

# 5

## LINK FAMILY PLANNING PROVIDERS TO INFLUENTIAL GROUPS





# 5

## LINK FAMILY PLANNING PROVIDERS TO INFLUENTIAL GROUPS

**WHY:** The social networks diffusion approach helps people examine and change the social barriers that prevent them from discussing and choosing to use family planning methods. In this way, it increases demand for family planning services. The approach does not have a corresponding aim to increase supply of family planning services, but it does help communities forge links with local health workers who provide family planning information and methods.

**WHEN:** The four linking activities, marked in the calendar here, correspond to (a) community social networks mapping, (b) Catalyzer orientation, (c) the EO13 Campaign, and (d) community celebrations to mark closure of the implementation phase.

Component	Month	1	2	3	4	5	6	7	8	9
5	Link Family Planning Providers to Influential Groups		X	X			EO13	EO13	EO13	X

**In this section:**

- Checklist to Guide the Implementation of the 'Each One Invites Three' (EO13) Campaign
- EO13 - PowerPoint presentation
- EO13 - Invitation Card
- EO13 Snow Ball Effect Image

**WHAT:** You have already seen two links in this Handbook. You created them when you mapped Community Social Networks (Section 1) and oriented Catalyzers (Section 2). We will discuss a third link (the EO13 Campaign) here in Section 5, and you will find the fourth and final link in Close with Community Celebrations (Section iv). We have collected these linking activities here in a single section to emphasize their importance and connect them in your mind and in the minds of your communities.

**HOW:** Below we briefly review the three linkage points that are discussed in other sections, and provide guidance for your EO13 campaign.

### Link 1: Engage Communities in Social Network Mapping (Section 1)

You invited family planning providers to participate in social networks mapping exercises, alongside volunteer community members.

### Link 2: Catalyze Reflection in Influential Groups (specifically, during Catalyzer Orientation) (Section 2)

During the Catalyzer Orientation, you invited family planning providers (at least one from each facility in the implementation area) to participate in a session with Catalyzers, and to exchange contact information with Catalyzers from their catchment area. Having met one another and shared a training experience, Catalyzers and family planning providers will interact more easily as their work progresses.

### Link 3: EO13 Campaign

The third link between participating communities and family planning providers is the EO13 Campaign, which you will introduce in approximately the sixth month of implementation (EO13 should be timed to capitalize on the growing diffusion of ideas via radio, Catalyzers, and Influentials). Select a timeframe of four to eight weeks for your campaign: a shorter campaign may not arouse interest, while a longer campaign risks losing momentum. (In *Tékponon Jikuagou*, our EO13 campaign lasted eight weeks.

The three broad steps you will take are to prepare for, implement, and trace the effects of the EO13 Campaign.

#### STEP 1: PREPARE FOR THE EO13 CAMPAIGN

The EO13 Campaign has implications for health facilities in your project area, so you should meet with health officials at the appropriate level (such as state or department, county or arrondissement) to describe the campaign and ascertain their willingness to participate. You may also want to have similar meetings with village chiefs and elected leaders. Finally, Facilitators should visit the health centers in your project area, to explain to providers their role in the EO13 Campaign (described below).

Create and print invitation cards for the campaign. Our *Tékponon Jikuagou* cards (attached) used images from the Story Cards on one side, and images of contraceptives and a written invitation on the other. You may model your cards on these. Use the information below to help calculate how many cards you will need.

#### STEP 2: IMPLEMENT THE EO13 CAMPAIGN

Facilitators will work with three types of people and two types of institutions to implement EO13. The three types of people are:

- **Catalyzers and Group Members:** Facilitators will distribute enough cards to the Catalyzer of each group so that she/he can give three cards to each group member who wishes to participate<sup>4</sup> in the campaign. Give each Catalyzer a diagram (a sample is attached) that she can use with her group to explain the “snowball effect” of EO13 and the role of each type of participant.

Next, visit each group. With the Catalyzer, do a role-play so that each group member can see and then practice giving the invitation card to a friend or relative, and explaining her experience with (or positive opinion of) family planning. Remind group members to give their cards to people who are not currently using family planning, but who might be interested.

- **Community Health Workers (if any):** If community health workers are active in your area, and are knowledgeable about family planning, they can also participate in the EO13 Campaign. Facilitators should provide cards to each worker, show the snowball diagram, do a role play, and ask that s/he distribute the invitations as described above. Alternatively, you could ask community health workers to provide cards to men and women whom they know are satisfied family planning users, and ask those men and women to distribute invitation cards to friends and family.

**Everyone who receives an invitation card should be reminded:**

1. To bring the card with them when they visit a health facility (the family planning provider will retain the card)
2. That they may have to pay for their consultation and/or family planning method.

These reminders can be made during your EO13 radio spot.

<sup>4</sup>These may be satisfied family planning users, or individuals who support family planning.



- **Influentials:** Give three invitation cards to each Influential in each community, explain the campaign (using the snowball effect diagram), and ask that they distribute them as described above.

All participants – Catalyzers, group members, community health workers, Influentials – will have a certain number of weeks (you determined the number in advance of the campaign) to distribute their invitation cards to friends, relatives or neighbors, to talk with them about family planning (emphasizing their own positive experience and/or knowledge), and to encourage them to visit a nearby health facility for more information and for methods.

Two institutions will participate in the EO13 Campaign.

- **Radio Stations:** In Section 4, we mentioned that you should create a spot for the EO13 Campaign, and air it alongside your regular broadcasts for several weeks before and during the campaign. Work with the radio hosts to develop a spot that describes EO13, and that encourages listeners to talk with their friends and relatives about family planning and seek additional information at their nearest health facility.
- **Health Facilities:** You will ask local family planning providers to participate in the EO13 Campaign by doing two things. First, they should warmly welcome people who arrive with invitation cards, and make time to discuss family planning options with them. (Ask them to collect and retain the invitation cards so Facilitators can count them later.) Second, they should expect at least one visit from a Facilitator early in the campaign to troubleshoot any problems.

#### Link 4: Community Celebrations (Section iv)

The fourth and final link between communities and family planning providers will occur during the community celebrations that mark the close of the social networks diffusion activities. Invite the providers who participated in earlier linkages to attend the celebrations.

### Unique Strategy

**Demand:** The social networks diffusion approach does not build supply of family planning services, but does forge links between communities and nearby family planning providers. These links smooth the way for individuals and couples as they decide to seek family planning services, as they will already be familiar with local providers.

**Actors and Actions:** The overall success of the social networks diffusion approach depends on people discussing, reflecting on, and altering social barriers to family planning. But people who actually use family planning are uniquely able to encourage others to seek information and methods from providers. They can speak from experience about all aspects of family planning: how they made the decision, the opinion of others, the advantages of use, the side effects (if any), and more. Satisfied family planning users are important players in the EO13 Campaign.



# TOOLS:

- CHECKLIST TO GUIDE IMPLEMENTATION OF THE “EACH ONE INVITES 3” CAMPAIGN
- “EACH ONE INVITES 3” – POWERPOINT PRESENTATION
- “EACH ONE INVITES 3” – CARD
- SNOWBALL EFFECT IMAGE



## CHECKLIST TO GUIDE IMPLEMENTATION OF THE “EACH ONE INVITES 3” CAMPAIGN

### Introduction

This protocol in the form of a checklist is to assist in the planning and implementation of the “**Each One Invites 3 (EOI3)**” campaign. An activity of the “Link Family Planning Providers with Influential Groups,” component, EOI3 starts about four months after the orientation of Catalyzers. The success of the approach depends on all members of the *Tékponon Jikuagou* group – men and women – in a village talking with friends and neighbors and share their personal experiences using a family planning method of their choice. The distribution of invitation cards allows people to talk about their personal experiences with family planning and helps break social norms about the taboo nature of family planning. If a group member is not a user, she/he can speak of family planning in general and of *Tékponon Jikuagou* discussions, sharing what they liked. At the end of these testimonies, each friend and neighbor will receive an invitation card that encourages them to go to the health center to get more information from providers. The success of this approach also depends on family planning service providers who are waiting to receive potential clients by offering them a warm welcome and good services.

### The Stages of Implementation of the EOI3

One or two months before the start of the campaign:

- Collaborate with medical coordinators in the health zones you are working to help organize the EOI3 campaign. Seize this opportunity to introduce them to the EOI3 campaign and request support for the health zone. The health zone staff will inform and prepare providers to receive clients from communities who are seeking family planning-related services and information.
- Air radio spots at the same time to reinforce the significance of the cards that are beginning to circulate, encouraging people who receive the cards to seek information and services at the health center. If a project is interested, it is possible to advertise even more, for example, by speaking of EOI3 at community meetings in the villages.
- Work in harmony with the Ministry of Health, if it wishes to make community health workers part of the campaign; it is a great asset if these health workers are involved. Like group members and Influentials, community health workers can also give invitation cards to family planning users that they know, asking

### The “Each One Invites 3” Approach

A positive testimonial about using family planning by someone in the community (the way she/he chose a method, the benefits/results) provides a real experience for the acceptance of family planning.

The invitation card helps the mobilizer initiate a conversation with his/her peer, and invites him/her to seek more information from a family planning provider.

To maximize the impact of the campaign and social diffusion among peers about positive experiences with family planning, all cards distributed at the village level should be available to non-users. It is not useful, and even opposes the concept of the campaign, to keep the cards for a future campaign.



SAMPLE EOI3 CARD

them to offer cards to friends and relatives who do not use family planning in order to encourage them to seek information and services.

To start activities:

- Facilitators orient Catalyzers and Influentials on expected roles and responsibilities for this campaign. This will take about 2 hours.
- Facilitators distribute cards to Catalyzers and Influentials who would like to participate. Invitation cards are then distributed by Catalyzers to group members who would like to participate. If community health workers supported by the Ministry of Health are motivated to participate, local health authorities will follow the same steps to distribute the invitation cards.

To monitor implementation:

- Community mobilization will continue for several months without any formal monitoring except to check in with Catalyzers about how card distribution is going.

To close out the campaign:

- The campaign will end after 3 to 6 months.

To evaluate the campaign:

- In addition to implementation visits, monitoring of the campaign is done according to a few simple indicators: number of EO13 invitation cards distributed to Catalyzers and Influentials by Facilitators, and number of cards distributed by Catalyzers to group members.

#### CHECKLIST – PLANNING AND IMPLEMENTATION OF THE “EACH ONE INVITES 3” CAMPAIGN

✓	<b>Prepare (one or two months before the start of the campaign)</b>
	<p>Obtain approval from the Departmental Director of the Health</p> <ul style="list-style-type: none"> <li>• Coordinators at the national level will meet with local authorities and those in charge of health at the departmental and health zone levels to explain the purpose and objectives of the EO13 and obtain their buy-in.</li> <li>• Leave a few copies of the invitation card to share with colleagues.</li> </ul>
	<p>Notify the local village and district authorities of the upcoming campaign.</p> <ul style="list-style-type: none"> <li>• Supervisors and Facilitators will benefit from all their travel to the villages to present the approach to local authorities (villages chiefs and district leaders).</li> <li>• Leave a few copies of the invitation card to share with colleagues.</li> </ul>
	<p>Notify and seek agreement from providers at health centers to participate in the campaign and accept their roles and responsibilities in the campaign.</p> <ul style="list-style-type: none"> <li>• Supervisors will travel to health centers to explain to service providers their roles and responsibilities during the campaign, focusing on the “warm welcome” for those who come to them with cards, either to obtain information or to adopt family planning methods.</li> <li>• Service providers will collect invitation cards in a yellow envelope, and will keep them until a Facilitator or Supervisor comes to collect the cards during a visit.</li> <li>• Leave a few copies of the invitation card to share with colleagues.</li> </ul>



	<p>One month before the start of the year, begin broadcasting radio advertisements through a local station to announce the EO13 campaign and distribution of cards by Catalyzers at the community level.</p> <ul style="list-style-type: none"> <li>Partnering radio stations will broadcast campaign advertisements one month prior to the start of the campaign, and throughout the campaign. These spots will allow people to learn about this campaign, encouraging them to discuss family planning with their friends and to seek additional information at health centers.</li> <li>One month before, and two months after the start of the campaign, call for a meeting in the villages to raise awareness of the campaign, encouraging people to discuss family planning with their friends and to seek additional information at health centers.</li> </ul>
✓	<p><b>Begin campaign activities</b></p>
	<p><b>Orient the influential groups</b> on their roles in the campaign and give them cards.</p> <ul style="list-style-type: none"> <li>The month the campaign starts, Facilitators will visit Catalyzers to explain their role in the campaign.</li> <li>At this time, Facilitators will distribute invitation cards to Catalyzers.</li> <li>At the next group meeting (one month after receiving the cards), each Catalyzer will distribute the cards to group members who would like to participate. They have 3 or more cards to hand out to friends and relatives who do not use the family planning but may be interested.</li> <li>During the following month, members who distribute the cards are requested to speak to friends and relatives <i>who are not using family planning</i>, to share their experiences, and to offer an invitation card to those who they speak with.</li> <li>All cards should be handed out within one month of receiving the cards.</li> </ul>
	<p><b>Orient Influentials</b> on their roles in the campaign and give them cards.</p> <ul style="list-style-type: none"> <li>The process is the same as for influential groups. The Facilitator may orient the Catalyzers and the Influentials at the same time.</li> <li>The month the campaign starts, Facilitators will visit the Influentials to explain their role in the campaign.</li> <li>At this time, Facilitators will distribute invitation cards to Influentials.</li> <li>Influentials who distribute the cards are requested to speak to friends and relatives <i>who are not using family planning</i>, to share their experiences, and to offer an invitation card to those who they speak with.</li> <li>All cards should be handed out within one month of receiving the cards.</li> </ul>
	<p><b>Orient community health workers</b> from health centers to their roles in the campaign and give them cards.</p> <ul style="list-style-type: none"> <li>This step depends on the approval of the Ministry of Health.</li> <li>Either the health center providers or the health zone staff will guide and distribute the cards to the relays.</li> <li>Community health workers can distribute cards to friends or members of the community who are satisfied users of family planning and ask them to distribute invitation cards to friends and relatives who are non-users, but interested in talking about it. They can also distribute cards directly to individuals who do not use the family planning.</li> <li>Follow the steps above.</li> </ul>



✓	<b>Monitor implementation of the campaign</b>
	<p>Keep track of all the individuals involved in EOI3 to make sure that implementation is going according to plan.</p> <ul style="list-style-type: none"> <li>• During coaching visits in the village, Facilitators should ask Catalyzers and Influentials how the campaign is going. Are there difficulties to address? It is important to encourage Catalyzers to motivate group members to act.</li> <li>• Reinforce that the group members should give out all of their cards and not keep them.</li> <li>• If possible, it is good for the Facilitators and Supervisors to visit the health centers – at least once during the campaign – to ask how the campaign is going, identify challenges, and encourage the warm welcome of potential clients.</li> <li>• Check the number of cards distributed to group members/health workers. Check the number of cards received at health center.</li> </ul>
✓	<b>Wrap up the campaign</b>
	<ul style="list-style-type: none"> <li>• The campaign ends by the end date established by the project – 3 to 6 months after the launch of the campaign.</li> <li>• Facilitators will visit influential groups, Influentials, and health care providers to collect cards and thank the people who participated.</li> </ul>

**Card distributors should emphasize that services provided by health workers to the holders of the card during the campaign are not free.**

**Note :** There is a short PowerPoint presentation to accompany this Checklist.

# TOOLS:

- CHECKLIST TO GUIDE IMPLEMENTATION OF THE “EACH ONE INVITES 3” CAMPAIGN
- “EACH ONE INVITES 3” – POWERPOINT PRESENTATION
- “EACH ONE INVITES 3” – CARD
- SNOWBALL EFFECT IMAGE



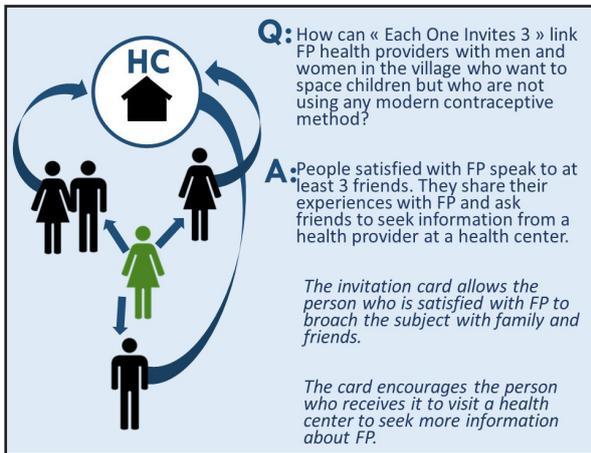
“EACH ONE INVITES 3” – POWERPOINT PRESENTATION



### COMPONENTS OF THE INTERVENTION

- 1 Engage communities in social mapping
- 2 Guide Influential Groups in dialogue
- 3 Encourage Influential Individuals to act
- 4 Create a supportive environment with radio
- 5 Link family planning providers with Influential Groups

The « Each One Invites 3 » campaign can reinforce the links between health providers and the community



### THE APPROACH

The invitation cards are given to **group members (Community Health Workers and Influentials depending on context)**.

These people initiate a discussion with friends and family who do not use FP.

These same people give invitation cards to friends and family, encouraging them to seek information at health centers.

We discuss family planning together. We went to the health center to obtain a safe and effective method so we can have the number of children that we want, when we want. We are satisfied with our decision.

### VISIT THE HEALTH CENTER FOR MORE INFORMATION ABOUT FAMILY PLANNING

Pill IUD Injectable pill

CycleBeads Condom Contraceptive implant

USAID FROM THE AMERICAN PEOPLE Tékonpon Jikuagou



### PROCESS – DISTRIBUTION OF THE INVITATION CARDS

HC

Each group member with cards engages 3 to 5 friends and family members who are not using FP in discussion to share their positive experiences with FP.

Each group member + Influential who are interested takes 3 to 5 cards.

Facilitator hands out cards to the various groups.

They offer a card to each friend/ family member that they speak to.

They encourage them to seek information at health centers.

### STEPS – PLANNING AND IMPLEMENTATION OF THE CAMPAIGN

**Preparation – one or two months before the start of the campaign**

- Obtain approval of departmental and district authority.
- Warn local village and district authorities.
- Talk to health providers about their roles and responsibilities in the campaign.
- Broadcast radio spots that advertise the invitation cards and the campaign. (one month prior to the start of the campaign)

**Start Campaign Activities**

- Orient groups + Influentials + community health workers on their roles in the campaign.
- Give these individuals cards. Ask them to talk to friends and family members about FP and distribute all of their cards in the next month.

**Monitor Implementation (3 to 6 months)** - Follow-up on all of the people implicated in the EO13 campaign to ensure that implementation is going according to plan.

**Wrap-up of Campaign** - by the date pre-established by the project

### ROLE-PLAY IN GROUPS OF THREE

**1** You are a Facilitator in charge of distributing the cards to Catalyzers and Influentials.

- How would you explain to EO13 process? What information is critical?
- How would you make sure that the message was well received?
- Your only tools: invitation cards + flip chart

**2** You are a Catalyzer in charge of distributing the cards to members of your group who are interested in participating in the EO13 campaign.

- How would you explain to EO13 process? What information is critical?
- How would you make sure that the message was well received?
- Your only tool: invitation cards

# QUESTIONS?

# TOOLS:

- CHECKLIST TO GUIDE IMPLEMENTATION OF THE “EACH ONE INVITES 3” CAMPAIGN
- “EACH ONE INVITES 3” – POWERPOINT PRESENTATION
- “EACH ONE INVITES 3” – CARD
- SNOWBALL EFFECT IMAGE



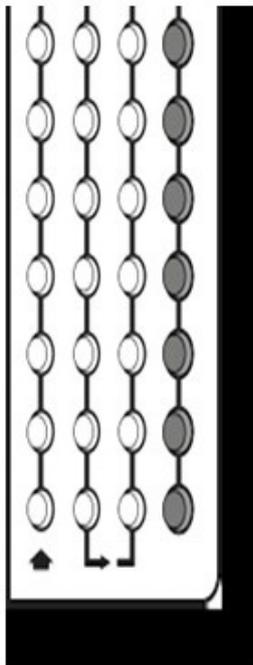
## "EACH ONE INVITES 3" – CARD



We discuss family planning together. We went to the health center to obtain a safe and effective method so we can have the number of children that we want, when we want. We are satisfied with our decision.



VISIT THE HEALTH CENTER FOR MORE INFORMATION ABOUT FAMILY PLANNING



Pill



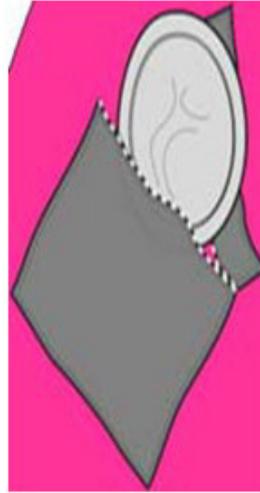
IUD



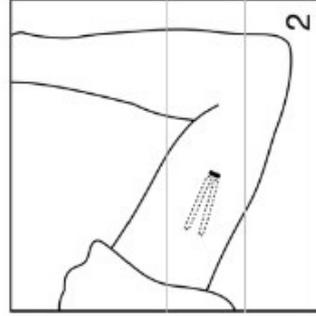
Injectable pill



CycleBeads



Condom



Contraceptive implant



# TOOLS:

- CHECKLIST TO GUIDE IMPLEMENTATION OF THE “EACH ONE INVITES 3” CAMPAIGN
- “EACH ONE INVITES 3” – POWERPOINT PRESENTATION
- “EACH ONE INVITES 3” – CARD
- SNOWBALL EFFECT IMAGE





# SNOWBALL EFFECT IMAGE

