



# Each One Invites 3 (EOI3): A Social Diffusion Approach for Increasing Uptake of Family Planning

## Guidelines for implementation



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Each One Invites Three (EOI3) Guidelines for Implementation  
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The Institute for Reproductive Health (IRH) is part of the Georgetown University Medical Center, an internationally recognized academic medical center with a three-part mission of research, teaching and patient care. IRH is a leading technical resource and learning center committed to developing and increasing the availability of effective, easy-to-use, fertility awareness methods (FAM) of family planning.

## Acknowledgements

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The *Each One Invites Three* approach was adapted from the SanteNet Project's *Samia Mitondra Telo* (Madagascar, 2006).

The *Each One Invites Three (EOI3) Guidelines for Implementation* documenting the key steps for executing the approach were developed within the FAM Project with support from the United States Agency for International Development (USAID) under the terms of the Cooperative Agreement No. GPO-A-00-07-00003-00. The contents of this document do not necessarily reflect the views or policies of USAID or Georgetown University.

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# Table of Contents

## Introduction

Each One Invites Three (EOI3) Approach.....	1
What is social diffusion.....	1
Why EOI3 in Rwanda?.....	2
The Purpose of this Guide .....	2
About the Invitation Card .....	3

## Preparing for the Implementation: Orient stakeholders at all levels ..... 4

Secure Stakeholder Support.....	5
Orient Community Associations.....	6
Orient Community Mobilizers .....	7
Mobilizers Approach Satisfied Family Planning Users .....	8
Orient Service Providers.....	9
Monitor for Success.....	10

## Conclusion: What's Next? ..... 11

## Resources and Tools ..... 12

<i>Each One Invites Three</i> Invitation Card.....	12
Sample Budget Worksheet .....	14
Orientation PowerPoint.....	15
EOI3 Satisfied User Role Play Activity .....	16
Discussion Points for Community Meetings.....	17
Sample Radio Spot Script (English & Kinyerwanda) .....	18
Sample Invitation Card Referral Tracking Forms.....	20
Sample Checklist for Implementing Organization.....	22

# Introduction

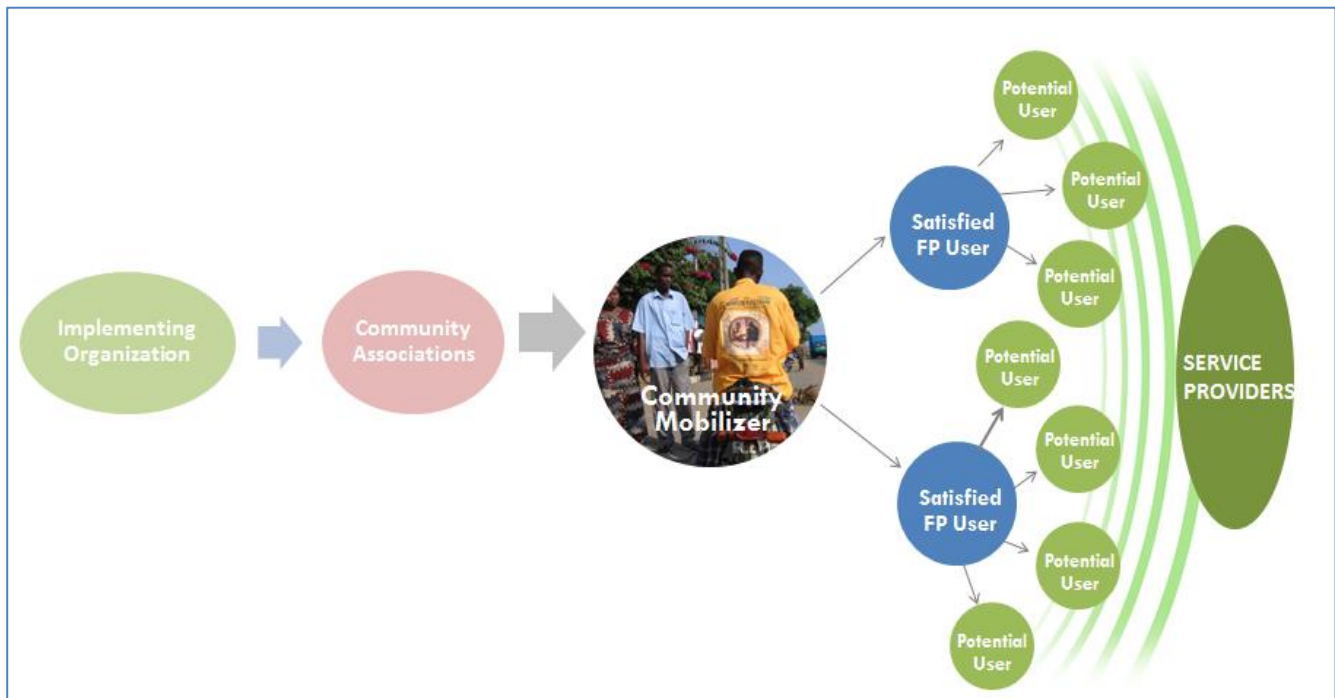
## Each One Invites Three Approach

*Each One Invites Three* (EOI3) refers to a social diffusion approach that relies on satisfied family planning users sharing a family planning invitation card with three friends or peers who are not using any method. The exchange of the invitation card gives ‘permission’ to talk about family planning use—why the user is happy with his or her method, and reasons why the friend is not currently using family planning. The dialogue is a pathway for a satisfied user to encourage a friend to try a method for his or herself and seek information and services from a local health provider.

### What is social diffusion?

“**Diffusion** is the process by which an innovation is communicated through certain channels over time among the members of a social system.” *Diffusion of Innovations* (2003) by Everett M. Rogers.

When applied to family planning, social diffusion approaches can help to break the social silence surrounding family planning. Social diffusion sets the theoretical framework for deciding how to increase family planning interpersonal discussions and ultimately increase family planning uptake. In the case of EOI3, family planning users play a mobilizing role in their community with their own family members, friends and peers, sharing information through a network via personal testimonies of satisfied method use.



## Why EO13 in Rwanda?

Despite the substantial increase in use of modern contraceptive methods in Rwanda over the past five years, unmet need for family planning remains high at 18.9%, with very low family planning use at the community level (2% - DHS 2010). In areas where only community-based provision is offered, the Ministry of Health realized that Community Health Workers (CHWs), who play a growing role as family planning community mobilizers, are overburdened. Additionally, efforts by the Institute for Reproductive Health (IRH) with the MOH in Rwanda to address unmet need by scaling up the introduction of a new method—the Standard Days Method—revealed that people were not talking about family planning, and the method was not diffusing widely as hoped. More community discussion was needed. The MOH recognized the contribution that associations like women’s and men’s groups make in reaching communities through community leaders and supporting family planning efforts. Even current family planning users, male and female, can be instrumental in bringing new users to family planning.

It is from this idea that in 2012, the MOH in collaboration with IRH decided to adapt a previous social diffusion experience from Madagascar that successfully brought new users to family planning in 47 districts in that country. The use of invitation cards in Madagascar, along with supportive IEC materials, encouraged men and women to go to health centers and inquire about family planning. The EO13 invitation card was adapted and Rwanda-specific supplemental materials were developed. Orientations to the EO13 diffusion approach were organized with stakeholders and five women’s associations, 43 community health worker cooperatives, and two men’s associations were identified to work with community leaders and service providers to implement the invitation card in four districts. The associations received training and distributed sets of three invitation cards to actors within the associations (called “Imboni”) who identified and trained satisfied family planning users. These community mobilizers then distributed invitation cards to non-user friends and peers, initially in four hospital districts Karongi, Rulindo, Gatsibo, and Rusizi. As interest in the approach increased over time, additional district hospitals joined in the diffusion in hopes that the invitation card would help get the message to hard-to-reach communities.

Implemented in four districts over a six-month period, the approach was evaluated using time series analysis of service statistics, comparing family planning uptake six months prior to EO13 introduction to uptake after its implementation. Results showed a 39% increase in numbers of new family planning users and referrals in targeted districts. According to the service delivery registries in three districts, of the 5,000 individuals who were referred to seek family planning services as a result of the invitation card, 77% of people left with a method of their choice. During post-EO13 interviews, health care providers and community health agents reported that those coming in for family planning services with invitation cards had more knowledge of family planning methods than clients who had not been reached by EO13 (*Assessing the Each One Invites 3 Social Diffusion Approach: to Increase Family Planning Use – Including Standard Days Method – in Rwanda*. Institute for Reproductive Health 2013, Draft).



## The Purpose of this Guide

This guide is designed to support community-based organizations and programs interested in introducing the *Each One Invites Three* (EO13) social diffusion approach to support family planning efforts at the community level. This guide includes instructions for engaging with stakeholders to leverage support, and guidance on how to implement the EO13 approach with the participating associations, community mobilizers, and satisfied family planning users. It also offers a framework and successful examples from Rwanda for media campaigns and monitoring increases in new users as well as the tools and materials to use in different phases of the EO13 implementation.



## **About the Invitation Card**

The invitation card is designed for satisfied users to invite their friends and peers to discuss family planning. The card depicts scenarios of men inviting men and women inviting women to reach out to local health agents to seek family planning information and methods.

Based upon formative research and several rounds of development and testing, the card is used as an informational tool and offers a means through which women and men can address myths and misconceptions and approach the topic of family planning with friends and service providers.

The invitation card was created to be used by low literacy audiences, and includes the following messages and corresponding images:

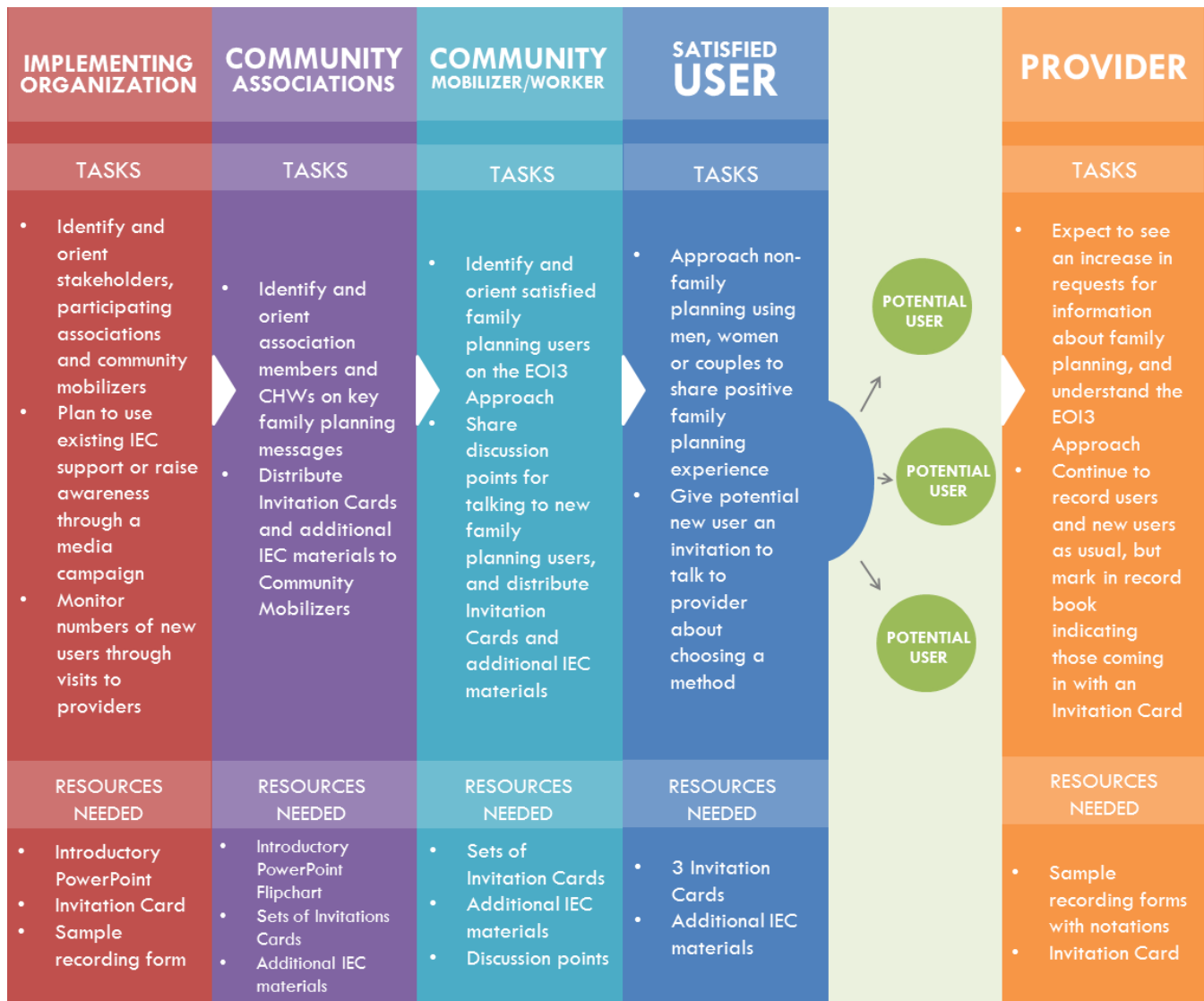
*For Men: My wife and I are using a FP method; this helped us to make successful achievements in our family. Please discuss with your wife to make an appropriate decision.*

*For Women: I am using a family planning method and I am satisfied—my husband too. Approach your nearest CHW or Health Center holding this card and they will help you.*

*For CHWs: “Let’s tell them that it is good to have children but much better to plan the best time for having them.”*

# Preparing for the Implementation: Orient stakeholders at all levels

Planning for implementation of the EO13 diffusion approach involves several steps. The implementing organization should be involved at all steps, working closely with participants as needed. The following flow chart describes the roles and responsibilities and suggested resources to successfully complete each step.



# SECURE STAKEHOLDER SUPPORT

## Who participates?

Family planning programs, whether public or private, community leaders, and local authorities.

## Purpose of a stakeholder meeting:

- Introduce the EO13 social diffusion approach and its value and potential contribution to raising awareness and use of family planning.
- Identify potential geographic areas and the scope of the implementation.
- Discuss the feasibility, opportunities and potential limitations for implementation.
- Identify potential community and network associations to participate in the diffusion.
- Develop a work plan to approach community associations and bring them on-board.
- Discuss options for existing IEC activities to complement diffusion of the invitation card.

For this component, a PowerPoint presentation describing the diffusion approach is available. It is also recommended to share a sample of the invitation card.

The stakeholder meeting also provides an opportunity to determine the investment required to undertake this effort, based on decisions regarding the scope of the implementation. For example, decisions about budgeting for printing of the invitation card, cost of conducting orientation meetings, extent and length of the supervision to assess the results of the EO13 approach implementation. A sample budget worksheet is included in the Resources and Tools section.



## IN RWANDA...

EO13 was introduced at a stakeholder meeting that included Minisanté, family planning program officials and community leaders, who helped identify the districts to implement EO13 and create a favorable environment for the approach. Stakeholders reflected on the level of support they would need to provide to the EO13 approach to ensure that relevant organizations were involved, objectives were attainable and it achieved its intended results of increasing FP uptake. In Rwanda, evaluation of the EO13 implementation showed most positive results in districts that strategized and designed the campaign for their area and involved local authorities or community leaders in the process.

## Resources & Tools Used

- EO13 PowerPoint Presentation
- Invitation Card
- Sample budget worksheet

# ORIENT COMMUNITY ASSOCIATIONS

## Who participates?

Local community associations, including men's and women's groups, and community networks that are interested in supporting the diffusion of family planning messages through their community mobilizers.

## Purpose of orientation to associations:

- Introduce the EO13 approach and share the value of the invitation card in raising awareness and use of family planning in the community.
- Determine associations' interest in and feasibility of implementing the approach.
- Identify community mobilizers who will carry-out diffusion efforts for the invitation card.
- Discuss preparations to orient community mobilizers on key information they need to discuss when sharing the invitation with satisfied users.
- Distribute stock of invitation cards to implementing associations.
- Train association members on how to reach out to services and their providers to ensure they familiar with the diffusion approach and prepared to offer family planning services to new clients.

For this component, a description of the diffusion approach can be adapted from the PowerPoint presentation. Information in this description should present key messages and can be shown on flipchart paper. The implementing organization distributes the first stock of invitation cards to the Community Associations. Community Associations will oversee the distribution of the invitation cards and ensure that community mobilizers receive resupplies.

## Complementing the Approach with Additional IEC Outreach

Complementary IEC activities, whether existing or newly planned, can help increase awareness about EO13 and the invitation card. Determine that the interpersonal messages, additional communications and promotional materials are harmonized. Choose outreach activities that are appropriate within the context. Before creating new and expensive mass media-based initiatives, like radio or newspaper, consider what options exist and are easily accessible within the community, such as health fairs, theaters and plays, and community talks or group discussions.

It is important to remind participants in EO13, whether stakeholders, associations or service providers, that they all play an important role as advocates for the approach and should talk about it openly and widely.



## IN RWANDA...

Ten associations across four districts, including women's and men's associations and CHW cooperatives, were identified and participated in a one-day orientation on EO13. In some cases all associations were oriented together, while in other districts separate orientations took place.

### Resources & Tools Available

- EO13 PowerPoint Presentation
- Invitation Card

## IN RWANDA...

IEC activities to support EO13 involved a low-cost national radio spot that aired locally in Kinyarwanda in the districts where EO13 was being implemented. The radio spot focused on the invitation card, telling how one can take it to a health care provider to talk about family planning. The spot also invited satisfied users to become involved in the campaign as well (see sample spot in Resources and Tools).

Raising awareness of EO13 within communities also included discussing the approach during local community outreach meetings.

# ORIENT COMMUNITY MOBILIZERS

## Who participates?

Community mobilizers and/or community workers, affiliated to the participating associations, who are able and comfortable discussing family planning with other community members.

## Purpose of orienting mobilizers:

- Introduce the EO13 approach and its value in helping the community learn about birth spacing and its benefits.
- Discuss how to identify satisfied family planning users and their level of comfort inviting them to discuss family planning methods with other members of the community.
- Provide users with invitation cards and explain where they can get more when needed.
- Practice a role-play scenario to help community mobilizers become comfortable discussing family planning with satisfied users and tailor the conversations with friends and peers.
- Distribute discussion points and supplemental IEC materials for community mobilizers to rely on when discussing family planning with identified satisfied users.

To orient community mobilizers in EO13, Associations can rely either on the presentation or the same information included in a flipchart prepared in advance. Community mobilizers are given a stock of invitation cards and other helpful IEC materials from the Community Association.



## IN RWANDA...

Approximately five association members were identified by the association's leaders to be trained to become community mobilizers. Because these community mobilizers were already involved in mobilization activities, they were able to easily integrate EO13 into other routine tasks. However, as volunteers, the community mobilizers often felt burdened by the amount of time it took to identify and engage satisfied users in diffusing the approach.

## Resources & Tools Available

- EO13 PowerPoint Presentation
- Invitation Card
- Role-play scenario

# COMMUNITY MOBILIZERS APPROACH SATISFIED FAMILY PLANNING USERS

## Who is the link to the community?

Satisfied family planning users that are identified and invited by a Community Mobilizer to participate in the initiative.

## Purpose of the conversation is to:

- Identify satisfied family planning users and engaged them in a conversation about family planning use.
- Ask interested satisfied family planning users to share positive family planning experience with potential family planning users.
- Practice role-play with satisfied family planning user to demonstrate an interaction with family and friends around the topic of family planning, and share discussion points for talking to potential users.
- Give each satisfied user three invitation cards to distribute.

Satisfied users to approach include, men, women and couples in the community. Discussion points should be made available to mobilizers, to tailor or use when approaching and discussing family planning with satisfied users.



## IN RWANDA...

Community Mobilizers approached those friends, neighbors, and family members who they knew were using family planning. The Mobilizers chose the satisfied family planning user based on whether they believed the user would be a strong storyteller about their family planning experience. In Rwanda, the satisfied family planning users were sometimes members of the associations themselves. Satisfied family planning users received three invitation cards to distribute. They would report to the community mobilizer or association member periodically and get more invitation cards if needed. Nearly 2000 Mobilizers and satisfied family planning users were oriented and distributed upwards of 10,000 invitation cards.

# ORIENT SERVICE PROVIDERS

## Who participates?

Service providers from health facilities in participating districts including a mix of public and NGO health centers.

Implementing organizations in coordination with community associations will determine the approach for involving facility-based providers as well as community-based distributors who also may join to offer family planning methods to new users.

## Purpose of a provider orientation:

- Familiarize providers with the invitation card and its value in supporting family planning uptake.
- Orient service providers on how to prepare for welcoming women with invitation cards and provide information on all methods.
- Ensure that services are prepared to receive an increase of potential new users and have the necessary stock of methods to meet the demand.
- Explain how to track new clients referred with the invitation card within the existing recording system. Recording will ensure that these clients will be counted and documented over the span of the intervention.

Once oriented in the EO13, service providers in sites where the approach is being implemented can expect to see an increase in requests for information about family planning. They are familiar with the EO13 approach and are prepared to talk about all family planning methods available. To assess the level of success of the invitation card bringing on new users, the implementing organization would track the number of new users from invitation card referrals. Tracking the number of referrals with an invitation card can be as simple as the service provider placing a mark in the existing client records book to denote a referral with the invitation card. Other organizations may opt for having a separate dedicated form for recording invitation card referrals, but it may not be necessary. In fact, the recommendation is to avoid creating new forms.



## IN RWANDA...

40 health centers participated in EO13. Every association or network was linked to a health center and a community health service person to ensure a service delivery response. During a one-day orientation per district, service providers were oriented on how to coordinate with the associations at the community level, and how to record and prepare for new users. For example, to avoid stock outs of family planning commodities, the FAM office gave additional CycleBeads to health centers.

### Resources & Tools Available

- EO13 PowerPoint Presentation
- Invitation Card

## MONITOR FOR SUCCESS

To measure the impact of the approach, it is important to build in monitoring activities to the extent which it is possible. In many cases, these activities can be linked or embedded in routine supervision activities. Establish a simple monitoring plan that includes steps to:

- **Meet with Community Mobilizers**  
The Associations should check-in periodically with mobilizers to monitor their progress in identifying and successfully approaching satisfied family planning users, provide support and additional invitation cards, if needed.
- **Ensure that providers are trained** in how to record new user referrals from the invitation card. A simple mark in existing recording forms is recommended instead of creating new forms for this purpose.
- **Collect information for results reporting**  
The implementing organization, through agreements with the service provider sites, can schedule monthly visits to collect service statistics on new users and how many new users are as a result of the distribution of the invitation card. Implementing organizations can review records to identify increases in registered new users, and the number of visits to providers from invitation card referrals, to measure the success of EOI3 as a diffusion and interpersonal communication approach.

Implementing organizations can create a checklist of items to ask the service providers during monthly visits. The checklist should include key information to collect such as number of Mobilizers, invitation cards distributed, challenges encountered and solutions identified, as well as other information implementing organizations wish to know. A sample checklist can be found in Resources and Tools.

- **Hold a six-month evaluation meeting** to review the findings, develop or refine recommendations and identify aspects to strengthen, add or discontinue.

### IN RWANDA...

During early orientation meetings, the Association leaders jointly developed a basic monitoring plan to monitor key indicators of success. Some of The Rwandan association's process and results indicators included:

1. Numbers of meetings conducted to share about the approach in the community.
2. Numbers of invitation cards distributed to all actors at the community level.
3. Numbers of clients that came to the health center to seek family planning with the invitation card.

#### Resources & Tools Available

- Sample invitation card referral tracking form for Associations
- Sample invitation card referral tracking form for Health Centers



# Conclusion: What's Next?

Social diffusion approaches, like EO13, are not commonly used in family planning but can have a powerful effect to move individuals and communities from knowledge to reflection and action. Working with associations and their community mobilizers can create new social dynamics at the community level that complement the efforts of the formal health system.

The EO13 approach has shown to be effective raising awareness and uptake of family planning during a six-month intervention period in Rwanda. Programs need to be mindful of an increase in new users, and reflect it in their family planning method inventory requests. Associations were good partners in the Rwandan context because of their connection to the community, as well as their focus areas. A wide scope of the population was targeted by working with community health, women's and men's associations.

Integrating the EO13 approach into general communications outreach activities for family planning activities should be discussed with local ministry of health representatives to determine feasibility. While the EO13 approach should not be ongoing, it is recommended to be an approach that supplements other family planning activities, such as national family planning events, such as health fairs, etc.

## IN RWANDA...

In Rwanda, 10,981 invitation cards were distributed. Nearly half of those distributed (4971/10981) were received by health facilities during the EO13 period. New family planning users increased 39% from baseline.

The Ministry of Health in Rwanda is exploring integrating this approach into family planning communications outreach two times a year and linking the approach with other national family planning and health-related events.

# Resources and Tools

## Each One Invites Three (EOI3) Invitation Card (English)

These are the EOI3 cards used in Rwanda. They can be used as is or adapted to the appropriate context.

Let's tell them that it is good to have children but much better to plan a good time of having them.

**"YOU ARE INVITED"**

**My wife and I are using a FP method; this helped us to make successful achievements in our family. Please discuss with your wife to make an appropriate decision.**

**I am using a FP method and I am satisfied; my husband too. Approach your nearest CHW or Health Center holding this card, they will help you.**

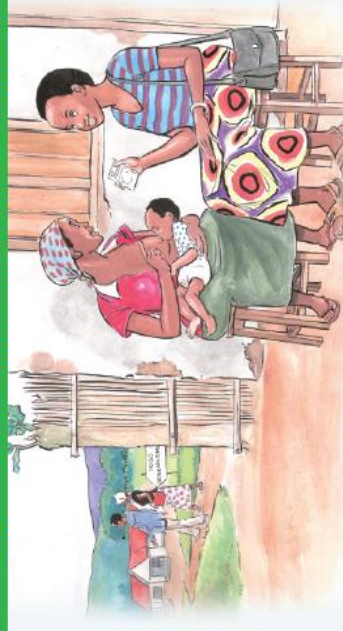
**Each One Invites Three (EOI3) Invitation Card (Kinyarwanda)**



**“URATUMIWE”**



**Njyewe n’umugore wanjye dukoresha uburyo bwo kuboneza urubyaro; kandi byadufashije kugera kuri byinshi. Biganireho n’uwo mwashakanye mufate icyemezo.**



**Njyewe nkoresha uburyo bwo kuboneza urubyaro, kandi bwanguye neza. Witwaje iyi karita nawe egera umujyanama w’ubuzima cyangwa ikigo nderabuzima nawe babigufashemo.**



## Sample Budget Worksheet

This sample budget worksheet provides possible line items to be considered when thinking about the cost of implementing the EO13 approach.

	Estimated Cost	Actual Cost
<b>Line Item</b>		
Stakeholder meeting		
Association orientation meeting		
Community mobilizer orientation meeting		
Satisfied user orientation		
Service provider orientation		
Invitation card printing		
Radio air time		
Additional IEC interventions		
Staff time for orientation and meetings		
Staff time for monitoring and follow up		

## Each One Invites Three (EOI3) Orientation PowerPoint

The following are sample slides from a presentation that can be accessed online at the link below. Talking points for many of the slides are included. Slides can be adapted for different audiences. If a projector is not available, slide content can be placed on flip chart paper and shared.

A digital copy of this Power point is available on CD, or download it at [[www.slideshare.net/IRHgeorgetown/eoi3-approach-orientation-ppt](http://www.slideshare.net/IRHgeorgetown/eoi3-approach-orientation-ppt)].

### Using social diffusion approaches to increase family planning use in Rwanda:

The « EACH ONE INVITES THREE» APPROACH




The slide features three logos at the bottom: the USAID logo with the text 'FROM THE AMERICAN PEOPLE', the FAM PROJECT logo with 'IRH GEORGETOWN UNIVERSITY' below it, and a circular logo on the left with a sun and a tree.

### What is social diffusion?

**Diffusion** is the process in which an **innovation** is communicated through certain **channels** over **time** among the members of a **social system.**"

*Diffusion of Innovations (2003) by Everett M. Rogers*



The slide includes three photographs at the bottom: the first shows two men sitting on a bench and talking; the second shows two women sitting on the floor looking at a poster; the third shows a man standing and presenting to a group of people sitting on the ground outdoors.

## Each One Invites Three (EOI3) Satisfied User Role Play Activity

This role-play activity is to practice the conversation between the community mobilizer or the satisfied user and individuals in the community. The discussion points (page 17), can be helpful to guide this activity. The role-play can be adapted for each level of orientation.

**Instructions:** Find a partner and take turns playing the community mobilizer or satisfied user and the invitee. (5 minutes)

- If you are playing the role of a community mobilizer or satisfied user, explain the benefits of family planning, and the invitation card. Remember to use your good experiences as an example, and remind your partner where they can go for family planning services.
- If you are playing the role of the invitee, think about what kinds of questions s/he might have.

After each partner has a turn, provide feedback to your partner about what s/he did well, and where s/he could improve. Are there key messages that could be included?

### Sample role-play scenarios:

1. The community mobilizer/satisfied offers the invitation to a couple who has many children.
2. The community mobilizer/satisfied user approaches a member of his/her association after attending an informational session about family planning in the community.
3. The male community mobilizer discusses family planning with his male friend over a shared drink at a café.

### Discussion questions after the role-play (15 minutes)

- Do you think you convinced the invitee of the benefits of family planning? Do you think s/he will visit her provider for more information?
- Why is the invitee not currently using a family planning method?
- Did s/he take the invitation card and promise to discuss it with her partner?
- What were some of the messages you used to convince the invitee that they should be using a family planning method?
- You only had time to work on one scenario. In this discussion, take note of the different arguments that were used for the different profiles of invitees. How does your message change depending on who you are talking to?

## Discussion Points for Orientation and Community Meetings

These discussion points provide an opening for community mobilizers to begin the conversation about family planning in the community. They can be used during individual conversations or group talks in the community. The discussion points can be adapted for the context as needed.

Identify members of your community who are not using family planning, and invite them to talk about the benefits of family planning, your successful experience and where they can get more information.

Ask:

- What do you know about family planning?
- Have you ever used family planning?
- What methods have you heard of?
- Do you know what the benefits of family planning are?

Share **benefits** of family planning:

- Healthier mothers and children
- Fewer children means more time and money for each one
- Delaying pregnancy lets young people stay in school

Where to go for more information:

- Health Center
- Family Planning Services
- Pharmacy
- Community Health Worker

## Each One Invites Three (EOI3) Radio Spot Script, Sample (English)

This radio spot aired on community radio to support the EOI3 diffusion in the districts where it was implemented in Rwanda. The purpose was to inform the communities about family planning and encourage people to talk to their health care provider. The spot also invites satisfied users to get involved in the EOI3 campaign by talking with their health care provider as well.

### DIALOGUE

**P1:** ...Oh my! You are in such a hurry! Where are you going?

**P2:** I am going to the family planning services at the Health Center. I got an invitation card to go. Have you seen this?

**P1:** An invitation card? Who gave it to you? What does it invite you to do?

**P2:** My friend Domina. You know her; she prays with us sometimes.

**P1:** Oh yes. Tell me more!!!

**P2:** Well...last time she visited we talked a lot about family planning. She helped me understand **why** family planning is so important, and gave me this invitation card. After discussing different methods with my husband, I can take the card with me to see the provider for more information. Domina told me she got the invitations from members of her association which helps raise family planning awareness and encourages people to seek services. It seems that **even** men are interested...

**P1:** Well, I never! This is a good friend. Using family planning to prevent unwanted pregnancy herself makes her a great person to talk to. I think many more people would use family planning if they had someone with personal experience to talk with about it.

**P2:** I think this is part of the "Each One Invites 3" campaign I've been hearing about. The program helps teach people about family planning and encourages them to seek services. This card **invites** someone to discuss family planning among friends, neighbors and even family.

### NARRATOR

Fellow Rwandan, are you a family planning user? Would you like help raise awareness by working with health services to share your experience and the benefits of family planning? You can help by **giving the invitation card** to others, discussing your positive family planning experience and encourage them to go to their health care provider for more information. This card **invites** and helps begin a conversation about family planning between friends, neighbors and even family.

**Each One Invites 3** brings satisfied family planning users to share the benefits and encourage others to talk to their health care providers about selecting a family planning method.

### TAGLINE

*Your neighbor's good health is in your hands*

**This message comes to you from the Ministry of Health/Department of Maternal and Child Health.**



## Each One Invites Three (EOI3) Radio Spot Script, Sample (Kinyerwanda)

### DIALOGUE

**P1:** ...Ese ko watanya ugiye he?

**P2:** Yewe ndi kujya ku Kigo Nderabuzima muri serivisi yo kuboneza urubyaro. Uzi ko nahawe ikarita y'ubutumire?

**P1:** Ikarita y'ubutumire? Wayihawe nande se? Iragutumira mu biki se?

**P2 :** Nayihawe na Domina ya ncuti yanjye dusengana.

**P1:** Kagire inkuru!!!

**P2:** Hum...Ubwo aheruka kunsura twaraganiriye cyane yongerera kumfasha kumva impamvu ari ngombwa kuboneza urubyaro, ni uko ansigira n'iyi karita nzitwaza ngiye kureba muganga, maze gufata icyemezo hamwe n'umugabo wanjye. Yambwiye ko yayihawe n'abagize ishyirahamwe ryabo basanzwe bitabira gahunda yo Kuboneza Urububyaro bafashe iyambere mu gutanga umuganda wo gukangurira abandi kugana iyo serivisi. Ngo n'abagabo barabihagurukiye...

**P1:** Uziko ari incuti koko? Ese wagize ngo uwamenye akamaro ko kuboneza urubyaro akaba anakoresha bumwe mu buryo bumurinda gusama atabyiteguye agiye abishishikariza bagenzi be ntibyakwitabirwa na benshi kurushaho!!

**P2 :** Ngo ni muri gahunda ya “**Buri wese atumire batatu**” igamije gukangurira abaturage kwitabira serivise zo kuboneza urubyaro hifashishijwe ikarita y'ubutumire. Iyo karita iratumira, ikibutsa, igaherekeza n'ikiganiro cy'ubuhamya hagati y'inshuti, abaturanyi ndetse n'abavandimwe.

### NARRATEUR

Munyarwanda wamenye ibyiza byo kuboneza urubyaro, fatanya na service z'ubuzima gushishikariza abandi kwitabira gahunda yo kuboneza urubyaro wifashishije ikarita y'ubutumire. Iyo karita iratumira, ikibutsa, igaherekeza n'ikiganiro cy'ubuhamya hagati y'inshuti, abaturanyi ndetse n'abavandimwe.

Iyo ni gahunda ya “**Buri wese atumire batatu**” ije yunganira izindi mu kurushaho gukangurira abaturage kwitabira serivise zo kuboneza urubyaro. Iyi gahunda yatangiye mu turere tumwe na tumwe tw'u Rwanda ikazagenda ikwirakwizwa n'ahandi buhoro buhoro.

### TAGLINE

***Ubuzima bwiza bwa mugenzi wawe, buri mu biganza byawe***

The sample invitation card referral tracking forms below can be used to monitor and evaluate the impact of an EO13 approach.

### Sample Invitation Card Referral Tracking Forms – Associations

The Associations form helps to track the number of community mobilizers distributing invitation cards and the number of invitation cards going out.

<b>Association Reporting Form</b>					
Association Name:					
Year:					
Collaborating Health Center:					
<b>MONTH</b>	<b>Month #</b>	<b>Month #</b>	<b>Month #</b>	<b>Month #</b>	<b>Total</b>
Number of Association Members					
Number of Imboni (I, II, III)/invitation card distributors					
Number of invitation cards received by Association					
Number of invitation cards given to Imboni (I, II, III)/distributors					

## Sample Invitation Card Referral Tracking Forms – Health Centers

The Health Centers form helps to track clients coming to the health center with the invitation card and choosing a method of family planning. This form can be used in place of recording in the client registries, or to consolidate the information recorded in the client registries.

<b>Health Center Reporting Form</b>					
Health Center Name:					
Year:					
Collaborating Association:					
MONTH	Month #	Month #	Month #	Month #	Total
Contraceptive Prevalence Rate (CPR)					
Number of community members trained in the approach					
Total number of clients received WITH invitation card					
Number of new clients accepting family planning					
Number of new clients accepting family planning/SDM					

## Sample Checklist for Implementing Organization

Implementing organizations tracking the progress of the EO13 approach should check in with the associations and health care providers monthly. A checklist can be helpful to keep track of information being collected. Below is a sample checklist with some key items to monitor. Implementing organizations should add additional items to the list as needed.

Site Visited:		
Month:		
Item	Status	Supervisor comments
Meeting to identify Imboni I & II: When, number, available report		
Number of Imboni I, II and III identified		
Distribution of Invitation Cards to Associations/Health Centers		
Number of Invitation Cards returned to Health Center by potential new users		
Challenges encountered by Associations and Health Centers during the EO13 implementation; solutions found		
Opportunities and strengths of the EO13 approach		
Availability of monthly reports from Health Centers		
Availability of family planning methods		
Number of follow-up activities by Health Centers at the community level (community health talks, etc.		
Other comments and suggestions for improved implementation		