



8 Generating demand

The introduction of subcutaneous DMPA (DMPA-SC, brand name Sayana® Press) promises to expand women’s access to family planning options by increasing opportunities for lower-level health workers and even clients themselves to administer injectable contraceptives. Insights from the first introductions can help inform new country experiences and transitions, whether small pilots or scaled delivery. This section discusses results and lessons learned during introduction pilots in four countries and provides recommendations to guide future efforts by ministries of health and implementing partners related to **demand generation**.

CREATING DEMAND FOR A NEW CONTRACEPTIVE OPTION

Behavior change communication is a process that motivates people to adopt healthy behaviors or lifestyles. Because family planning choices are made in a broader context of social and gender norms, outreach to audiences requires more than just information, education, and communication. Encouraging women to access family planning and building a supportive social and cultural environment are both important components of a communication and demand-generation strategy for product introduction or scale-up. Strong communication, outreach, and awareness-raising about a new product can help to increase the use of modern contraceptives, including DMPA-SC. Communication can also

foster understanding and dialogue within communities, improving trust in health interventions and preventing the spread of misinformation.

Communication activities may be broad in scope to encourage women’s access to family planning and social and cultural support. They may also be product-specific and more informational or promotional in nature. Both types of communication are ideal to expand public awareness about DMPA-SC as a new contraceptive option and to correct myths and misinformation. Method-specific communication materials can help women continue using their chosen method by explaining normal side effects and responding

to frequently asked questions. Many of the behavior change strategies during the pilot introductions focused on promoting a lifestyle that involves modern family planning methods as the preferred alternative to traditional practices or nonuse of contraception when women want to delay or space their pregnancies. When materials and messages were specific to DMPA-SC (Sayana Press), they were integrated into overarching strategies for promoting family planning services in general.

When used strategically, mass media such as radio and TV programming can reach large numbers of people with crucial information and persuasive messages. Interactive communication approaches such as home visits, community theater, and group discussions can foster dialogue within communities to influence social norms, garner support from trusted and influential leaders, and pave the way for broader family planning access. Interactive approaches in particular allow messages and information to be tailored to the specific needs of the end user.



INTRODUCTION TIP

Frequent radio spots were associated with relatively high levels of new family planning users seeking DMPA-SC in Niger and Uganda.

Overall, the DMPA-SC introduction project did not have an extensive budget to support communication and demand-generation activities in the pilot countries. Each country set its own communications goals and objectives for introduction and determined how best to achieve its goals. PATH found that it was most useful for each communications partner agency to assess its programs and decide what methods and channels would be most effective for the country context. A range of examples illustrates how demand-generation work played out during the pilot introductions. In Burkina Faso, Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) received funding to implement extensive communications activities to generate demand for family

CASE STUDY



Creating demand in Burkina Faso: GIZ

During the first two years of DMPA-SC introductions, GIZ led a project to develop and implement multifaceted mass media and interpersonal communication activities across the four pilot regions to generate demand for the product. Key highlights of the project's communications campaign include:

- Conducted 38,511 educational group discussions, estimated to have reached nearly a million people.
- Organized 1,083 film viewings, 387 interactive theater presentations, and 12,609 home visits—which together reached more than 320,600 people.
- Broadcast 4,312 radio and 860 TV spots, reaching nearly 4 million listeners and viewers.

GIZ's project also built the capacity of local nongovernmental organizations (NGOs) implementing family planning advocacy and education activities through intense training and supervision. The project materials included messages targeting men as key supporters of family planning and highlighted referral systems so community members would know where and how to access services.

“My wife and I made the decision to use family planning because it was difficult for me to provide basic needs to my children like education, clothing, and food. One day, my wife and I were listening to the radio and we heard a radio spot about Sayana Press on Divine FM. The spot said it’s easy and safe to use, and they referred people to the nearest VHT. We went to see him, and he gave us more information and counseling on Sayana Press. My wife made up her mind, and she started using it.”

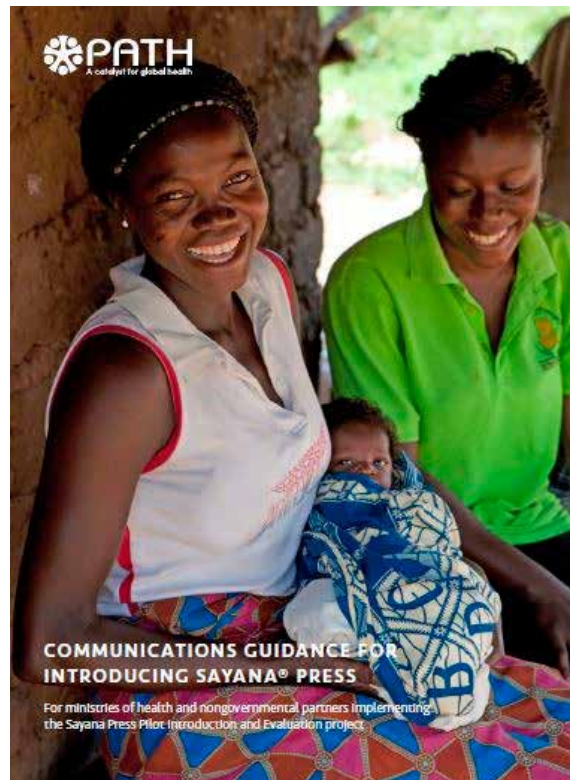
– Husband of family planning client in Uganda

planning services and increase awareness of DMPA-SC in the pilot regions (see box). Similarly, in Uganda, PATH contracted Communication for Development Foundation Uganda (CDFU) to implement a comprehensive campaign in a selection of the pilot districts (see box on page 75). PATH and partners in all countries used a mixture of mass media and interpersonal communication strategies, and targeted different audience segments.

In many countries, it is not permitted by law to do brand-specific promotion of pharmaceutical products using mass media. Determining what types of product promotion are allowed in each country was challenging. In Niger, the United Nations Population Fund (UNFPA) worked with district Ministry of Health officials to determine how to mention DMPA-SC in radio campaigns as one of the family planning options available to women at local health posts. This was acceptable to the government partners because it was not simply brand promotion, and the campaigns were in limited pilot areas. In Senegal, PATH and other NGOs that implement family planning benefitted from a national family planning campaign with the slogan *Moytu Nef*, which translates to “avoid closely spaced births.”

COMMUNICATIONS GUIDANCE FOR DMPA-SC PARTNERS

PATH developed a comprehensive guidance document to support implementing partners as they developed communications strategies and activities related to the introduction of DMPA-SC. *Communications Guidance for Introducing Sayana® Press* was published in



2014, and is available in French and English at <http://sites.path.org/rh/?p=436>. It is based on a comprehensive review of the literature on communications and behavior change strategies to increase use of family planning methods, with an emphasis on injectable contraceptives and the four pilot countries.

The guidance document provides background information on DMPA-SC and the pilot introduction efforts and outlines communication strategies, audiences, and key messages recommended for successful introduction. It also recommends the use of specific communication channels based on previous success. GIZ used the document as a foundation for its behavior change communications strategy for DMPA-SC

CASE STUDY

PATH/ShirWood



Multiple-channel communication campaign on Sayana Press in Uganda

In Uganda, Communication for Development Foundation Uganda (CDFU) helped to raise awareness of family planning and the new option of Sayana Press in selected pilot introduction districts. Their strategy was designed to help increase knowledge of the availability of injectable contraceptives from Village Health Teams (VHTs).

CDFU implemented a wide variety of communication activities between 2014 and 2016, including:

- Held provider trainings on VHTs' role in education and outreach, beyond just contraceptive service provision.
- Trained existing family planning hotline counselors to answer questions about Sayana Press.
- Conducted more than 150 community dialogues on contraception, Sayana Press, and myths and misconceptions, reaching over 3,000 people.
- Broadcast 42 interactive radio talk shows and 4,680 radio spots.
- Produced and distributed more than 2,000 posters for health facilities/communities and 5,000 leaflets targeted to opinion leaders.
- Conducted an endline evaluation of their communication campaign.

What worked? Community members, including women using Sayana Press, were most likely to report hearing about the new product from radio or VHTs. As one young woman in Apac District reported, "I started using Sayana Press after hearing about it from Voice of Lango FM... I have used it for nine months now." At the same time, VHTs clearly played a critical role. Another youth in Kyegegwa District shared, "The VHTs have made tremendous efforts to meet people in their youth groups during meetings, and sometimes having a one-on-one session to talk about family planning."

Although it is resource-intensive to reach large numbers of people through a community dialogue strategy, it is possible that these activities helped prevent major opposition to the new option or to contraception training for VHTs. The community dialogues were a key mechanism, for example, for engaging men and religious leaders and fostering exchange about their role in supporting family planning.

CDFU's hotline received between 81 and 326 calls about contraception per quarter, and the number of questions about Sayana Press varied. Interestingly, most calls were from men. In some cases, VHTs themselves—who were trained to publicize the hotline to their clients—used the hotline as an information resource.

Consumption of Sayana Press increased steadily throughout the pilot introduction period. It is difficult to assess the contributions of various demand-generation activities to the monitoring results.



INTRODUCTION TIP

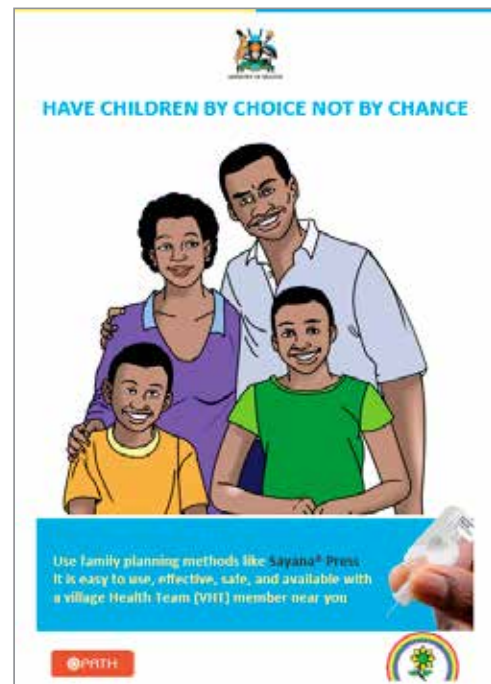
Community health workers in Uganda were a trusted source of information, beyond a source of products and services.

introduction in Burkina Faso. Likewise, CDFU used the document to guide behavior change activities in support of introduction. The document's suggestions include focusing on changing behavior, not just providing information; identifying the needs of end users; and addressing family planning needs generally, not just targeting one method (see example of CDFU poster).



INTRODUCTION TIP

Even if outreach is specific to DMPA-SC, make sure it reinforces the importance and benefits of contraception overall.



CASE STUDY

PATH/Siri Wood



Recruiting new users in rural Niger

Early in the DMPA-SC pilot in Niger, UNFPA worked with district health authorities in the two pilot zones to launch intense awareness-raising activities. These included:

- Using “information caravans” in dozens of villages, which included theater skits, discussion groups, and debates. Theater troupe performers were trained in family planning and supervised by the district health management teams.
- Training announcers at seven community radio stations and one private station, reaching 161 villages in Téra District to broadcast messages about family planning and DMPA-SC in particular. Messages were broadcast three times a day in five national languages for more than six months.
- Conducting a radio campaign through five community radio stations in Magaria District and training two broadcasters per station, who then engaged with surrounding communities to produce and air a series of 20 “magazine” radio shows.
- Contracting with the Niger Office of Radio and Television’s theater group in Zinder Region to lead 40 village visits across eight communes in Magaria District.
- Conducting community mobilization and door-to-door visits by Ecoles des Maris (Husbands’ Schools) in Magaria District and in the areas around Goundey, Dargol, and Chatoumane in Téra District.

Radio is extremely popular in rural Niger. More than half of Niger’s households own a radio, and more than a third of Niger’s population reports that they listen to the radio at least once a week. Although no evaluation data are available to prove association, it is plausible that the intense and prolonged radio campaigns in Téra and Magaria contributed to many women learning about and seeking DMPA-SC in local health posts. As reflected in the project monitoring data, the percentage of new users reached in Niger was significantly higher than in other countries.

RECOMMENDATIONS: GENERATING DEMAND

PATH/Siti Wood



- **Use partner strengths and available evidence to select communications approaches.** Communications partners should assess their existing communications programs and decide which methods and channels are most effective in their context. In addition to traditional mass media, demand-generation strategies that may merit an investment of time and resources include outreach to social and religious groups, development or modification of community theater dramas, and the establishment of easy-to-access, confidential information sources such as toll-free hotlines and print materials that describe each method in detail, including side effects.
- **Consider using radio and health workers for interpersonal communications.** Evidence suggests that two channels are most effective when generating demand for family planning services: (1) interpersonal communication between health workers and patients and (2) radio dramas and programs targeting both men and women. Putting these channels to work requires the development of appropriate materials that support clinic- and community-based health workers to counsel their clients on family planning methods and side effects. Radio programs (i.e., call-in programs or short public service announcements) should be developed to reach both men and women in a community or region with positive messages about family planning.
- **The timing and range of behavior change communications activities should align with the overall introduction or scale-up strategy.** If a new product like DMPA-SC is promoted before the product is available in local health facilities, clients may feel frustrated. If communications activities are delayed too long, project resources may be insufficient or campaigns may not have enough time to have a long-term impact, such as shifting social norms.

RESOURCES



Communications Guidance for Introducing Sayana® Press. Available at <http://sites.path.org/rh/?p=436>. PATH developed this publication in early 2014 to support partners in developing-country settings working on communication activities supporting DMPA-SC introduction. The document includes recommended strategic and tactical approaches, guidance to identify high-priority audiences, suggested key messages, and choose communication channels.



A Field Guide to Designing a Health Communication Strategy. Available at ccp.jhu.edu/documents/A%20Field%20Guide%20to%20Designing%20Health%20Comm%20Strategy.pdf. This comprehensive guide is an A-to-Z resource for developing and implementing a health communications strategy, replete with tools, examples, case studies, and worksheets.