SOCIAL MOBILIZATION

What Is It?

The process through which ministries, donors, implementing partners and communities work together strategically to raise awareness of and create and increase demand for a common goal.

For the Urban Reproductive Health Initiative countries, social mobilization was used to increase knowledge, facilitate behavior change and generate demand for family planning services, usually by using strategic communication channels including:

- Interpersonal communication (in the training of community health workers)
- Mass communication (in the form of songs, radio plays, and similar media)
- Community-level advocacy (by engaging communities and their leaders in town hall meetings)

It is crucial for government, implementing partners and other key stakeholders to engage communities throughout the entire social mobilization designing, planning, implementation and evaluation process. By working with communities from the beginning, community leaders and members can help highlight important social and cultural issues that could help promote or inhibit the community's knowledge of the health issue and their use of related services. It can also lead to greater sustainability of behaviors because communities are empowered to address their own needs and have a sense of ownership in the plan.

What Are the Benefits?

Social mobilization approaches:

- Can reach people who may not come into contact with the health system, particularly marginalized groups and men
- Get people talking about family planning
- Educate the general public about family planning before they see their providers, which may make counseling sessions easier and more beneficial
- Use real-life situations in local languages to describe the benefits of family planning
- Can expand the reach of family planning messages by attracting crowds at events or creating a growing following, in the case of a radio drama series
- Reduce and eliminate family planning myths and misconceptions
- Can help create culturally appropriate and sustainable solutions by working with communities to identify their knowledge, perceptions, attitudes and needs

How to Implement?

Step 1: Assess community needs, issues and resources

Before designing and planning a social mobilization program, it is useful to understand the context in which you will be implementing the program, including potential facilitators and barriers to program implementation and the resources available to and within the communities. You can gather this
information through a literature review of published evidence, key informant interviews, focus groups and/or social mapping/netmap exercises.

Potential limitations to social mobilization activities could include:

• Lack of equipment, training, motivation or compensation/incentives
• Too few mobilizers, such as peer educators, health workers and so forth
• Limited materials
• Poor logistical support

**Step 2: Design a social mobilization strategy**

Ideally, you should develop a social mobilization strategy in a community participatory workshop-type setting. The social mobilization strategy will include a description of the overall implementation plan including:

• How the social mobilizers will be selected
• What roles and responsibilities they will assume
• What activities will be conducted and why
• How social mobilizers will be trained and supervised
• What materials and equipment they may need
• How the strategy will be monitored and, eventually, evaluated

**Step 3: Identify and partner with local organizations**

NGOs that will implement and manage social mobilization activities, including supervision and coordination of community-level social mobilizers, should meet specific criteria before being chosen. The Nigerian Urban Reproductive Health Initiative (NURHI) team working on the Youth Urban Mobilization (YUM) Strategy used the following criteria when choosing NGOs:

• Be registered as a corporate body
• Have experience in family planning and other health-related issues
• Have a functioning financial system
• Be located in the specified city in order to properly manage the identified social mobilizers and their activities

The role of the NGOs differ from those of the social mobilizers who are responsible for facilitating discussion groups, referring clients to health facilities and conducting important life event celebrations.

**Step 4: Design, test and produce social mobilization materials**

Social mobilization materials may be developed within a workshop setting that includes program staff, stakeholders and, possibly, graphic designers or artists. In Nigeria, participants of the media and materials development workshop:

• Identified local languages and phrases or words that would best communicate the program’s goal
• Identified equipment needs
• Determined what materials should be developed (for example, referral cards and branded badges, pins, bags, shirts, jackets, hijabs and pens)
• Designed and pretested material prototypes

After the workshop, additional materials may be developed, such as tools or implementation kits, pamphlets or checklists for facilitators and social mobilizers.

**Step 5: Choose and train social mobilizers**

Potential social mobilizers must meet specific criteria in order to be selected. In Nigeria, the terms of
reference for NURHI YUM social mobilizers stated that potential mobilizers must:

- Be willing to volunteer
- Be between the ages of 18 and 35
- Live in urban slums
- Be an artisan (barber/hair stylist, driver, mechanic or tailor)

The project developed an orientation guide for social mobilizers that described how activities should be conducted and included basic family planning information.

**Step 6: Implement and monitor social mobilization activities**

It is crucial to not only implement activities but also monitor them. By measuring progress, programs and activities can make decisions and adjust plans based on evidence. The NURHI YUM project implemented four activities: knowledge and visibility parades, key life events, outreach services and radio drama discussion groups. These activities provided the opportunity to increase service visibility, facilitate knowledge exchange and refer patients using branded referral cards. Monitoring of these activities included measuring mobilization meeting attendance, supervisor checklists and family planning uptake—through the number of referrals provided compared with the number of completed referrals.

**What Is the Evidence?**

In Nigeria, more than 375 social mobilizers in NURHI project cities educated their communities about family planning. Between 2010 and 2014, the modern contraceptive prevalence rate increased from 21.1% to 30.7% among all women and from 18.8% to 29.0% among poor women in the six NURHI cities (Measurement, Learning and Evaluation Project Nigeria Team, 2017).

**Modern contraceptive prevalence rate (percent) by woman’s age at time of baseline and endline NURHI survey in six urban sites**

Social mobilization is one of several contributing activities that led to the increased uptake of modern contraceptive methods by women in the NURHI cities. While sometimes challenging to measure on its own, it is clear that social mobilization activities help increase awareness and generate demand by engaging communities in the social mobilization process.

While evidence for social mobilization within family planning activities and programs is still limited, other health areas – such as polio, tuberculosis, Ebola, nutrition and gender-based violence – have provided evidence of the importance and value of social mobilization activities to facilitate behavior change, increase knowledge and generate demand for products and services.
Tools Related to This Approach

• Criteria for Selecting Social Mobilizers
• Go Referral Card
• Guidelines for Key Life Events
• Media and Materials Development Workshop
• NUHRI Referral Manual
• Radio Discussion Group Training Curriculum
• Social Mobilization Coordination Chart
• Social Mobilization Work Plan Template
• Social Mobilizer Orientation Guidelines
• Youth Urban Mobilization Plan

Related Approaches

• NIGERIA: Social Mobilization

Helpful Tips

• Working with local civil society organizations can help identify and build capacity, create and sustain trust in health and family planning services and build linkages between communities and family planning services.
• Social mobilization activities should be developed with communities to ensure that social and cultural beliefs are considered and local languages are used to communicate messages.
• By increasing awareness and social consciousness, communities can transform demand into action – increasing use of family planning services and methods.
• Involving communities in all the stages of the social mobilization process gives communities a sense of ownership and can motivate them to sustain new practices.

Challenges

• Implementation of outreach services may be limited by financial constraints, inadequate Overcoming social and cultural beliefs, values and practices to discuss and use family planning among community members may take considerable time.
• Poor infrastructure or supply chain issues may need to be resolved before implementing social mobilization activities.
• If proper community-entry practices – that is, gaining the approval and acceptance of community leaders – are not followed, communities may not accept or respond to social mobilization efforts.

External Resources

• Community-based Family Planning Toolkit
• UN Women Virtual Knowledge Centre to End Violence Against Women and Girls
• WHO and Stop TB. Advocacy, Communication, and Social Mobilization Tools
• Social Mobilisation, Advocacy and Communication for Nutrition
• Overcoming Social Barriers to Family Planning Use: Harnessing Community Networks to Address Unmet Need

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