



ADDRESSING UNMET NEED FOR FAMILY PLANNING THROUGH SOCIAL NETWORKS IN BENIN



Tékponon Jikuagou:

Low-cost package of activities that relies on existing social networks and communities' own resources to diffuse new ideas in support of family planning. The five components include:



ENGAGE
COMMUNITIES IN
SOCIAL NETWORK
MAPPING



SUPPORT
INFLUENTIAL GROUPS
IN REFLECTIVE
DIALOGUE



ENCOURAGE
INFLUENTIALS
TO ACT



USE RADIO
TO CREATE
AN ENABLING
ENVIRONMENT



LINK PROVIDERS
WITH
INFLUENTIAL
GROUPS

Dismantling Social Barriers to Family Planning Use: *Tékponon Jikuagou* in Benin

Acknowledging that decades of programming to promote greater access to information and services have not closed the gap between unmet and met need, Tékponon Jikuagou guides communities to shift social norms surrounding family planning and leads to new ideas, attitudes, and behaviors that support family planning use.

Georgetown University's Institute for Reproductive Health (IRH), in consortium with CARE International and Plan International, designed, tested, and rigorously

researched the Tékponon Jikuagou package in Benin¹. Our goal was to reduce social barriers to meeting family planning needs², such as taboos surrounding discussion of sex and reproduction, unequal decision-making power within couples, and perceptions that family planning was at odds with a cultural preference for large families. We hypothesized that changes in social norms would lead to changes in use of and met need for modern methods of family planning.

The pilot-to-scale process tested the theory of change and effectiveness of Tékponon Jikuagou before moving to scale. Pilot results showed that exposure to Tékponon Jikuagou led to statistically significant increases in couple communication and family planning use. Importantly, the pilot results signaled that positive social norms related to family planning use were indeed significantly linked to talking about, seeking, and using family planning, affirming the value of the social network approach.



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CARE INTERNATIONAL
PLAN INTERNATIONAL
WWW.IRH.ORG/PROJECTS/TEKPONON_JIKUAGOU



The difference that small intervention adjustments can make: Comparing Pilot and Scale-Up Results

Tékponon Jikuagou's scale-up phase and pilot phase were both accompanied by an effectiveness study. Between the two studies, we made a limited set of changes to the package, based on evidence from research, monitoring, and reflection, with an eye to increasing exposure and effectiveness, ease of use, and scalability.

- Men's exposure to any component improved post-scale-up and became more equal to women's exposure. Men's exposure in the pilot was 36 percent versus 47 percent post-scale-up. Women's exposure hovered around 50 percent in both phases.
- The odds that women exposed to the package used a family planning method at endline rose from 1.5 post-pilot to 5.1 post-scale up.
- The revised intervention was much more effective in increasing couple communication during the scale-up phase. The odds that women who listened to the radio program discussed family planning with their partner were 1.6 after the pilot and 3.3 after scale-up. Even greater improvements were seen among men (2.6 at pilot and 6.2 at scale up).

A comparison of the results of the two phases highlights how small, evidence-based adjustments made a substantial difference in reaching 50 percent of the population—our hypothetical tipping point needed for sustained change—as well as improving effectiveness.

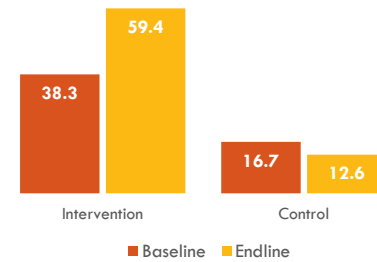
Evidence of Effectiveness

Among the many pieces of research that accompanied the Tékponon Jikuagou package over the years of testing, refinement, and implementation, the scale-up phase's *Effectiveness Study*³ consisted of household surveys at baseline (May 2015) and endline (June 2016) in 32 intervention and 32 control communities. We used two-stage, stratified sampling to select 1,046 women aged 18 to 44, and 1,045 men in union with women aged 18 to 44.

Use of Modern Family Planning

The change in women's use of modern family planning was dramatic: it rose by 20 percentage points in intervention communities over 13 months, ending at nearly 60 percent of women surveyed. In the same period, use of a modern method declined by 4 percentage points in control sites.

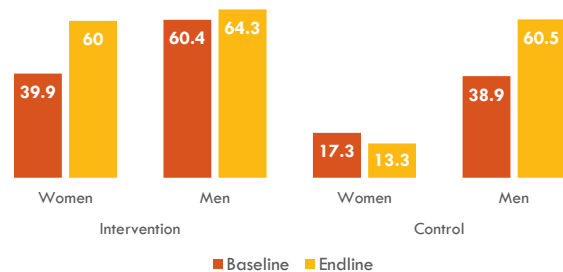
Change in Women's Use of a Modern Family Planning Method
(Percent) Tékponon Jikuagou Scale-Up Phase



Met Need for Family Planning

Women's actual met need for family planning echoed the rise in their use of modern methods, greatly increasing in intervention communities but not in control sites. A greater proportion of men than women reported actual met need at endline, but the extent of the rise among men was less than among women (7 percentage points and 53 percentage points, respectively).

Change in Self-Reported Actual Met Need
(Percent) Tékponon Jikuagou Scale-Up Phase





Normative Change

Our goal was to reduce the social barriers that prevented women and men from meeting their family planning needs, and our hypothesis foresaw that changes in social norms would lead to changes in use of and met need for family planning. In other words, the changes shown above would follow—and would not occur without—normative change surrounding family planning, formed within and spread through social networks.



Multivariate analyses of the relationship between exposure to the program and key outcomes at endline examined the connections between family planning use and met need, changes in norms-influenced behavior, and exposure to components of the package.

In a culture where women and men, including spouses, do not talk about sex and reproductive intentions, we found that the package's interpersonal communications activities (that is, all components excluding radio) had an unequivocal effect on couple discussions of family planning. Participating women were five to six times more likely to have had some discussion about family planning with their spouses, and men were more than twice as likely to have done so.

Exposure to Tékpnonon Jikuagou and Couple Communication		
Participation in interpersonal communication activities made couples more likely to discuss...		
...method choice.	6.2*** ↑	2.2*** ↑
...how to obtain a method.	5.4*** ↑	2.2*** ↑

Multiple logistic regression adjusting for age, education, religion, # living children, # co-wives. Significance: *** $p < 0.001$

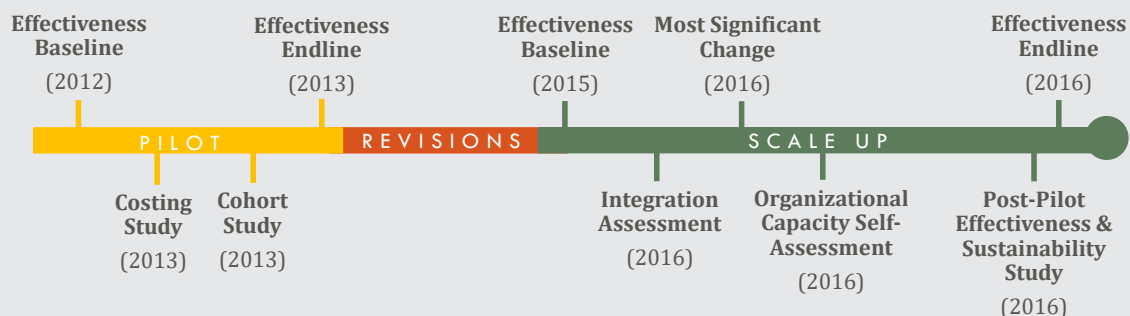
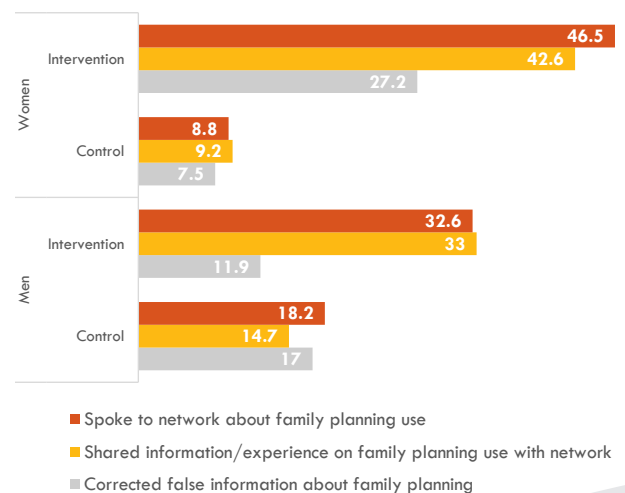
Interestingly, women exposed to the radio broadcasts alone were nearly seven times more likely to meet their family planning needs and use a method than those not exposed. For men, the change was negligible.

Exposure to Radio Component and Family Planning Use		
Exposure to the radio component influenced listeners to...		
...meet their family planning need.	6.7*** ↑	1.2 ↑
...use a family planning method.	6.7*** ↑	1.2 ↑

Multiple logistic regression adjusting for age, education, religion, # living children, # co-wives. Significance: *** $p < 0.001$

Bivariate analyses showed that women and men who were exposed to Tékpnonon Jikuagou were far more likely to share ideas and information about family planning within their social networks than their counterparts in control communities. About 47 percent of intervention women spoke to network members about family planning, and 43 percent shared information and experience about family planning. This contrasts starkly with fewer than 10 percent of women in control sites who reported any social discussions on family planning. Fewer men than women in intervention communities spoke about family planning, but more men than women in control sites did so, indicating that men in rural Benin are more likely than women to broach the topic of family planning in a social setting.

Respondents' Contributions to Social Networks that Support Family Planning (Percent)



After we piloted the package in 90 communities of Benin's Couffo Department via the health projects of consortium partners CARE and Plan, the package was integrated into four non-health projects implemented by three Béninois NGOs, Autre Vie, CBDIBA, GRAIB, and by CARE's ACCES Project. Scale-up occurred in projects focused on literacy, savings and loans, and water and sanitation, in 88 communities of Benin's Couffo and Ouémé Departments.



Pilot Phase

- 2 Organizations field-testing approach
- 2 Health Projects
- 90 Communities, Couffo



Scale-Up Phase

- 4 New Organizations
- 4 Non-Health Projects
- 88 Communities, Couffo & Ouémé

Supportive Social Norms and Networks are Key

Our evidence confirms links between the diffusion of new ideas and norms through social networks and individual behavioral change—namely uptake of modern family planning and met need. Indeed, IRH conceived of Tékponon Jikuagou to forge these very links. Despite decades of programs in sub-Saharan Africa that improved policy, access to services, and information, actual use of family planning remained low. Unmet need for family planning stood at 33 percent in Benin when our project began, up from 28 percent in the mid-1990s, while use rose only from 3 to 8 percent during the same period. It was evident that unmet need did not directly equate demand for family planning methods, nor had efforts translated into adoption and sustained use of family planning.

With Tékponon Jikuagou, IRH and consortium partners aimed squarely at the social networks that influence reproductive health choices and behaviors.

Applying a Social Network Diffusion Approach

Tékponon Jikuagou's social network diffusion approach challenged us to think differently about creating demand for family planning, and our results confirm that a light-but-steady approach to personal behavioral change via social norms change is a valuable programming option. Tékponon Jikuagou prioritizes reducing unmet need for family planning rather than increasing contraceptive prevalence. It does so by catalyzing change in the social norms that pose barriers to women's and men's ability to meet their family planning needs. Rather than work with formal leaders and health care agents, it identifies a limited set of socially influential actors, within key social networks, who effectively diffuse ideas. Rather than deliver messages and factual information, the influential actors promote reflective dialogue about the norms and values related to family planning and reproduction. Recognizing that these are deeply embedded in gender identities, Tékponon Jikuagou engages men and women simultaneously and with equal intensity.

In contrast to standard community mobilization and information campaigns, Tékponon Jikuagou's social network diffusion approach does not attempt to control the movement of new ideas and attitudes as they diffuse. The aim is to reach a tipping point or critical mass, sufficient for sustaining new ideas and attitudes, rather than the numerical targets typical of other programming approaches. The Tékponon Jikuagou package is light-touch and low-resource, and these attributes underpin its scalability.

A Promising Confirmation

Benin's family planning services are in the process of being revitalized. Even in the context of a limited family planning program, the Tékponon Jikuagou package has proved its value as an effective, efficient means of helping people address and alter the social norms surrounding family planning, and thereby reduce unmet need for family planning. The results of our scale-up phase are an extraordinarily promising confirmation that the package's components have the ability to rapidly alter personal and social network attitudes and behaviors in profound and, it is to be hoped, lasting ways.



For more information on Tékponon Jikuagou and social network diffusion approaches visit:

How-To Guide for Social Network Diffusion Approaches to Overcome Social Obstacles to Family Planning Use

www.bit.ly/SN-Diffusion-FP-How-To

¹ The project was moved to Benin from Mali after the 2012 coup d'état. The approach was designed using formative research from Mali and Benin, given the many cultural similarities related to family planning use.

² This program goal was twinned with a social development goal: to create, test and scale up an easily replicable—and scalable—intervention package that harnesses social networks to create and support social change.

³ Institute for Reproductive Health. 2016. "Projet Tékponon Jikuagou: Addressing Unmet Need for Family Planning. Scale-Up Results in Ouémé." *Tékponon Jikuagou*. Washington, D.C.: Kim Ashburn.



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