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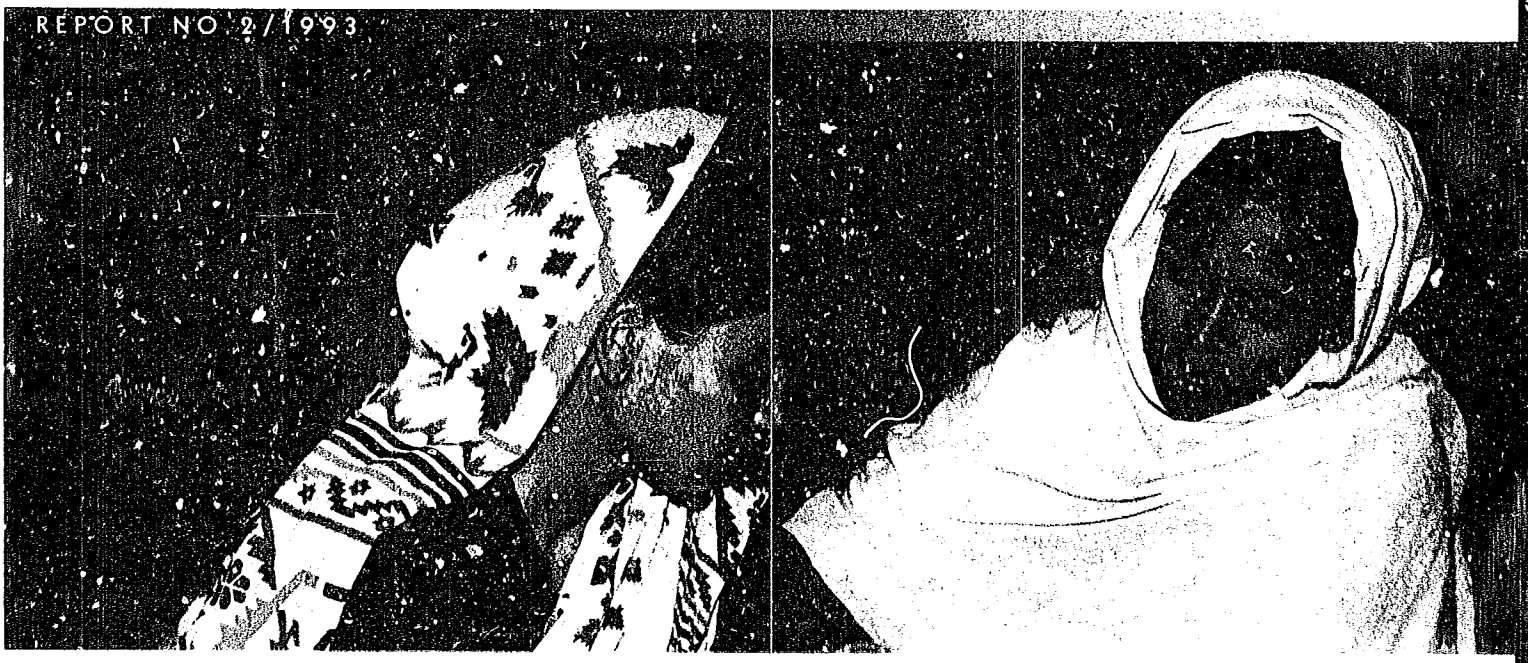

Evaluating the Effectiveness of a Family Planning IE&C Program in Bangladesh

DANIEL M. LISSANCE
WILLIAM P. SCHELLSTEDE

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PSI SOCIAL MARKETING AND COMMUNICATIONS FOR HEALTH

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Evaluating the Effectiveness of a Family Planning IE&C Program in Bangladesh

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The authors gratefully acknowledge the technical and financial support of the United States Agency for International Development mission in Dhaka, Bangladesh.

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PREFACE

The remarkable decline in the fertility rate of Bangladeshi women — from about 7 to 4.9 over a period of less than 20 years — has been extensively commented on by demographers and family planning experts. One of the most interesting aspects of this phenomenon, and one that confounds conventional wisdom is that this fertility decline occurred without the usual determinants of reduced fertility, i.e. economic development, industrialization, increased participation of women in the labor force and female education. These economic and social factors in what remains one of the most impoverished countries on earth were largely unchanged over the period.

Three major factors have been said to contribute to the drastic fertility decline — strong and consistent political support by government for family planning; unprecedented donor support; and easy access to a wide range of contraceptives through the public and private sectors.

One of the private sector acitvities was the USAID-funded and PSI-managed Social Marketing Project (now Social Marketing Company). The Social Marketing Project, the world's largest entity of its kind, began operating in Bangladesh during the 1970s, marketing several brands of condoms, oral contraceptives and vaginal foam tablets in more than 125,000 retail outlets throughout the country. The Project presently provides birth-spacing products to over one-third of all contracepting couples. It has sold, at low prices affordable to the poor, over one billion RAJA Condoms.

But before Bangladeshi couples, even those desiring smaller families, could be induced to become family planning users, the concept of family planning had to be made respectable and culturally and morally acceptable, even desirable. This was no easy task given the conservative nature of Bangladeshi society. Several IE&C programs designed to achieve this objective proved to be inef-

fective, apparently because the appeals used to induce family planning were felt to be personally irrelevant by the intended target audience.

Enter PSI. With the support of USAID and the Government of Bangladesh, PSI searched for the proper keys and triggers to convert the latent demand into overt use. Anthropological research found the key to be husbands, who in Bangladeshi society make all the important decisions affecting their families' welfare, but who had not been extensively targeted by previous family planning interventions. The triggers were carefully crafted motivational messages that presented arguments in favor of adopting contraceptive behavior in personally relevant and meaningful terms and that employed visual and verbal imagery difficult to reject or ignore.

The following paper presents the genesis, design, implementation and evaluation of this innovative communications program, which PSI believes to have made a signal contribution to the rapid rise of contraceptive prevalence, and consequent fertility reduction, in Bangladesh.

Richard A. Frank
President

Evaluating the Effectiveness of a Family Planning IE&C Program in Bangladesh

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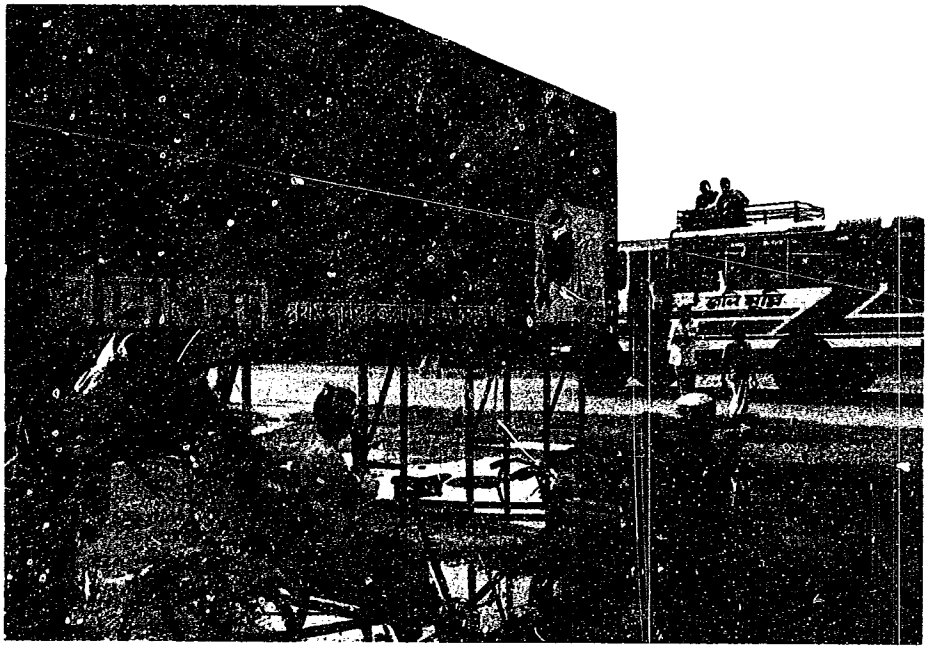


I. INTRODUCTION

Impact evaluation of the service delivery component of family planning programs in developing countries is a relatively straightforward process, and one which has largely been standardized across countries. Input/output measures can be employed to evaluate the relative cost-effectiveness of the various service providers; the calculation, in its simplest terms, involves dividing the cost of delivering the service by the number of couple years of protection (CYP's) provided. The aggregate impact of all program components can be obtained by conducting periodic studies of contraceptive prevalence among at-risk couples.

The assessment of the effect of information, education, and communication (IE&C) programs meant to motivate the at-risk population to adopt family planning is a more difficult task, since the desired effects tend to be subtle and qualitative in nature, and the contribution of a given IE&C program to any effect

A PSI community-based distributor explaining OVACON pill use to a village client

being measured is frequently difficult to disaggregate from contributions made by other formal and informal communications sources. It may be speculated that because of these and other research design obstacles, many family planning IE&C efforts are not subjected to rigorous evaluation; in any event, there is little published information on the results achieved by such efforts.[1] In attempting to evaluate a broad effort to affect knowledge, attitudes and behavior relating to AIDS in the United Kingdom, the Department of Health and Social Security concluded that it was "impossible to isolate specific advertising effects."[2]

Part of the difficulty may stem from the fact that the ultimate goal of such programs — i.e., an increased use of contraceptives — is seldom thought of among those researching the factors affecting contraceptive use in concepts amenable to manipulation by IE&C campaigns. The notion of proximate determination in demography is applicable to populations, but less so to individuals. For example, the parameter perhaps most often found to correlate (and correlate most closely) to contraceptive use is female education; but that correlation is not helpful to the design of a communications strategy. That is, one might infer from it that messages must be simple and straightforward, but it does not lead to the construction of a persuasive argument for the adoption of contraception. As some investigators researching the complexities of fertility in Central Africa put it, "....the study of quantifiable proximate determinants of fertility tends to neglect the complexity of behavior and how it is justified by the respondents themselves in the context of their particular view of the world."[3]

In fact, family planning IE&C activities are capable of being evaluated on a medium to long-term basis even in semi-literate or largely non-literate populations, provided that: 1) the formative research on which the effort is based addresses factors that can inform a communications program, 2) the communications objectives are clearly defined, 3) the strategies are precisely formulated and articulated, and 4) the research instruments are designed in a culturally relevant manner. This paper reviews the approach taken in the development and evaluation of a national-level family planning motivational program in Bangladesh, on behalf of the Bangladesh Social Marketing Project.

[1] John Middleton and Robert J. Lapham, "Demand Generation," in Robert J. Lapham and George B. Simmons, eds., Organizing for Effective Family Planning Programs, National Academy Press, Washington, 1987, pp. 306-307.

[2] "AIDS Monitoring Response to the public education Campaign," Department of Health and Social Security and the Welsh office, Her Majesty's Stationery Office, London, 1987, p. 7.

[3] James Trussel, Etienne van de Walle and Francine van de Walle, "Norms and Behavior in Bulgarian Fertility", Memo (Draft 2), 1987, p. 1.

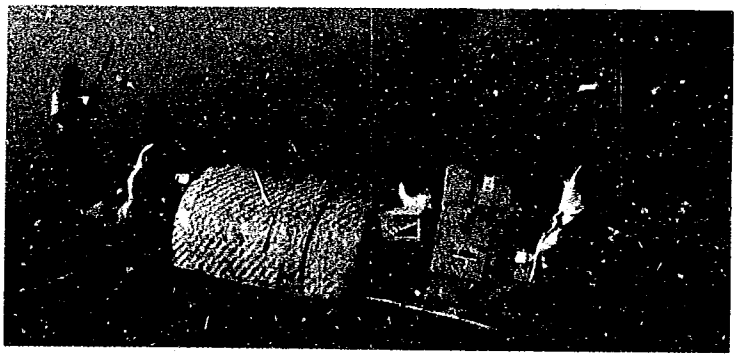
[4] Now: Social Marketing Company (SMC).

The Bangladesh Family Planning Social Marketing Project

The Bangladesh Family Planning Social Marketing Project (SMP)*, a non-government organization created through an agreement between Population Services International (PSI) and the Government of Bangladesh, has been marketing non-clinical contraceptives at heavily subsidized prices since 1976. The United States Agency for International Development (USAID) supplies condoms and oral contraceptives to the Project at no cost, and also funds the bulk of the marketing, promotion, and distribution costs. PSI provides the services of a full-time advisor to the Project, as well as periodic technical assistance in several areas of management.

During 1985, its tenth year of existence, the Project distributed approximately 73 percent of all the condoms used in Bangladesh and approximately 25 percent of all oral contraceptives.

In 1982, the USAID Mission and PSI, anticipating an eventual plateauing of the existing demand for contraceptive services, decided to undertake a generic demand-creation (or motivational) program that would serve to support the activities of all family planning institutions in the country.



Bangladeshi salesmen deliver contraceptive products by boat on riverine sales route.

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II.
THE BANGLADESH FAMILY PLANNING MOTIVATIONAL CAMPAIGN

The program's broad goals were to:

1. Actualize existing latent demand for contraception;
2. Help create a demand for family planning among couples reaching reproductive age;
3. Motivate those who for one reason or another still resisted the concept of family planning.*

A. FORMATIVE RESEARCH

The first step in the development of a campaign strategy involved in-depth qualitative research among urban and rural men and women, non-users as well as users of family planning methods. Since the cultural milieu was thought to preclude the effective use of focus group discussions, individual in-depth interviews averaging 1-1 1/2 hours in length were employed instead. The questioning procedure was largely indirect, and relied heavily on projective techniques. A particularly productive technique was the photo-sort, in which respondents were asked to sort photographs of local men and women representing a wide range of age, social, occupational, and economic types, into two groups, those who were likely to practice family planning and those unlikely to do so. They were asked to give reasons for assigning photographs to one or the other group, and to select the photograph of the one person they would most like to have as a friend and to explain why. The investigators believed that this approach minimized the response biases typically encountered in using structured, direct questioning methods, particularly with respect to sensitive subject areas such as conjugal relations: the respondents were not being asked to expose and defend their own behavior and feelings, but those of others. The qualitative approach also yielded significant insights into the reasons underlying expressed attitudes, and the taped interviews provided some of the language later employed in the development of specific messages.

The qualitative research findings confirmed that previous IE&C programs, primarily those conducted by the Government, were able to generate almost universal awareness of the concept of family planning and relatively widespread awareness of the benefits of limiting family size. Yet the research also clearly indicated that these benefits had not been internalized by the target audience segments; and that this lack of internalization was due to a number of blockages or "resistance points" that militated against the adoption of family planning even among those not desiring any more children. Chief among these resistance points were the following:

* Under a sub contract with PSI, the motivational campaign was designed and implemented by Manoff International, Inc during the period 1983-85. As of 1986 it became a PSI/SMP activity

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The Religious Factor

The number of children a couple will have is predetermined by Allah and Allah provides sustenance for every child He sends; for a devout Muslim to make his or her own decision on how many children to have is, in effect, to enter into competition with God.

Lack of Communication Between Spouses

It is widely thought that how many children a couple should have, and when to have them is not a proper subject for couples to discuss with each other; initiating a discussion of family planning on the part of the wife is unseemly in rural society.

Social Marketing Company condom demonstration for Bangladeshi sales women.

Fear of Detrimental Health Effects

It is also widely thought that birth control measures of any sort — temporary as well as permanent methods — are dangerous to health and may ultimately lead to death.

Ignorance about Contraceptive Options

Despite a high level of awareness of the existence and purpose of family planning, there is massive ignorance and confusion about the means of family planning.

To a large extent, this ignorance can be attributed to:

a. Lack of access to authoritative sources of information (due to illiteracy, isolation, poverty, etc.).

b. Lack of knowledge of authoritative information sources.

c. Lack of confidence in existing information sources (dislike or suspicion of family planning workers, government health clinic personnel).

d. Lack of motivation or interest (many men feel that family planning concerns only women).

An elephant parade marks the sale of the billionth condom in Bangladesh in 1991.

B. STRATEGY

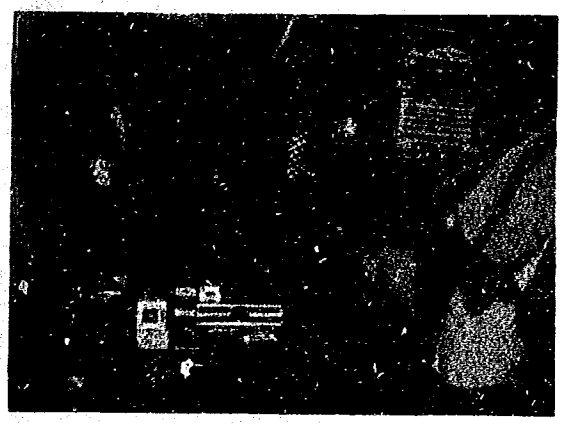
The message strategy subsequently developed was specifically designed to minimize these resistance points (except for the religious issue which the government did not wish to be addressed), and to reinforce existing positive attitudes toward family planning and its benefits as a means of facilitating this process.

The communications strategy, as finally developed:

- identified rural men as the primary target audience, rural women and urban men as secondary target audiences, and opinion leaders and other influentials as the tertiary target audience;
- positioned modern contraceptives as safe to use;
- encouraged husbands to discuss the subject of family planning with their wives and to choose the method most suitable to them both;
- stressed the personal economic and health benefits of family planning;

- encouraged information-seeking behavior, and directed those desiring additional information to an easily accessible source (via three SMP-sponsored radio programs wherein listeners' questions about family planning methods were answered);
- positioned the adoption of family planning as "the right thing to do" and as "the wise man's decision."

An all-media campaign was developed to implement the strategy, consisting of a barrage of radio spots and films shown on television, in cinema halls, and on SMP's fleet of eight mobile film vans. An important component of the campaign was the creation of a radio serial drama (soap opera) in which the principal character was Laily, a government family planning worker, a device which enabled the writers to integrate family planning material smoothly into the dramatic fabric.



A rural kiosk is one of the many outlets for RAJA condoms. In 1992, the Social Marketing Company sold 68% of all condoms distributed in Bangladesh.

C. EVALUATING THE EFFECTIVENESS OF THE PROGRAM

The development of a mechanism to measure the effectiveness of the communications programs and to provide feed-back to the program managers, began simultaneously with the development of communications materials. The evaluation effort would measure the extent to which the program was achieving its stated communications objectives; specifically, the extent to which there was a reduction in the prevalence and strength of the identified resistance points, among the various target audience segments, and changes in the awareness of specific family planning benefits. In addition, the research would measure awareness and recall of campaign messages.

The study protocol, developed in collaboration with USAID, called for conducting a baseline survey just prior to the inception of the program, with follow-up or "tracking" surveys conducted at 12-month intervals among comparable, but independent survey samples. Each sample consisted of 1,000 respondents, half men, half women, equally distributed among urban and rural areas. The samples were well-dispersed geographically, but extremely remote and relatively inaccessible areas were deliberately excluded from the sampling frame.

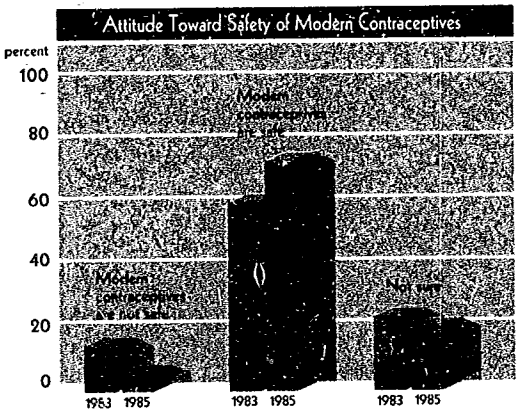
III. PROGRAM IMPACT

A SUMMARY OF KEY FINDINGS

For the purpose of simplicity, the findings discussed in this section will focus only on the primary target audience of the communications program, rural males (although data were collected among the secondary target audience groups as well). The 1983 figures represent baseline (pre-program) data; the 1985 figures are derived from the Second Evaluation Study, conducted after the program had been in operation for two years.

Attitude Toward Safety of Modern Contraceptives

Doubts about the safety of modern contraceptive methods were expressed by substantially smaller pro-



portions of respondents in the 1985 survey (25.8% saying "not safe" or being unsure) than in the 1983 survey (38.7% expressing doubts).

Information-Seeking Behavior

Information-seeking behavior was measured by asking respondents whether they had asked anyone for information about family planning in the past six months (active seeking) or whether anyone had visited the respondent to provide family planning information in the past six months (passive seeking).

Information-Seeking Behavior	1983	1985
Sought information from someone	11.3%	17.3%
Visited by someone who provided information	20.6	15.3

The results show that while active information-seeking behavior increased over the 2-year period, passive seeking had declined:

Discussion of Family Planning with Others

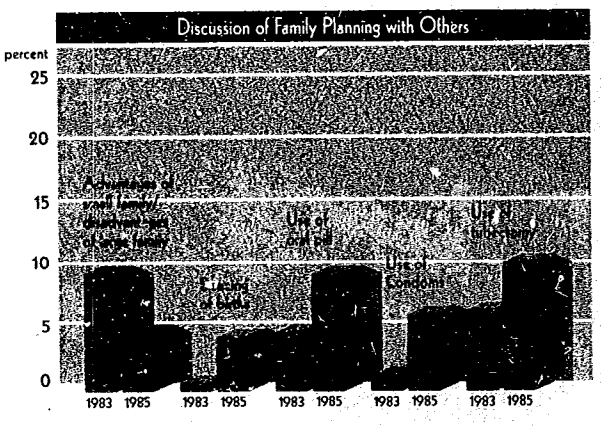
Respondents were asked whether they had discussed family planning within the past six months with their spouses, other relatives, and neighbors and friends.

Discussion of Family Planning with Others	1983	1985
Discussed F. P. with spouse	33.8%	37.5%
Discussed F. P. with other relatives	17.6	8.1
Discussed F. P. with neighbors, friends	25.5	20.7

Those who had had such discussions, were asked to report the content of these discussions.

The results show that, while there had been an increase in the proportions discussing family planning with their spouses, there were declines in the proportions reporting discussions with others.

With respect to the specific nature of the discussions between husbands and wives, the results show a distinct shifting from the general to the specific, i.e., a decline in conversations dealing with the advantages of



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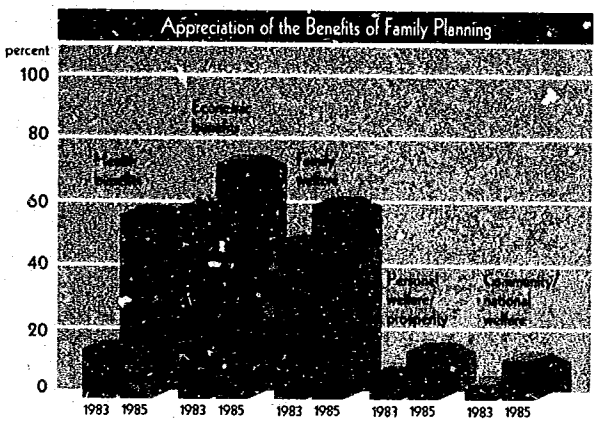
a small family, and increases in such topics as birth spacing, and the use of specific contraceptive methods.

Appreciation of the Benefits of Family Planning

General attitudes toward the concept of family planning were found to be overwhelmingly positive in all surveys, with about 90 percent of all rural males stat-



ing that family planning was "a good idea". However, the reasons cited for feeling that family planning was a good idea showed that, over the two-year period, the awareness and appreciation of the various benefits of family planning had increased substantially, most notably so in recognition of the maternal and child health benefits (a subject which received significant emphasis in the second year of the communications program).

Intent to Use Family Planning in the Future

Future intent to adopt family planning among current non-practitioners showed a modest increase.

Intend to Use Family Planning in the Future	1983	1985
Intend to use in future	42.1%	48.0%

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Awareness and Use of Contraceptive Methods

Over the two-year period, awareness and use of most modern contraceptive methods among survey sample respondents showed fairly substantial increases, paralleling the results found in the 1983 and 1985 Bangladesh Contraceptive Prevalence Surveys.

Spontaneous Awareness* of Methods

*The term "awareness" is used here corresponds to the term "knowledge" used in the Contraceptive Prevalence Studies.

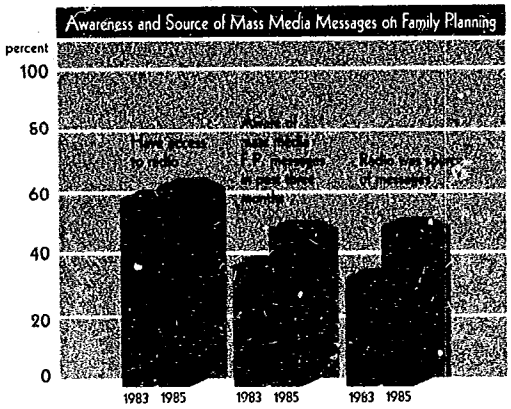
Spontaneous Awareness of Methods	1983	1985
Oral pill	77.7%	84.1%
Condom	52.1	64.7
Vaginal methods	15.3	9.0
Tubectomy	47.7	61.2
Vasectomy	40.0	45.1
IUD	9.8	17.7
Injection	11.2	14.6
Safe period	6.5	6.7

Current Use of Methods

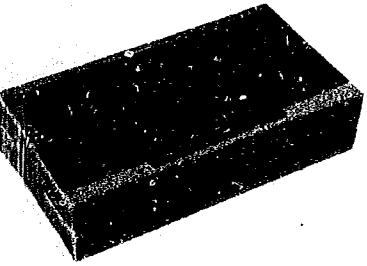
Current Use of Methods	1983	1985
Any modern method	14.4%	24.8%
Oral pill	4.2	5.1
Condom	3.7	5.5
Vaginal methods	0.9	0.8
Tubectomy	4.7	9.3
Vasectomy	0.5	0.8
Tubectomy and Vasectomy	–	1.1
IUD	0.5	2.0
Any traditional method	7.9	5.8
Any method	22.3	30.6

Awareness and Source of Mass Media Messages on Family Planning

Awareness of mass media messages rose significantly over the two-year period, from 39.7 percent to 51.4 percent. Radio was the predominant source through which respondents were exposed to the messages. Since the effective reach of radio among this target

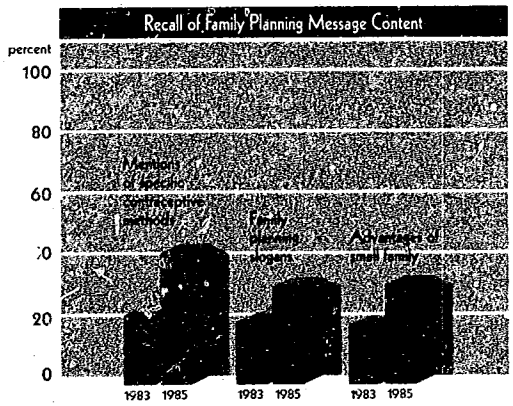


audience segment was 64 percent in 1985, it may be concluded that family planning messages were reaching 80 percent of the available radio audience by 1985, compared with a reach of about 60 percent in 1983.



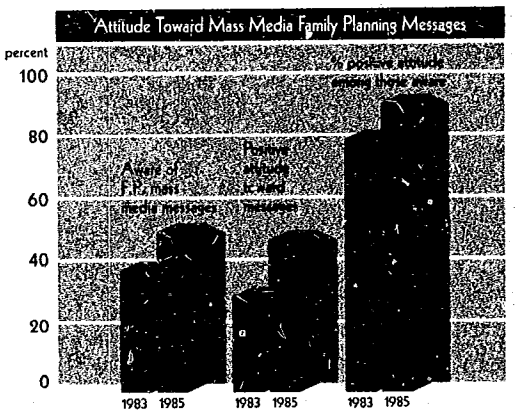
Recall of Family Planning Message Content

Although recall of specific message content had increased across most response categories in 1985, the most dramatic increase occurred in the mentions of specific contraceptive methods, both generic and brand names (although only generic methods were referred to in the campaign messages, it may be hypothesized that the motivational campaign helped to elevate awareness of brand promotional advertising run by the Social Marketing Project and by Organon, a private sector manufacturer of oral contraceptives).



Attitude Toward Mass Media Family Planning Messages

Attitudes toward family planning messages, predominantly positive in the 1983 survey, became more so in the 1985 survey.



Discussion

The evaluation studies concluded that the specific objectives of the communications program were being achieved. It was clear that those objectives which dealt with the imparting of new knowledge (i.e., that modern contraceptive methods were safe, that birth spacing was conducive to better maternal and child health, and that the condom and the pill were effective means of realizing the benefits of family planning) were being achieved at a more rapid rate than those objectives which called for a modification of existing socio-cultural patterns, such as the stimulation of husband and wife discussion about family planning.

B. Attribution of Changes

To what extent could these apparent program effects be related to exposure to the messages developed in this program as opposed to other influences or sources of information? In order to answer this important question, a secondary analysis of the survey data was performed in which respondents were classified into two groups: "proven listeners", defined as those who

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were able to recognize one or more of three key phrases employed in all the campaign messages*, and "all others", those who were unable to recognize even one of the phrases. While the two groups are mutually exclusive in concept, the categorization is not absolutely "clean", since there may be some spurious claiming of phrase recognition in the first category, and there may be some in the "all others" category who were exposed to and affected by the program materials but did not recognize the phrases.

Demographic analysis of the rural male target audience showed that proven listeners tended to be younger, better educated, more likely to be engaged in occupations other than farm labor, and had fewer children than their non-listening counterparts. No statistically significant differences between the two groups were found with respect to length of marriage, wife's employment status, religion, and desire for additional children.

Attitudinally and behaviorally, listeners differed from non-listeners in a predictable manner. Statistically significant differences between the two groups were found with respect to awareness of mass media messages on family planning, positive attitudes toward family planning, awareness of health and family welfare benefits of family planning, knowledge of certain specific family planning methods, use of modern methods, perceived safety of modern methods, information-seeking behavior, and inter-personal communications on family planning with spouses, other relatives, neighbors and friends.

* The phrases were: "I was a fool -- now I am a wise man", "Do not listen to ignorant tales told by ignorant people", and "Do the right thing"

Attribution of Changes

Independent Variable	Listeners	Non-Listeners	Signif. of Diff.
Awareness of F.P. Mass media messages	76.8%	22.2	**
Positive attitude toward F.P.	96.3	84.0	*
Awareness of health benefits	50.0	29.6	*
Awareness of family welfare benefits	76.8	53.1	**
Knowledge of oral pill	97.6	91.3	–
Knowledge of condom	93.9	66.7	**
Knowledge of vaginal methods	51.2	25.9	**
Knowledge of tubectomy	95.1	95.1	–
Knowledge of vasectomy	86.6	83.9	–
Knowledge of IUD	54.9	29.6	**
Knowledge of injection	75.6	51.9	**
Ever use of modern method	41.5	18.5	**
Current use of any method	29.3	14.8	*
Current use of modern method	22.0	8.6	*
Modern methods are safe to use	81.7	65.4	*
Sought F.P. information in past 6 months	28.0	3.7	**
Discussed F.P. with wife	53.7	13.5	**
Discussed F.P. with relatives	15.9	–	**
Discussed F.P. with others	36.6	3.7	**

* CHI SQUARE OF DIFFERENCE SIGNIFICANT AT .05 LEVEL.
** CHI SQUARE OF DIFFERENCE SIGNIFICANT AT .01 LEVEL.

In order to determine whether these differences could be explained by exposure to the program materials, or were attributable to the observed demographic difference between the two sub-groups, the results were subjected to multi-variate regression analysis. This analysis showed that proven listenership to the program materials was significantly related to awareness of mass media messages on family planning, attitude toward safety of modern contraceptives, discussion on family planning with spouse, friends, and neighbors, and to active information-seeking behavior.

On the other hand, proven listenership was not significantly associated with the observed differences in current use of any contraceptive method.

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IV.
CONCLUSION

The secondary analysis of the data validates the conclusions reached by the evaluation studies, namely, that the communications objectives of the family planning motivational program were being achieved. Beyond the specifics of the program discussed in this paper, we have tried to demonstrate the feasibility of subjecting IE&C programs to rigorous evaluation procedures. With the expanding recognition of the importance of carefully formulated IE&C programs in supporting not just family planning, but other public health interventions world-wide, comes the burden on IE&C program managers to demonstrate their accountability for the resources expended on these programs, and the family planning and public health communities are entitled to seeing more and more similar evaluation studies reported in the professional literature in the future.