that of all the women surveyed by NURHI in FCT, about 1 in 17 women was in a polygamous relationship.

D. **ILORIN**

Audiences residing in Ilorin:

Ilorin is predominantly Yoruba of Fulani descent. The language spoken is Yoruba; among the Muslims, the culture is very northern but mixed with Yoruba and Fulani traditions. Families are mixed; both Christian and Muslim cohabiting without much conflict. Ilorin North is where you will find the Yoruba-Fulani mix.

**Relationships:**
Families in Ilorin are closely knit and usually, there is usually a family house where members of the extended families reside. With regards to boyfriends and girlfriends (unmarried partners), they may also live together and people may know; however, the parents may not be aware unless the man has introduced the lady to the family. The man controls the relationships.

**Note about polygamy in Ilorin:**

Statistically speaking from the preliminary NURHI data: *Polygamy among women currently married/living with a man as if married was 25.5% of 1097.* This means that around 1 out of every 4 married (or cohabiting) women surveyed was in a polygamous relationship.

*Polygamy among the full sample of women was 15.9% of 1760.* This means that of all the women surveyed by NURHI in Ilorin, nearly 1 in 6 women was in a polygamous relationship.

**Historical Context:**
They are Yorubas believed to be of Fulani descent. Predominantly Islamic culture with many people of Fulani, Nupe, Yoruba origin.

**Language:** Predominantly Yoruba. Hausa is also widely spoken.

**Types of housing:**
The houses are built close together with compounds in front of the main family house; like Ibadan [That was the description given to me]

**Jobs:**
There is not much private business going on so the civil service is the predominant labour employer. There is serious youth unemployment accompanied by the troubles associated with idleness.

**Community Structure:**
**Leadership:**
They are ruled by an emirate because of their northern ties. There is an emir, a position that is hereditary and traceable through the bloodline of Othman Danfodio, early Sultan of Sokoto. Families have heads (usually the patriarch or oldest male in the extended family). Ward heads and District heads head communities. The Emir has a council of titled or turbaned men. Learned men in Islamic jurisprudence, Imams, are also leaders of mosque-attendees who might get guidance, arbitration of disputes, divorce, and equitable sharing of inherited property.

**Family ties:**
Families are very closely knit in Ilorin. Parents and grandparents have very strong influence on their children and it is not unusual to see them living in the same compound or in close proximity.

### 20. GLOSSARY

**Hausa words and phrases**

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<th>Meaning</th>
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<tr>
<td>Achaba</td>
<td>Commercial motorbike transport</td>
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<tr>
<td>Awara</td>
<td>Open air restaurants or street food shops</td>
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<tr>
<td>Buka</td>
<td></td>
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<tr>
<td>Dawake</td>
<td></td>
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<tr>
<td>Magguzawa</td>
<td>Traditional religion adherents</td>
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<tr>
<td>Mairuwa</td>
<td>Water men (water seller)</td>
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<tr>
<td>Mallam</td>
<td>A learned Islamic scholar/ common title for a Hausa man in urban centers</td>
</tr>
<tr>
<td>Massa</td>
<td>Pancakes made of rice/maize flour and yoghurt</td>
</tr>
<tr>
<td>Mai angwa/Masuangwa</td>
<td>Village head(s)</td>
</tr>
<tr>
<td>Purdah</td>
<td>The custom of secluding women in-doors</td>
</tr>
<tr>
<td>Suya</td>
<td>Barbecued skewers of meat sold on the streets</td>
</tr>
<tr>
<td>Zaure</td>
<td>Open lounge area for receiving male visitors</td>
</tr>
</tbody>
</table>

**Yoruba words and phrases**

<table>
<thead>
<tr>
<th>Term</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alfa</td>
<td>Muslim Cleric? Or Mystic?</td>
</tr>
<tr>
<td>Amala</td>
<td>Dry yam or cassava flour cooked into a thick mush to be eaten with soup or stew.</td>
</tr>
<tr>
<td>Babalawo</td>
<td>Juju man</td>
</tr>
<tr>
<td>Baale</td>
<td>District or Village head/King</td>
</tr>
<tr>
<td>Buka</td>
<td>A local restaurant or partly open eatery</td>
</tr>
<tr>
<td>Boli</td>
<td>A popular street snack, roasted plantain</td>
</tr>
<tr>
<td>Emu</td>
<td>Palm wine</td>
</tr>
<tr>
<td>Iyan</td>
<td>Pounded yam</td>
</tr>
<tr>
<td>Shango</td>
<td>Yoruba god of thunder</td>
</tr>
<tr>
<td>Ogogoro</td>
<td>Strong local gin brewed from palmwine or sugarcane etc.</td>
</tr>
<tr>
<td>Ogun</td>
<td>Yoruba god of iron and patron of those who work with metal, butchers etc.</td>
</tr>
</tbody>
</table>
Olubadan
The king of the Ibadan people

Oriki
Personal Praise poem

Owambe
Yoruba outdoor party or social gathering with feasting, and dancing to a live band to celebrate burials, memorials, weddings, birthdays, naming ceremonies, house warming etc.

**Pidgin Words and Phrases**

Abeg, abeg, abeg
P-l-e-a-s-e!

Abuja Babes/Lagos Babes
Certain types of young fashion-crazy ladies with very expensive tastes and requiring much financing.

Abuja Husband/Abuja Wife
Not actually married couples, cohabiting for convenience in Abuja, whilst married to other people who reside in other towns

Big Babes
Another name for the Lagos or Abuja Babe

Bros
Diminutive for “Brother.” Something you call men you don’t really know

Check out
Leaving.

Correct man/woman
Some one you approve of. Good people

E get as e be
I smell a rat

For Where?
You better not believe it!

My Guy
Buddy. Hey you.

No shakin’
I’m cool. I’m not bothered

Wetin
What is it?

Oga
Boss. Common reference to someone senior or sarcastic reference to someone posing to be important.

Oya
Hurry, quickly

Sisi
Sister. Something you call a lady you don’t know well

Swaga (swag)
Style, coolness

Arrive (as in I don arrive-o)
You are doing well, You have got rich or you now have a car

**Glossary for FP/RH**

Abortion
- Zubar da ciki

Abstinence
- Kauracewa saduwa

Ante-natal care (ANC)
- Awun chiki

Anxiety
- Fargaba

Avert
- Hana

Bilateral tubal ligation
- Juyin mahaifa

Birth spacing
- Hutun haihuwa

Bleeding
- Zubar da jini

Community linkage
- Tausayawar al'umma

Conception
- Daukar ciki

Condom (Female)
- Robar kariya ta mata

Condom (Male)
- Robar kariya ta maza
<table>
<thead>
<tr>
<th>Term</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Confidential</td>
<td>Cikin sirri</td>
</tr>
<tr>
<td>Contraception</td>
<td>Hutun haihuwa</td>
</tr>
<tr>
<td>Counseling</td>
<td>Tattaunawa</td>
</tr>
<tr>
<td>Depression</td>
<td>Matukar damuwa</td>
</tr>
<tr>
<td>Diaphragm</td>
<td>Rodar kofar mahaifa</td>
</tr>
<tr>
<td>Empathetic</td>
<td>Tausayawa</td>
</tr>
<tr>
<td>Empowered</td>
<td>Ilimantarwa</td>
</tr>
<tr>
<td>Evacuation of uterus</td>
<td>Wankin ciki</td>
</tr>
<tr>
<td>Fertility</td>
<td>Damar daukar ciki</td>
</tr>
<tr>
<td>Guilt</td>
<td>Kunci</td>
</tr>
<tr>
<td>Health care provider</td>
<td>Ma’aiakin lafiya</td>
</tr>
<tr>
<td>Health facility</td>
<td>Asibiti</td>
</tr>
<tr>
<td>Infertility</td>
<td>Rashin haihuwa</td>
</tr>
<tr>
<td>Informed decision</td>
<td>Daukar matakın dalya dace</td>
</tr>
<tr>
<td>Injectable</td>
<td>Allurar hutun haihuwa</td>
</tr>
<tr>
<td>Intra-Uterine Contraceptive Device</td>
<td>Robar cikin mahaifa</td>
</tr>
<tr>
<td>Judgmental</td>
<td>Yanke hukunci</td>
</tr>
<tr>
<td>Maternal Morbidity</td>
<td>Rashin lafiyar mata</td>
</tr>
<tr>
<td>Maternal Mortality</td>
<td>Matuwar mata lokacin ciki ko haihuwa</td>
</tr>
<tr>
<td>Miscarriage</td>
<td>Bari</td>
</tr>
<tr>
<td>Modern contraceptive methods</td>
<td>Hanyoyin hutun haihuwa na zamani</td>
</tr>
<tr>
<td>Norplant</td>
<td>Ashanar hannu</td>
</tr>
<tr>
<td>Peer pressure</td>
<td>Matsawar abokai</td>
</tr>
<tr>
<td>Pills</td>
<td>Kwayoyin hutun haihuwa</td>
</tr>
<tr>
<td>Planned pregnancy</td>
<td>Tsarar lokacin samun ciki</td>
</tr>
<tr>
<td>Post miscarriage</td>
<td>Bayan bari</td>
</tr>
<tr>
<td>Primary Health Services</td>
<td>Ayyukan lafiya a matakın farko</td>
</tr>
<tr>
<td>Promiscuity</td>
<td>Neman mata</td>
</tr>
<tr>
<td>Quality care</td>
<td>Kyakkawar kulawa</td>
</tr>
<tr>
<td>Requisite</td>
<td>Wande ya dace</td>
</tr>
<tr>
<td>Routinely</td>
<td>Akai - akai</td>
</tr>
<tr>
<td>Self-consciousness</td>
<td>Fahimtar kai</td>
</tr>
<tr>
<td>Sexual behaviour</td>
<td>Haleyyar kan saduwa</td>
</tr>
<tr>
<td>Sexuality</td>
<td>Saduwa</td>
</tr>
<tr>
<td>Spermicide</td>
<td></td>
</tr>
<tr>
<td>Treatment options</td>
<td>Zabin magani</td>
</tr>
<tr>
<td>Unwanted pregnancy</td>
<td>Cikin da ba’a shirya ba</td>
</tr>
<tr>
<td>Uterus</td>
<td>Mahaifa</td>
</tr>
<tr>
<td>Vasectomy</td>
<td>Fidar maza (haihuwa)</td>
</tr>
</tbody>
</table>