IPA PRELIMINARY RESULTS BRIEF JUNE 2021

Increasing Demand for Modern Contraception in Burkina Faso with a Mass Media Campaign





Mass media reaches a large and growing share of the population in developing countries, but can it be used to tackle poverty and change behaviors, such as the adoption of modern contraception? Given the low marginal costs of mass media campaigns, even small effects could be highly cost-effective. IPA partnered with researchers and Development Media International to evaluate the impact and cost-effectiveness of an intensive, 2.5-year mass media radio campaign in Burkina Faso that promoted family planning and aimed to dispel myths and misinformation about modern contraception.

Key Findings

After two and a half years:

- » On average, the campaign led to a 5.9 percentage point increase in the modern contraceptive prevalence rate (mCPR): in December 2018, 29.5 percent of the comparison group were using modern contraception compared to 35.5 percent of the group exposed to the campaign.
- » The impact appears to be driven by more accurate information. The campaign led to a 9 percentage point reduction in the share of women thinking that modern contraception can make a woman sterile and an 8.4 percentage point reduction in women believing contraceptives cause sickness.
- » There is evidence that the impact on contraception translated into a 10 percent reduction in births and an increase in women's self-assessed health and well-being.
- » Women exposed to the campaign were significantly more likely to have positive attitudes towards family planning,

- believing that "women should control the number of children they have during their lifetime."
- These results are supported by administrative clinic data that shows positive impacts on the number of family planning consultations and the number of contraceptives distributed in areas exposed to the campaign.
- » Intensive media campaigns such as these are likely to be highly cost-effective when delivered at scale. We estimate that a nationwide media campaign in Burkina Faso would lead to 225,000 additional women using modern contraception annually at a cost of US\$7.70 per additional woman.
- » Overall, these results demonstrate that high-intensity mass media campaigns can significantly impact modern contraception uptake and can potentially empower millions of women to plan their families and space births.

RESEARCHERS

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PARTNERS

Development Media International

COUNTRY

Burkina Faso

TIMELINE

2016-2018

SAMPLE

16 radio stations, 7,515 women in 252 villages, 838 clinics

TOPICS

Family Planning & Contraceptive Use, Gender

The Challenge

Limited Use of Modern Contraception and Poor Maternal Health Outcomes

High fertility rates and short spacing between births are both associated with poor health outcomes for women and their children. Many women report that they would like to have greater control over the number and timing of births, but are not using contraception. According to the World Health Organization, the main barriers to contraceptive uptake in Sub-Saharan Africa are a lack of information and fear about contraceptives, rather than access to contraception¹.

Mass media campaigns have potential to provide useful information on the benefits of family planning and influence social norms around such a contentious topic at very low cost. However, mass media campaigns are also hard to evaluate given the difficulty in finding good control groups when national media is typically the most powerful channel. As a result, limited evidence exists on their effectiveness in changing attitudes and behavior.

The Program

An Intensive Mass Media Radio Campaign About Modern Contraception

The mass media campaign was implemented by Development Media International (DMI)², a non-governmental international organization specializing in TV and radio mass media campaigns. The radio campaign consisted of one-minute and 30-second radio spots broadcast 10 times a day every day, and three two-hour interactive phone-in radio shows every week, in six local languages. The campaign lasted 2.5 years, from June 2016 to December 2018.

Radio spots and phone-in shows were designed to address, in an entertaining way, the key barriers to contraception adoption. To identify these barriers, DMI conducted formative research on information barriers in rural Burkina Faso. Based on that initial research, the campaign focused on providing information about the different modern methods available in this context (implants, injectables, condoms, and pills). It also addressed concerns about side effects, misconceptions about infertility caused by modern contraceptives, information on the health and economic benefits of birth spacing, gender norms, and the responsibilities of men.

The Evaluation

16 Radio Stations: Campaign vs. No Campaign for 2.5 years

IPA partnered with researchers and Development Media International to evaluate the impact and cost-effectiveness of the radio campaign. Researchers selected sixteen community radio stations—collectively reaching over 5 million people—that had minimal overlap in coverage area and broadcast in different languages. Of these sixteen radio stations, half were randomly selected to receive the media campaign. The other half served as a comparison group and did not receive the campaign during the study period.

Researchers randomly allocated 1,557 women who did not have a radio at baseline to receive a radio. This additional intervention allowed researchers to measure the impact of receiving a radio in areas where the mass media campaign was implemented and to compare it with the impact of receiving a radio in control areas not targeted by the media campaign. The media campaign is thus evaluated in two different ways, resulting in more robust results. The research team used survey data from 7,500 women and administrative data from 838 clinics to measure contraception disbursement and use.

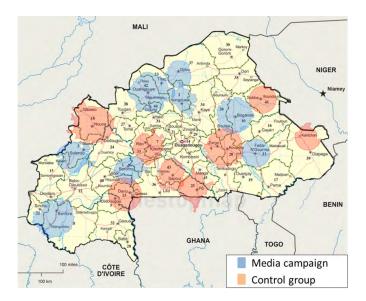
Who were the women in the study?

From the baseline survey in May 2016,

- 30 years old on average
- 83 percent married
- 20 percent never went to school
- 47 percent were working and generating
- Lived 4.5 kilometers away from the nearest health center on average
- 23 percent were using modern contraception (close to national average)
- 46 percent declared unmet needs for contraception



Figure: Map of Burkina Faso showing broadcasting areas of the 16 local radio stations included in the study



Findings

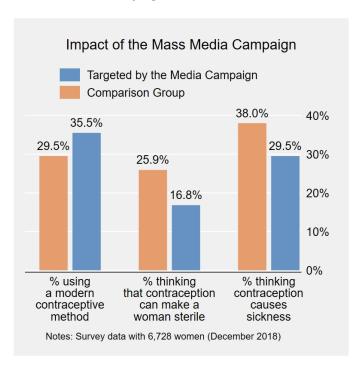
Overall, the campaign led to an increase in contraceptive use by providing information on potential side effects of modern contraception methods and by convincing women already in favor of modern contraception to use it more consistently.

1. The campaign led to a 20 percent increase in the modern contraceptive prevalence rate (mCPR) on average: at the time of follow-up, 29.5 percent of women were using modern contraception (mostly pills, injectables, and implants) in the comparison group, while 35.5 percent were in the group that was exposed to the campaign. According to clinic data, the number of family planning consultations and the number of contraceptives distributed was also significantly higher in areas that received the campaign.

The impact on modern contraceptive use was driven by women who already had a radio when the campaign started (an increase of 7.7 percentage points) or who received a radio through the individual randomization (an increase of 5.9 percentage points).

- 2. The campaign doubled the rate of increase in contraceptive uptake. Comparison to nationally representative Performance Monitoring for Action (PMA) 2020 data for Burkina Faso suggests it would have taken a further 2.5 years for control areas to reach the same rate of contraceptive use as areas that were exposed to the campaign.
- 3. Results are supported by the radio distribution **intervention:** in areas that received the campaign, women who also received a radio were 5.9 percentage points more likely to use a modern contraceptive method than similar women who did not. This is very similar to the result from the clustered analysis.

- 4. In the control areas where there was no campaign, distributing radios had a negative impact on modern contraception uptake (a decrease of 5.2 percentage points) and on gender attitudes (11 percent of a **standard deviation decline**). This finding suggests that in this context, local radio stations do not promote progressive values on gender and modern contraception. By contrast, in intervention areas this negative impact of radio access was more than compensated by the family planning campaign.
- 5. The impacts appear to be driven by an increase in contraception knowledge and positive attitudes toward family planning. The mass media campaign increased knowledge about modern contraceptive methods, driven by a 9 percentage point reduction in the share of women thinking that modern contraception can make a woman sterile and an 8.4 percentage point reduction in women thinking modern contraception causes sickness.
- 6. The campaign was especially effective for women already using some contraception before the campaign but who may not have been using it consistently. On the other hand, the campaign had less impact on women younger than 22 and women who had negative views about contraception to start with.
- 7. There is evidence that the impact on contraception translated into other important outcomes for women: women in areas targeted by the campaign had lower fertility (a 10 percent reduction) and higher levels of self-assessed health and well-being. Attitudes towards family planning improved with a 7.8 percentage point increase in women being likely to believe that they should control the number of children they have during their lifetime.
- 8. The annual cost per additional woman using modern contraception during the pilot study was US\$42.50 (FCFA23,450). Under reasonable assumptions, this annual cost drops to US\$7.70 (FCFA4,250) for the scaled-up national media campaign.





Conclusion

Overall, these results demonstrate that high-intensity mass media saturation campaigns can significantly increase uptake of modern contraception, particularly among women who are not strongly opposed to modern contraception. This impact is likely to be highly cost-effective in countries like Burkina Faso.

In the absence of high-quality programming, access to mass media can lead to less progressive attitudes on women's role in society and lower modern contraceptive use. This study provides evidence that lack of information (especially on side effects of contraceptives) is a constraint to contraception use in communities with low education rates, where fertility is high and there is an unmet need for contraception.

At the same time, the results reveal the challenge of changing fertility norms and reaching segments of the population with negative attitudes toward modern contraception. Finding effective ways to address these challenges will require further research.

Policy Impact

In response to initial findings, Development Media International decided to scale up the mass media campaign nationally in January 2019. As of April 2021, the campaign was broadcast on 39 radio stations, in 10 local languages, reaching an estimated 11.2 million people across Burkina Faso. Researchers estimate that national implementation translates to 225,000 additional women using modern contraception in Burkina Faso.³ Implementing the program at scale is also more cost-effective: the scaled-up program costs US\$7.70 (FCFA4, 250) per additional woman using modern contraception annually.

The working paper for this trial is now available here: https://www.csae.ox.ac.uk/publication/1173964/manual

References

- 1. Cleland G.C., Ndugwa, R., Zulu, E. M., 2011. "Family Planning in sub-Saharan Africa: progress or stagnation?" *Bulletin of the World Health Organization*, 89:137-143.
- 2. https://www.developmentmedia.net
- 3. Glennerster, R., Murray J, and Pouliquen, V., 2019. "Mass Media and Modern Contraception Uptake: Experimental Evidence from Burkina Faso."





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