# Increasing Intention to Use Family Planning for Spacing via a Multi-Channel Social and Behavior Change Campaign: Findings from Parents Fiers in Guinea

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## Background: Maternal mortality in Guinea

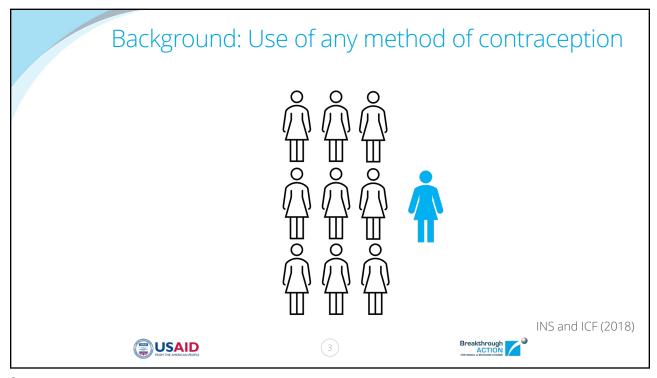
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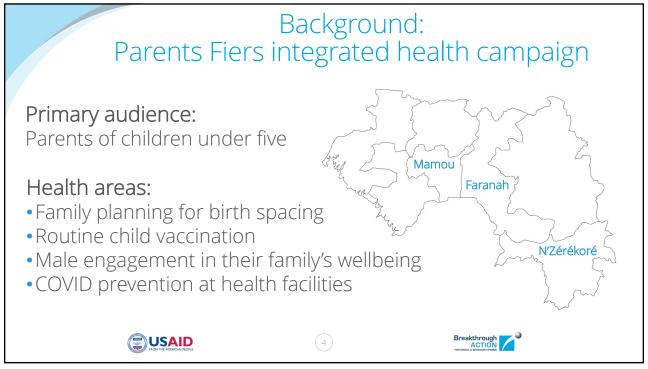
INS and ICF (2018)











#### Communication channels

- Radio spots
- Interactive radio programs
- Billboards
- Facebook/social media
- Audio spots via mobile phones









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## Study purpose

- Assess the recall of Parents Fiers content
- Identify dose of exposure, by type and number of communication channels
- Assess behavioral intention, including intention to use family planning for birth spacing.



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### Methodology: Interactive Voice Response (IVR) survey

- Sample: Mobile phone database
- Variables of interest:
  - -3-month recall of campaign content
    - 1. Vaccination of young children or family planning
    - 2. Father's role in family's health and well-being
  - -Number of communication channels of exposure
  - -Intention to use family planning to space pregnancy
- Analysis
  - -Chi-square
  - -Multi-variate logistic regression







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#### Results: Recall and reach

 Over 75% of participants had heard or seen messages about family planning for spacing or vaccination in the last 3 months



- Radio = 57.0%
- Mobile phones = 44.4%
- Posters/billboards = 44.1%
- Facebook/social media = 40.3%







## Results: Intention to use family planning for spacing

 No statistically significant difference by gender (p=0.69) or geographical region (p=0.14)









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## Results: Intention to use family planning for spacing

 73.3% of individuals who had seen/heard about vaccination/family planning in the last 3 months

VS.

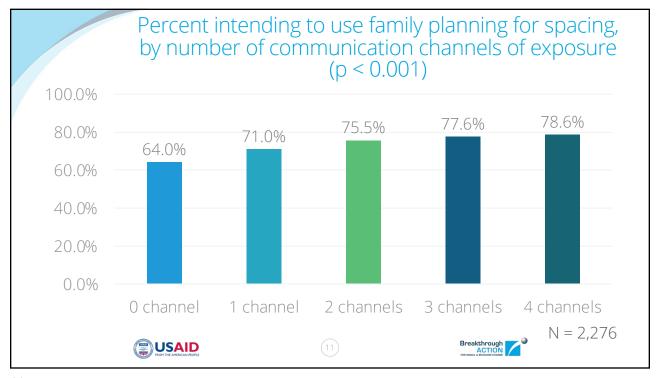
 64.7% of those who did not report exposure in last 3 months (p<0.01)</li>









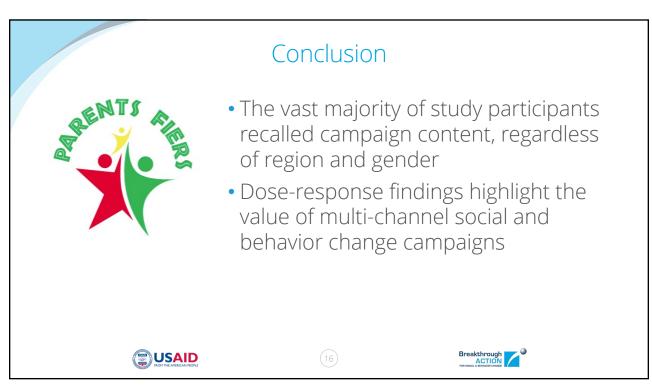


Association between intention to use family planning for by number of communication channels report among current/future parents of children under a							
	(N = 1,876)	Odds Ratio	95% Confidence interval	p-value			
	No exposure		Reference group				
	Heard/saw messages, 0 channels reported	1.10	0.77-1.57	0.581			
	1 channel reported	1.32	0.96-1.79	0.084			
	2 channels reported	1.53	1.12-2.09	0.007			
	3 channels reported	2.18	1.52-3.14	<0.001			
	4 channels reported	2.04	1.37-3.02	<0.001			
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Discussion				
Limitation	Strength			
<ul> <li>Survey instrument needed to be short in length with simple single- response questions</li> </ul>	<ul> <li>Recall question regarding male engagement content yielded similar percentage to recall of other campaign messages</li> </ul>			
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IVR technology is not generalizable	<ul> <li>IVR administration reduces literacy demands and was a feasible way to collect data during COVID</li> </ul>		
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	Discussion			
		Limitation		Strength
	•	Survey instrument needed to be short in length with simple single-response questions	•	Recall question regarding male engagement content yielded similar percentage to recall of other campaign messages
	•	IVR technology is not generalizable	•	IVR administration reduces literacy demands and was a feasible way to collect data during COVID
	•	Inability to conduct a second round of IVR		One round of data collection did provide useful learning to the project to inform the second round of the campaign
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Thank You

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#### Reference

 National Institute of Statistics (INS) and ICF. (2018). Demographic Health Survey Guinea 2018. Conakry, Guinea, and Rockville, Maryland, USA: INS and ICF.





