

Midterm Results: Ideation Linked to Increased Contraceptive Prevalence Rate

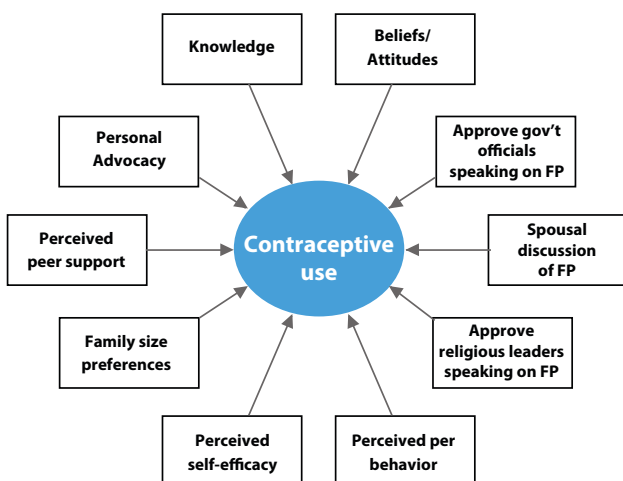
NURHI 2013

Results of the Nigerian Urban Reproductive Health Initiative (NURHI) Midterm Survey show that NURHI is producing results: there have been substantial increases in the contraceptive prevalence rate (CPR) varying from 2.3 to 15.5 percentage points in four NURHI cities between baseline and midterm, a period of less than two years. The data also reveal that intention to use family planning (FP) increased by 7.5 - 10.2 percentage points across the cities, with an average of approximately 20% of women not currently using contraception now intending to use.

Ideation

In addition to basic measures of contraceptive use and intention, the Midterm Survey measured an index of variables that together predict contraceptive use. These variables, called *ideational factors*, are the targets of NURHI program activities.

Figure 1: A predictive model of communication and change



Ideation is a ‘behind the scenes’ look at what affects change. Ideation theory states that *there are many factors that influence a person to act based on their*

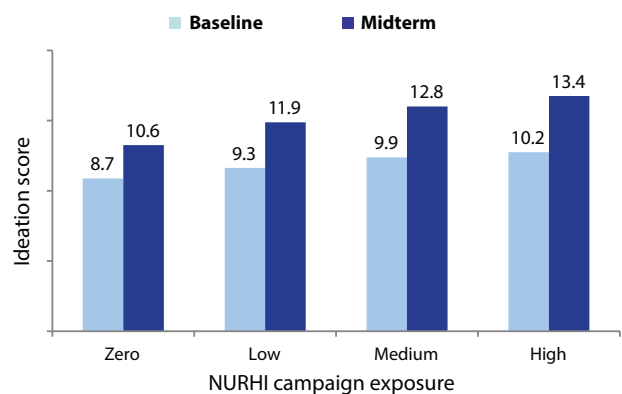
own perceptions. For example, some ideational factors related FP are personal – what people know about FP or how they think FP will affect them – and others are normative – what people believe others will think of them if they use FP.

Ideational factors work together. The more positive ideational factors a person holds, the greater the likelihood that the person will adopt the desired behavior. Prior research¹ has shown that the ideational factors affecting individual FP use include those in the predictive model of communication and change (see Figure 1).

Changes in Ideation and CPR

Since the program’s inception in 2009, NURHI has addressed ten main ideational factors (see Table 1) through its service delivery, advocacy, public-private partnership and demand generation activities. As predicted and planned, NURHI program exposure is shown to be positively correlated with change in important ideational factors. These ideational factors are themselves predictors of contraceptive use, therefore indicating a correlation between NURHI activities and changes in CPR.

Figure 2: Mean ideation score¹, by level of campaign exposure, baseline, midterm, all cities



¹ Out of a possible score of 21

¹ Kincaid, D. L. (2000). Mass Media, Ideation, and Behavior: A Longitudinal Analysis of Contraceptive Change in the Philippines. *Communication Research*, 27(6), 723-763.

Babalola, S., & Vondrasek, C. (2005). Communication, ideation and contraceptive use in Burkina Faso: an application of the propensity score matching method. *Journal of Family Planning and Reproductive Health Care*, 31(3), 207-212.

One of the reasons for NURHI's success to date is very high program exposure². At midterm, 83.4% of all surveyed women had been exposed to at least one NURHI campaign activity on the TV, radio, community or clinic.

With increased exposure, the data showed positive changes across a number of ideational factors. This level of change can be expressed in an ideation score. The overall ideation score for Midterm Survey respondents increased most when there was high exposure to NURHI activities (See Figure 2). CPR changes at the city level also correlate with exposure and ideation scores, enriching the link between program exposure and behavior change.

Impact and Program Strategy

The CPR changes from baseline to midterm, along with the ideational scores presented provide evidence that the NURHI strategy is sound. Midterm corrections are focused on tailoring and refining program approaches and activities for further impact.

Table 1: Measuring changes in ideation

10 Ideational Factors	NURHI Midterm Result
FP methods knowledge	Knowledge of at least one modern method went up in all 4 cities, from 88.7% to 91.7%. Spontaneous knowledge of all common methods is up as well.
Beliefs/attitudes about FP	Generally there were lower percentages of women in agreement with the myths at midterm than at baseline, but there is the opportunity for these percentages to drop even further.
Attitudes towards government officials talking about FP	Overall, there was an increase in the percentage of women who approved of government officials speaking publicly about FP from 83% to 91.4%.
Attitudes towards religious officials talking about FP	Overall, there was an increase in the percentage of women who approved of religious leaders speaking publicly about FP from 56.8% at baseline to 71.5% at midterm.
Spousal communication	Similar rates of spousal communication on family size desires and on FP were observed at both baseline and midterm for both men and women. Only 30.7% of women indicated they had discussed FP with their partner in the last 6 months. A majority also indicated that they need spousal approval to use FP (between 70.9% - 82%). Increasing communication between spouses is a priority.
Perceived peer behavior	The perception that most friends use a modern FP method increased from baseline, to an average of 17.5% across all 4 cities. This is an area where NURHI would like to see a greater emphasis, creating a deepening sense of a social norm.
Perceived self-efficacy	Overall, the average score for self-efficacy rose from 3.1 points to 3.6 out of a possible score of 6. The percentage of married women that felt confident that they could convince their spouse about FP rose from 69.9% at baseline to 80.2% at midterm. Those confident to obtain an FP method went up from 75.4% to 82.7%. These results show strong belief in one's own ability to act; it is a priority to move them from "readiness to use FP" to "using FP"
Family size preferences	The NURHI campaign, <i>Get It Together</i> , did not promote a specific family size but rather focused on birth spacing. The percentage of women who indicated wanting 3 or fewer children went up from 14.6% to 17.4%.
Perceived peer support	The percentage of women who perceived peer support for FP increased overall from 22.8% at baseline to 42.1% at midterm. Encouraging individuals to share FP success stories with their peers is a key focus of NURHI.
Personal advocacy	The percentage of women who encouraged their friends to go for FP rose from 17.1% to 33.1%.

The Nigeria Midterm Survey was conducted by the Measurement, Learning & Evaluation (MLE) Project and NURHI in 2012. MLE is the evaluation component of the Urban Reproductive Health Initiative (Urban RH Initiative), a multi-country program in India, Kenya, Nigeria and Senegal that aims to improve the health of the urban poor. The goal of the MLE project is to promote evidence-based decision-making in the design of integrated family planning and reproductive health interventions for the Urban RH Initiative. The MLE Project is implemented by the Carolina Population Center at the University of North Carolina at Chapel Hill, in partnership with the International Center for Research on Women.

To access the NURHI Midterm Research Report in its entirety, please visit www.nurhitoolkit.org.

² Exposure is defined as recall of key messages of program activity or material.