

# EFFECTIVE REPORTING OF FAMILY PLANNING



## A Training Manual for Media Practitioners



Development Communications Network

*Effective Reporting of Family Planning  
A Training Manual for Media Practitioners*

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Developed by Development Communications Network

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## ABOUT DEVELOPMENT COMMUNICATIONS NETWORK

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**Development Communications Network** is a media development, not-for-profit organization, dedicated to mobilizing, promoting and galvanizing science, public health and social sector journalism to ensure resultant and sustainable human development. Our Mission is to strengthen public and independent media sector to reach its full potential for availability, accessibility and meaningful utilization of science, public health, and social development information for sustainable human development.

The organization is a product of series of development projects on media (both print and broadcast – including video documentaries, drama for development and radio productions) health promotion, advocacy and capacity building in the Nigerian mass media and the civil society sector from 1995 to date.

DevComs plays a leading role in promoting public health, science and social development communication in Nigeria to ensure an informed society and better policies that affect the people of Nigeria.

## FOREWORD

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Family Planning plays a central role in achieving the Sustainable Development Goals. Beyond saving lives, family planning helps to reduce poverty, improve nutrition outcomes, support women's and girls' education, and advances gender equality and empowerment. Family planning mitigates the effect of population growth on access to water and sanitation, chemical waste, climate change, deforestation etc. and contributes to building resilient infrastructures. In summary, family planning advances human rights. (Starbird, E. & Norton, Maureen & Marcus, Rachel. (2016).

The media plays significant role in influencing policy change and amplifying the voices of the people. When priority is given to reporting issues in ways that stimulate public discourse, it is more likely to get the attention of policy and decision makers. If effectively engaged, the media can generate public discourse that will influence popular and political support for development issues including maternal and child health issues focusing on family planning.

Providing journalists with adequate information will translate to empowering the media to provide appropriate information to the public including policy makers, engage in advocacy for improved health outcomes for women and children.

This manual has been developed by Development Communications Network in collaboration with Nigeria Urban Reproductive Health Initiative to

- equip media practitioners with knowledge on Family Planning, Adolescent Reproductive Health and related issues
- strengthen the skills of media practitioners on effective reporting of Maternal and Child health issues, with focus on Family Planning

With this Training Manual, we seek to create a pool of champions who will initiate and sustain the discourse on family planning in the media, promote family planning, engage in dialogues with the public, policy makers, monitor policy actions and budgetary allocations to Family Planning and serve as dynamic checks and motivators for improved accountability by the policy makers.

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## MODULE 1

### UNDERSTANDING TERMINOLOGIES IN MATERNAL HEALTH, ADOLESCENT REPRODUCTIVE HEALTH & FAMILY PLANNING



#### LEARNING OBJECTIVES

By the end of the session, participants will be able to

1. List three terminologies used in maternal health, adolescent reproductive health and Family Planning
2. Explain three terminologies used in maternal health, ARH and Family Planning
3. State two statistical information relating to adolescent, maternal and child health
4. Explain two statistical figures relating to adolescents reproductive health and family planning



#### MATERIALS

- Flip sheets
- Masking tape
- Printed papers.
- Markers



#### LEARNING APPROACH

- Group activity
- Brainstorming



#### CONTENT

- Split participants into two groups. Let participants gather in their groups.
- Provide Group 1 with two sets of printed sheets. One set of printed sheets should contain terminologies used in maternal, adolescent health and Family Planning (e.g.

Contraceptive Prevalence Rate, Maternal Mortality Ratio, Infant Mortality Rate, Adolescent Birth Rate, Total Fertility Rate, Women with unmet need etc). The second set of printed sheets should contain the definitions of the terminologies listed above. Shuffle the first and second sets separately. Let participants in Group 1 brainstorm and match the terms with their definitions, and paste on a large flip sheet on the wall.

- Provide Group 2 with two sets of printed sheets. One set of printed sheets should contain terminologies used in maternal, adolescent health and Family Planning (e.g. Contraceptive Prevalence Rate, Maternal Mortality Ratio, Infant Mortality Rate, Adolescent Birth Rate, Total Fertility Rate, Women with unmet need etc). The second set of printed sheets should contain their current statistical figures. Shuffle the first and second sets separately. Let participants in Group 2 brainstorm and match the terms with their statistical figures on a large flip sheet which will be pasted on the wall.
- Let groups carry out their task in ten minutes.
- Bring groups together after ten minutes. Together, assess each group's tasks.
- Debrief by assessing and correcting each group's tasks.
- Explain each terminology for better understanding by participants.
- Explain how Family Planning is related with the phenomena described in the tasks e.g. the current maternal mortality and teenage pregnancy rate is unacceptably high. Family Planning can reduce maternal deaths by over 30% .....
- Ask participants for feedback on lessons learnt from the activity.



### Some terminologies and definitions related with maternal and child health

Terminologies	Definition
Contraceptive Prevalence Rate	The percentage of women of reproductive age who are currently using, or whose sexual partner is currently using, at least one contraceptive method, regardless of the method used. It is reported for women aged 15 to 49 who are married or in a union- WHO 2018
Total Fertility Rate	The number of children who would be born per woman (or per 1,000 women) if she/they were to pass through the childbearing years bearing children according to a current schedule of age-specific fertility rates- Measure Evaluation (Family Planning and reproductive Health Database)
Women with unmet need for family planning	Women of child bearing age who want to stop or delay childbearing but are not using any method of contraception
Maternal death	The death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and the site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management, but not from accidental or incidental causes- WHO 2004
Maternal Mortality Ratio	Ratio of the number of maternal deaths during a given time period per 100,000 live births during the same time-period- Population research institute, 2014
Infant mortality rate	Probability of dying between birth and exactly one year of age expressed per 1,000 live births- UNICEF
Under-five mortality rate	Probability of dying between birth and exactly five years of age expressed per 1,000 live births- UNICEF
Adolescence	The period of physical and emotional change between the beginning of puberty and early adulthood. The World



	Health Organisation defines adolescents as young people aged 10-19.
Menstruation	The flow of blood, fluid, and tissue out of the uterus and through the vagina that usually lasts from three to five days each month.
Oestrogen	Hormone responsible for female sexual development. It is also used in contraceptive pills to prevent pregnancy.
Menstrual Cycle	A repeating series of changes in the ovaries and endometrium that includes ovulation and monthly bleeding. Most women have cycles that each last between 24 and 35 days
Ovulation	The release of an egg from an ovary.
Progesterone	A hormone produced in the ovaries of women that is important in puberty, menstruation, and pregnancy.
Reproductive Cell	The unique cell - egg in women, sperm in men - that can join with its opposite to make reproduction possible.
Safe Sex	Ways in which people reduce the risk of becoming pregnant and getting sexually transmitted infections, including HIV.
Sexually Transmitted Infections (STIs)	Infections that are often or usually passed from one person to another during sexual or intimate contact.
Spermicides	Chemicals used to immobilize sperm to help prevent pregnancy.
Maternal health	Health of women during pregnancy, childbirth, and the postpartum period. It encompasses the health care dimensions of family planning, preconception, prenatal, and postnatal care in order to reduce maternal morbidity and mortality.

Add more terminologies as appropriate

**Some statistics and figures related with maternal and child health**

Phenomenon/Terminologies	Figures
Approximate number of annual maternal deaths in Nigeria	40,000
Maternal Mortality Ratio	576 per 100,000 live births
Adolescent birth rate	122 births per 1,000 women age 15-19
Percentage of births in Nigeria attended by a skilled health personnel	38.1%
Unmet need for family planning	16.1%
National contraceptive prevalence rate	15.1%
Infant mortality rate	69 deaths per 1,000 live births
Under-five mortality rate	128 deaths per 1,000 live births
A woman's lifetime risk of dying from pregnancy or childbearing-related causes in Nigeria	1 in 13

\*Statistics gotten from NDHS 2013

Add more statistics as appropriate



## EVALUATION

1. List three terminologies used in maternal health and Family Planning and explain them
2. What is maternal mortality ratio in Nigeria? What does this imply?
3. What is contraceptive prevalence rate in Nigeria? What does this imply?

## MODULE 2

### UNDERSTANDING FAMILY PLANNING



#### LEARNING OBJECTIVE

By the end of the session, participants will be able to

1. Explain the concept of Family Planning
2. List at least six methods of Family Planning
3. List four benefits of Family Planning



#### MATERIALS

- Flip sheets
- Masking tape
- Markers
- Projector
- Screen.



#### LEARNING APPROACH

- Power point presentation
- Brainstorming



#### CONTENT

##### Overview

Explain to participants that Nigeria has made very bold efforts to achieve rapid economic development. However, amongst other factors, rapid population growth has affected the quality of life and made achievement of socio-economic development goals difficult.

##### Definition of Family Planning

- Ask participants to tell you what they understand by the concept, Family Planning.
- Take comments from four to five participants.
- Clarify their comments

- Explain the concept of Family Planning.

Family planning is a way of thinking and living that is adopted voluntarily upon the basis of knowledge, attitudes and responsible decisions by individuals and couples in order to promote health and welfare of the family group and thus contribute effectively to the social development of the country. (WHO, 2002)

### **Types of Family Planning Methods**

- Ask participants to list the various Family Planning methods they have come across, heard of or used.
- Note the methods listed by participants.
- If there are any methods listed that are not Family Planning methods, clarify with participants what Family Planning methods should do – prevent pregnancy.
- Explain the following methods of Family Planning in detail.
  - ✚ Natural Family Planning
    - Lactational Amenorrhea Method (LAM)
    - Cervical Mucus or Billings Method
    - Ovulation Method
    - Calendar (Rhythm) Method
    - Sympto-thermal Method
  - ✚ Barrier Methods
    - Male Condoms and Female Condoms
    - Diaphragms
    - Cervical caps
    - Vaginal sponges
    - Spermicides
  - ✚ Hormonal Methods
    - Oral pills
    - Injectables
    - Implants
    - Intra-uterine Contraceptive Devices
  - ✚ Voluntary Surgical Contraception
    - Bilateral tubal occlusion

- Vasectomy
- ✚ Other modern method
  - Standard days method with the use of Cycle beads

### **Benefits of Family Planning**

- Ask participants to state some benefits of Family Planning to the mother, father, child/children, the community and the nation.

#### ✚ Benefits of FP to mother

- Allow mothers the opportunity to rest between pregnancies in order to regain her health and strength so that she will avoid complications during and after each pregnancy
- Mothers are able to have healthy children/babies
- Mothers will have time to be able to develop herself and contribute financially to her upkeep and her family
- Removes fear of unintended pregnancy
- She is able to spend quality time with each child
- She will be able to breast feed as long as possible thus providing her baby with nutritious food and protection from diseases
- Reduces maternal ill health and death

#### ✚ Benefits of FP to the father

- Eliminate the fear of unintended pregnancy and more mouth to feed
- Promote father's social well being
- Has less anxiety and stress thus preventing ill health and premature death
- Able to spend quality time with the family
- Able to play the role of a father better and plan for the future of the children
- Has quality time for the wife and encourage close relationship between wife and husband

#### ✚ Benefits of FP to the child

- Able to receive good care and attention from their parents and promote bonding
- Will not feel bored and neglected and thus will be less prone to juvenile delinquency tendencies
- Will not be forced into child labour in order to help the family meet financial needs
- Reduction on infant illness and death
- Better health, education, clothing and employment opportunities

#### Benefits of FP to the family

- Enhances the family's nutrition
- Promotes economic growth
- Promotes education of children

#### Benefits of FP to the community

- Allows community to plan and manage its resources effectively
- Discourages social delinquencies
- Promotes community unity
- Enhances appropriate use of resources
- Reduces infant and maternal illness and death
- Reduces teenage pregnancy and abortion
- Enables longer breastfeeding period

#### Benefits of FP to the nation

- Promotes socio-economic development
- Improves quality of life



#### **Conclusion**

- By allowing women the freedom to control the number and spacing of their births, family planning helps women preserve their health and fertility and also contributes to improving the overall quality of their lives
- Because the effects of family planning are not immediate, long-term benefits would be seen beyond now.
- Death due to abortion can be drastically reduced with effective FP programming
- There is no one way strategy to address barriers to access and utilization of FP , multiple strategies should be employed and all hands must be on deck to ensure its success



#### **EVALUATION**

1. What is Family Planning?
2. List two natural FP methods and four modern FP methods
3. List four benefits of Family Planning

## MODULE 3

### ADOLESCENT REPRODUCTIVE HEALTH



#### LEARNING OBJECTIVE

By the end of the session, participants will be able to

4. Explain the concept of Adolescent Reproductive Health
5. List at least six methods of Family Planning
6. List four effects of unplanned pregnancy



#### MATERIALS

- Flip sheets
- Masking tape
- Markers
- Projector
- Screen.



#### LEARNING APPROACH

- Power point presentation
- Brainstorming
- Interactive



#### CONTENT

##### Overview

Explain to participants that young people are rarely provided with adequate knowledge about their own development, especially in regard to sexuality, the changing human relationships which take place during adolescence, and the benefit to boys and girls of equity between the sexes.

##### What is reproductive and sexual health?

- Ask participants to tell you what they understand by adolescents and youths reproductive and sexual health.

- Take comments from three to five participants.
- Clarify their comments
- Explain the concept of reproductive and sexual health.

Reproductive and sexual health describes the ability and capability of adolescents to understand their sexuality in the context of biological, psychological, socio cultural and reproductive dimensions and to acquire skills in making responsible decisions and actions with regard to sexual and reproductive health behaviour.

The most comprehensive reproductive health and sexual health programmes not only cover the biology and anatomy of reproduction and sex, but also provide young people with information about dating, boy-girl relationships, marriage and contraception. They help develop the skills necessary to resist peer pressures, inappropriate sexual advances and to attain a level of maturity required to make responsible decisions. It includes lessons on attitudes, behaviour and skills to protect them from unwanted pregnancies, STDS, risky sex, sexual abuse, unsafe abortions, as well as development of respect for the human body, sensitivity and equity in gender relations.

### **Contraception for Young People**

Ask participants for their take on young people's use of contraception.

Young people can safely use many contraceptive methods and are often less tolerant of side effects than older women. With counselling, young people will know what to expect and may be less likely to stop using the methods. It is important for youths and adolescents to be aware of STIs risks and how to reduce.

### **Barriers to Access Contraceptive Use**

On sticky notes, ask participants to list some of the barriers to youths and adolescent's use of contraception, one barrier per sticky note. Expatiate on the following

- ✚ Lack of access to services or methods:
  - I. Clinics not designed to be inviting to youth
  - II. Providers reluctant to serve youth
  - III. Cultural taboos in providing information about reproductive health and family planning
  - IV.
- ✚ Youth may:
  - I. Lack transportation to clinic or money to access contraceptives services
  - II. Be concerned about having pelvic exam
  - III. Lack of understanding of: Reproductive health and Family planning methods including side effects
  - IV. taboos around communication
  - V. Not have access to family planning clinic



## VI. Not see the need for family planning uptake

### **Psychological and Social effects of Unplanned Pregnancy for Youth**

Ask participants to mention some of the effects that unplanned pregnancy could have on youths and adolescents.

- ✚ Limited education
- ✚ Fewer career or job opportunities
- ✚ Heavy economic burden • Depression, loss of self-confidence and lack of hope
- ✚ Consequences more severe for young women than men
- ✚ Children of young parents may face psychological, social and economic obstacles

### **Benefits of Adolescents Reproductive Health information**

- Ask participants to state some benefits of reproductive health information to youths and adolescents.

#### ✚ Benefits of ARH

- Better understanding of physiological and emotional changes during puberty,
- Increasing knowledge about reproductive health,
- Increasing access to reproductive health information/ counseling,
- Increasing access to clinical reproductive health services,
- Improving communication among family members,
- Enhancing sexual decision-making/negotiation skills,
- Building self-esteem,
- Delaying initiation of sexual activity,
- Increasing safe sex practices,
- Delaying first pregnancy,
- Increasing space between first and second births.

**Conclusion** – For family planning services to effectively meet adolescents’ unique needs, providers must be trained to understand the nuances of young people’s sex lives and to deliver both counselling and appropriate methods to meet their reproductive desires.



### **EVALUATION**

1. How does contraceptives use benefit youths and adolescents?
2. List two effects of unplanned pregnancy on youths and adolescents.

## MODULE 4

### FAMILY PLANNING AS A TOOL FOR SUSTAINABLE DEVELOPMENT



#### LEARNING OBJECTIVE

By the end of the session, participants will

1. Understand how Family Planning promotes sustainable development
2. Understand the sustainable development goals



#### MATERIALS

- Power point Projector
- Screen
- Video (Family Planning as a tool to unlocking the Sustainable Development Goals)



#### LEARNING APPROACH

- Power point presentation
- Discussion



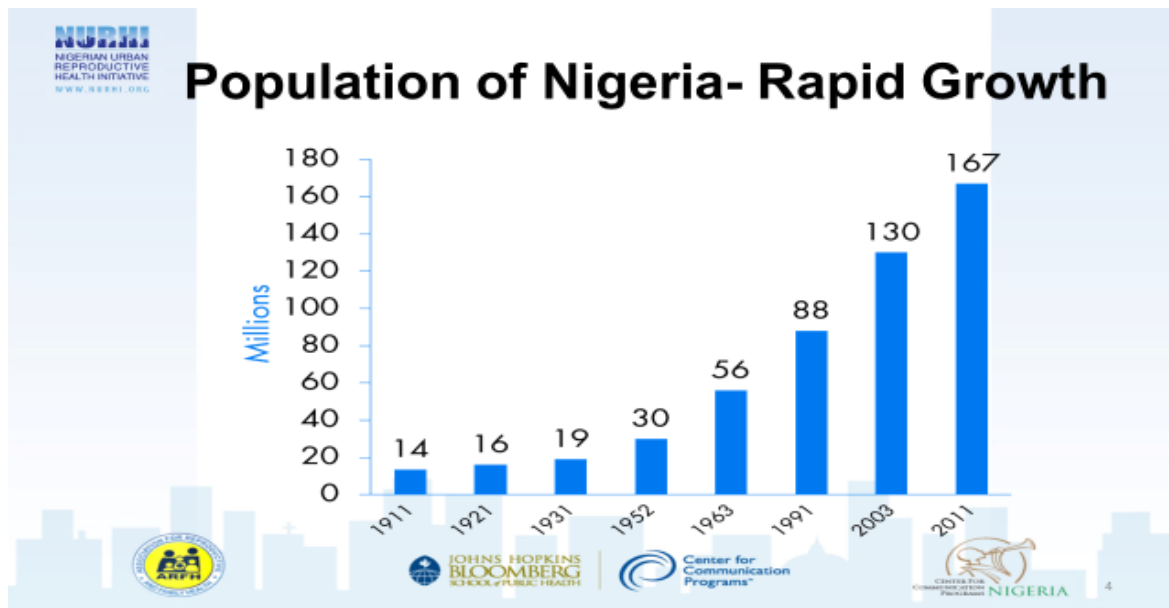
#### CONTENT

#### Overview

- Explain to participants that Family planning helps to improve the health and the overall well-being of women and families around the world. Effective FP can help in

no small measure to achieve the SDGs. By delaying or limiting birth FP helps to lower health care costs, keeps more girls in school and for more years, and ensures more women in the workforce. This benefit can be seen at household, community and national levels.

- Explain to participants that the population of Nigeria is largely young, compared to more advanced countries, and is growing rapidly. Compare Nigeria's fertility rate with advanced countries. Illustrate with charts and diagrams as much as possible.



- State some Reproductive Health indices in Nigeria and relate how Family Planning can reduce the burden reflected by these indices
  - High Maternal Mortality Ratio - 576/100,000 (10<sup>th</sup> highest in the world)
  - High fertility - 5.5
  - Low coverage of health services (ANC - 61%; delivery with skilled attendant - 38%)
  - Low modern CPR -10%; high unmet need - 16%
  - Only 15% of Nigerian married women use a contraceptive method
  - 10% of currently married women report using a modern method.
- Ask participants to brainstorm on the effects of high fertility
- Note comments and explain the effects of Family Planning on health, education, environment, agriculture and the nation's economy.
- Explain in detail the 17 Sustainable Development Goals and how Family Planning can contribute to achievement of each goal.

## SUSTAINABLE DEVELOPMENT GOALS

The Sustainable Development Goals (SDGs) are a United Nations Initiative developed by a global network of governments, donors, multilateral organizations, and other key stakeholders in order to guide and further the global development agenda. Officially known as “Transforming our world: the 2030 Agenda for Sustainable Development”, the SDGs are a set of seventeen aspirational "Global Goals" with 169 targets. These 17 goals, launched in 2015, will build on the Millennium Development Goals.

**Goal 1:** End poverty in all its forms everywhere

**Goal 2:** End hunger, achieve food security and improved nutrition, and promote sustainable agriculture

**Goal 3:** Ensure healthy lives and promote well-being for all at all ages

**Goal 4:** Ensure inclusive and equitable quality education and promote life-long learning opportunities for all

**Goal 5:** Achieve gender equality and empower all women and girls

**Goal 6:** Ensure availability and sustainable management of water and sanitation for all

**Goal 7:** Ensure access to affordable, reliable, sustainable, and modern energy for all

**Goal 8:** Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

**Goal 9:** Build resilient infrastructure, promote inclusive and sustainable industrialization and foster innovation

**Goal 10:** Reduce inequality within and among countries

**Goal 11:** Make cities and human settlements inclusive, safe, resilient and sustainable

**Goal 12:** Ensure sustainable consumption and production patterns

**Goal 13:** Take urgent action to combat climate change and its impacts

**Goal 14:** Conserve and sustainably use the oceans, seas and marine resources for sustainable development

**Goal 15:** Protect, restore and promote sustainable use of terrestrial ecosystems, sustainably manage forests, combat desertification, and halt and reverse land degradation and halt biodiversity loss

**Goal 16:** Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

**Goal 17:** Strengthen the means of implementation and revitalize the global partnership for sustainable development

Explain to participants that Family Planning contributes directly to Targets 3.7 and Target 5.6:

- **Target 3.7:** By 2030, ensure universal access to sexual and reproductive health care services, family planning, information and education, and the integration of reproductive health into national strategies and programmes.
- **Target 5.6:** Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences.

Play video on “Family Planning as a tool to unlocking the Sustainable Development Goals”. Before playing the video, ask participants to listen attentively and take notes as they watch.

Discuss with participants, the issues that were highlighted in the video.



## CONCLUSION

Global population levels have been increasing rapidly for decades. This trend significantly limited the success of the MDGs and threatens to do the same for the SDGs. Therefore increasing access to family planning services is vital to sustainable development.

There are few, if any, development interventions or technologies that can have as transformative an impact on countries, economies and lives as family planning services.

Universal access to family planning services could be provided for a fraction of total global aid spending and can, among other things, help to reduce mortality, improve women’s empowerment, boost economic growth and slow unsustainable population growth



## EVALUATION

3. How does Family Planning promote sustainable development?

4. List two sustainable development goals that are directly linked with Family Planning

## MODULE 5

### CULTURAL AND RELIGIOUS CONTEXTS OF FAMILY PLANNING



#### LEARNING OBJECTIVES

By the end of the session, participants will

- Have better understanding of how FP is perceived from several cultural & religious views
- Understand how to handle particular scenarios with cultural & religious challenges
- Be equipped to anticipate reactions coming from divergent views on FP
- Understand behavioural patterns of others and how to inform them without abusing their sensitivity



#### MATERIALS

- Flip sheets
- Marker



#### LEARNING APPROACH

- Role play
- Discussion



#### CONTENT

#### Overview

The role of religion and culture plays a very crucial and influential position in the decisions of people. Most importantly in the lives of people from developing countries like ours where the religious leader is seen as the representative of God and our cultures are perceived as golden rules that must not be questioned or broken.

As journalists who are saddled with the task of ensuring that the public is informed and educated, it is necessary they are informed about some of the cultural and religious views concerning Family Planning (FP) and then understand how to best communicate it.

- Split participants into two (2) groups.
- Provide each group with a scenario that has been typed out in a sheet. The scenarios are stories of two different families under different circumstances, who need to make decisions about Family Planning. See sample scenarios below:

#### SCENARIO 1

Christy is a 36-year old trader, married to a respected community leader, Solo. She has four children; all girls. She desires to stop having children but her husband's family have been pressurizing her to have a male child. Her husband does not seem to be bothered about the sex of his children; he loves them all the same. However he likes to have as many children as God gives him. He is a committed Catholic and does not believe in the use of contraceptives. Christy's trade and her husband's job do not seem to cover their running costs at home and other expenses. Sometimes, her husband obtains loan to offset house rent, school fees e.t.c. and pays back in instalments. Christy meets her friend, Zuwaira who has three boys and has reached mutual understanding with her husband to stop child bearing and focus on giving their children good quality education and care. Zuwaira was able to achieve this because her husband attended Family Planning counselling session with her at a nearby health facility after listening to radio series on Family Planning. Christy is worried about how to discuss the issue with her husband.

#### SCENARIO 2

Munirat is a 39 year old house wife. She has three children (one boy and two girls). Her last child is 11 months old. She had three other children with her first husband who died after a

chronic illness. Her present husband is very wealthy and married to two other wives. Munirat seems to have all that she needs - catering for the children is not a problem as her husband provides for them. Munirat's other mates have two boys each and one of them is pregnant. Munirat feels that she would be more fulfilled if she had at least one more male child to be at par with the other wives. Her husband does not mind having more children. However, Munirat's mother is concerned for her daughter due to the complications she suffered during her last childbirth. Munirat's mother visits her and tries to dissuade her from competing with her mates and focus more on her health as well as her children's wellbeing.

- Adjust scenarios, if necessary
- Instruct participants to read through their scenarios, tease out the characters, agree on director, and take 15 minutes to rehearse a role play from what they read. The role play should be no longer than 10 minutes.
- Bring groups back together after 15 minutes of rehearsal.
- Let groups present their role plays in 10 minutes each.
- Ask participants to highlight the cultural and religious issues that emanated from the role plays.
- Ask for participants' opinion about the cultural and religious values highlighted in the drama that relates to Family Planning.
- Clarify any cultural traditional values that discourages uptake Family Planning
- Discuss the pertinent health benefits of Family Planning to the family.
- Ask participants to share their experiences from the role plays. What lessons did they learn? How would they respond to cultural and religious perspectives that do not support Family Planning? How would they inform their audience on Family Planning bearing in mind different cultural beliefs?



## EVALUATION

- How is FP perceived in your culture and religion?



- How would you inform your audience on Family Planning in a culturally sensitive manner?

## MODULE 6

### ADDRESSING MYTHS AND MISCONCEPTIONS ABOUT FAMILY PLANNING



#### LEARNING OBJECTIVES

By the end of the session, participants will

- Identify common myths and misconceptions with respect to Family Planning
- Be better equipped to address myths and misconceptions around Family Planning



#### MATERIALS

- Flip sheets,
- Marker



#### LEARNING APPROACH

- Brainstorming



#### CONTENT

#### Overview

Myths are widely held but false belief or idea. Misconceptions are views or opinions that are incorrect because they are based on faulty thinking or understanding. There are myths and misconceptions surrounding the use of Family Planning and they play a huge role in the poor

uptake of Family Planning, especially in developing countries. In order to increase uptake of Family Planning, it is important to address these myths and misconceptions and provide scientifically correct and adequate information on them. As journalists who inform the public, it is very important to discuss these myths, misconceptions, and acquire knowledge to address them so that the listening, reading and viewing audience can be better informed and educated appropriately. This is particularly important to increase Family Planning uptake.

- Ask participants to mention some of the myths, misconceptions they have ever heard or believed about Family Planning.
- Let them write as many as possible on sticky notes – one myth or misconception per sticky note.
- Gather all the sticky notes, paste them on a flip sheet on the wall.
- Take each statement one after the other and discuss with participants.
- Correct the wrong beliefs and provide adequate information to explain/counter each myth/misconception

#### Typical myths and misconceptions about Family Planning

- Using contraceptives can make a woman infertile
  - Contraceptives are dangerous to your health
  - People who use contraceptives end up with health problems
  - Women who use contraceptives can become promiscuous
  - Contraceptives can harm the womb
  - Contraceptives reduce woman's sexual urge
  - Contraceptives can give deformed babies
  - Contraceptives cause cancer
- Explain to participants that modern contraceptives, just like many other drugs/medications may have side effects on individuals who use them, in different ways and to different degrees. However, the side effects can be managed by trained Family Planning providers.
  - Explain to participants that women are expected to go through proper counselling before selecting the contraceptives that suit their body types. Trained Family Planning providers will mandatorily take their clients through counselling and examination before reaching a decision on appropriate Family Planning method.



## **CONCLUSION**

Conclude by telling participants that it is important that they themselves are convinced about the use of Family Planning and correct the myths or misconceptions that they harbour, in order to be able to objectively inform and educate their audience on the need to embrace Family Planning.



## **EVALUATION**

- Identify 3 common myths and misconceptions about Family Planning?
- How would you educate your audience in order to dispel the myths and misconceptions around Family Planning?

## MODULE 7

### FAMILY PLANNING IN NIGERIA: TREND, PRACTICES, ATTITUDES AND BARRIERS RELATED WITH FAMILY PLANNING



#### LEARNING OBJECTIVES

By the end of the session, participants will

- Understand the practices related to Family Planning in their State
- Understand the attitudes related to Family Planning practice in their State
- Understand the barriers related with uptake of Family Planning in their State



#### MATERIALS

- Power point projector and screen



#### LEARNING APPROACH

- Presentation



#### CONTENT

##### Overview

This module is a presentation of research finding with respect to Family Planning in the respective site of participants. The facilitator is expected to provide an overview of Maternal and Child health in the State.

- Provide information about the trend in contraceptive prevalence rate using the National Demographic and Health Surveys (NDHS) conducted in the country e.g. NDHS of 1998, 2003, 2008, and 2013.

- Provide information on the current situation of contraceptive prevalence in the State.
- Reflect on the importance of Family Planning and its benefit to the family, community and nation.
- Highlight the practices related with Family Planning in the State – the method mix (traditional and modern), the profile of users and non-users.
- Highlight the attitude of men and women of reproductive age with respect to the use of Family Planning
- Highlight the barriers related with uptake of modern contraceptives in the State



## **CONCLUSION**

Conclude by emphasizing the benefits of Family Planning, its effect on health, education, environment, infrastructure, agriculture and the economy. Encourage the participants to use their various platforms to inform and educate their audience from time to time on the importance of Family Planning.



## **EVALUATION**

- List three Family Planning methods used by couples in your State
- What are the attitudes related to Family Planning practice in your State
- What barriers are related with uptake of Family Planning in your State

## MODULE 8

### POLICY ENVIRONMENT FOR FAMILY PLANNING IN NIGERIA



#### LEARNING OBJECTIVES

By the end of the session, participants will

- Identify key policies related with Family Planning in Nigeria
- Understand the key targets and provisions of the National Family Planning Blueprint and State Family Planning Blueprint (or Costed Implementation Plan as the case may be)



#### MATERIALS

- Power point projector and screen



#### LEARNING APPROACH

- Presentation



#### CONTENT

##### Overview

Current estimates suggest the population of Nigeria totals 182 million people (2015), ranking the nation as the seventh most populous country in the world and the largest country in Africa. With an estimated annual growth rate of 3.2 percent, Nigeria is projected to become the third most populous country in the world by 2050 with an estimated increase of approximately 216 million people over the next 35 years.(UNDESA) Nigeria has a youthful population; approximately forty-four percent of the population is under the age of fourteen. Nearly fifty percent of the population lives in an urban area and projections suggest 67 percent of the population will reside in urban areas by 2050.

According to the 2013 NDHS, 15.1 percent of married women of reproductive age (15–49) are using any contraceptive method; however, only 9.8 percent of these women are using modern FP methods. 68.1 percent of unmarried sexually active women of reproductive age (15-49) are using any contraceptive method, and 54.9 percent of these women are using modern FP methods. The national rate has largely remained at this level since the late 1990s. The modern method mix in Nigeria is predominantly comprised of short-term methods, notably condoms, pills, and injectables.

- Highlight the prevailing demographic and reproductive health indices in the State including Family Planning uptake and method mix.
  
- List key policies that have direct or indirect impact on Family Planning in Nigeria
  - National Policy on population for Development, Unity, Progress and Self-reliance (2004)
  - The National policy on population for sustainable development (2004)
  - National Strategic Health Development Plan (2010-2015)
  - The task-shifting and task-sharing policy for service providers
  - National Family Planning Blueprint (2014)
  
- Shed more light of the National Family Planning Blueprint

As part of its FP2020 commitment, during the 3<sup>rd</sup> Nigeria Family Planning (FP) Conference, the Federal Ministry of Health launched Nigeria’s FP Blueprint. The goal of the Blueprint is to increase the usage of FP from 15% to 36% by 2018.

- List the strategic areas of the National Family Planning Blueprint
  - Service delivery
  - Supplies and commodities
  - Demand generation and behaviour change communication, which borders so much on media effort, community mobilizers and that of ANN
  - Regulation and policy
  - Financing
  
- Explain each strategic area to the participants
- Highlight the State’s Family Planning Blueprint, if available. Explain the strategic areas/priorities in the state’s policy document.
- Explain the need for participants to have good knowledge of these policies and to monitor their implementation.
- Identify the strengths and/or gaps of the existing policies and make recommendation on key issues for their effective implementation e.g. staffing, financing, etc

- Share copies of the National and State Family Planning Blueprint with the participants for their use and to read up.



## **CONCLUSION**

In order to accelerate our fulfillment of the FP2020 commitment, there is need for all stakeholders to work together to strengthen demand for a full range of contraceptive methods and FP services, target the youth population, increase coverage and access to high-quality integrated FP services and commodities through the private sector, including faith-based organizations, private hospitals/clinics, pharmacies and PPMVs as appropriate for some methods. It is also important to strengthen the capacity of health care workers to provide safe, high-quality FP services and to monitor and evaluate systems and processes put in place.



## **EVALUATION**

- List three key policies related with Family Planning in Nigeria
- List three key strategic areas of the National Family Planning Blueprint
- List three key priority areas of your State's Family Planning Blueprint (or Costed Implementation Plan)



## MODULE 9

### MEDIA INVOLVEMENT IN REDUCING MATERNAL AND CHILD MORTALITY IN NIGERIA



#### LEARNING OBJECTIVES

By the end of the session, participants will

- Understand their roles in promoting maternal and child health
- Identify ways to contribute to preventing maternal and child mortality in the country through family planning advocacy



#### MATERIALS

- Power point projector and screen



#### LEARNING APPROACH

- Presentation
- Brainstorming



#### CONTENT

##### Overview

Media professionals are in the best position to catalyze actions by all of those concerned – the public, the government, policy makers, etc. The society is impacted in diverse ways by the

media and look up to them for information, education and for guidance. The role of the media is therefore very critical to the success of family planning initiatives. The media must be informed for information dissemination, as well as engaging policy and decision makers on issues that border on Family Planning and Adolescent Reproductive Health. Policy makers are not responding to the realities on ground, yet people are suffering because of lack of knowledge.

Thus, Nigeria needs media to help the populace to take life enhancing decisions, simplify understanding for the majority, give ultimate power to the individual over their choices to remain alive, place premium on the lives and the voice of the people concerned, and passionately drive good conscience in governance.

- Highlight the link between uptake of Family Planning and prevention of maternal and child mortality and its contribution to improving quality of lives.
- Emphasize the role of Family Planning in improving the wellbeing of the family and community.
- Highlight the fact that social mobilization is needed so that development issues such as Family Planning does not eventually take the backstage in the media
- Ask participants to list ways they can promote Family Planning issues on their platforms. Note them.
- Add more suggestions on how they can intensify their advocacy efforts on Family Planning.



## **Conclusion**

Media involvement is needed with respect to promoting Family Planning so as to raise family planning in the consciousness of the people as a civic responsibility equal to voting. The media is needed to pay greater attention to family planning issues and save lives and livelihoods. Also, there is need for the media to see family planning information seekers as communities to nurture, help clear misgivings and prejudices against accessing child spacing services and other family planning issues.



## **EVALUATION**

- In what ways can you contribute to preventing maternal and child mortality in the country through family planning advocacy?

## MODULE 10

### WRITING COMPELLING HUMAN ANGLE STORIES ON FAMILY PLANNING



#### LEARNING OBJECTIVES

By the end of the session, participants will

- Learn how to plan and do stories that will stimulate actions from respective stakeholders
- Develop story ideas that will be used by them subsequently



#### MATERIALS

Power point projector and screen  
flip sheets,  
markers



#### LEARNING APPROACH

Presentation, brainstorming, group activity



#### CONTENT

#### Overview

The health of women is a serious health concern globally. Non-use of the Family Planning services is still a major health challenge in Nigeria. Health stories require more prominence in the media. Family Planning stories are not complicated to source. Yet, many news organizations still pay little attention to Family Planning stories.

Highlight the responsibilities of the media with respect to reportage of Family Planning. Include the fact that FP stories need to be told widely, the media needs to influence legislations, demystify FP and provide information to the public that are geared towards influencing changes in behaviours.

Ask participants to brainstorm on different perspectives to writing FP stories. Note them.

Add the following perspectives - the facts and figure angle, the money/budgeting angle, the institutional authorities angle, the research findings angle, the personal concern angle.

Split participants into groups. Groups can be based on type of media platform – (Radio, television, Print/online)

Instruct participants to brainstorm on story ideas on Family Planning using the format below

Broad Issues	Story Angle	Target Audience	Resources Needed	Format

Give participants 20 mins to work in groups.

Provide flip sheets to write on

Ask participants to present their group work.

Discuss the story ideas presented by the participants.

Clarify and refine the story ideas presented if necessary.

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