



# Using private sector funded mass media campaign and NGO alliances to reach FP/RH underserved women and youth in Guatemala

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## **Background:**

Despite that fact that its total fertility rate is the second highest in the region, at 3.6 children per woman, critical reproductive health information is still not available for rural uneducated women and youth. At this rate, it is estimated that the population will double in size in 28 years. Currently, the unmet need of contraceptive methods is 20.8%, with a higher proportion in indigenous, rural communities. The percentage of women using a FP method is 54.1% but 66% of pregnancies are not spaced between 3-5 years. Although the National Family Planning Law was passed in 2005, the regulation/operational decree was only made official on October 30, 2009, and key elements such as incorporating sexual and reproductive health curricula into public schools and training teachers have not been implemented.

Funded by USAID through a public private partnership program, RTI designed, produced and carried out a mass media campaign to raise the level of exposure and awareness in the general public of critical FP/RH issues. RTI engaged the private sector in an unprecedented effort to fund, publicly support and widely disseminate four public service announcements (PSAs), thus supporting public health programs and augmenting the work of the Ministry of Health. Simultaneously, RTI formed a national FP/RH Alliance with five existing NGOs working in providing family planning and reproductive health information, services and referrals to rural, young and poor women and men. The Alliance enhances the work of each NGO, allowing them to achieve their objectives more efficiently than if they operated individually.

## **Hypothesis or Intervention/Activity Tested:**

The national mass media campaign, which was kicked-off in October 2008, contained four messages: 1) Exclusive breastfeeding; 2) Optimal birth spacing; 3) Prevention of teen pregnancy; and, 4) Available FP methods in the country. The target populations for each of the three messages were, respectively: 1) Recent and pregnant mothers who are not currently breastfeeding or who are not planning to continue exclusive breastfeeding for the first six months; 2) Teenage females between the ages of 14 and 19; 3) Women of reproductive age who are pregnant, planning to be pregnant or have not spaced their pregnancies in an optimal manner; and, 4) Men and women of reproductive age who wish to use a FP method.

## **Methodology:**

The first three PSAs were pre-tested in nine focus groups, mainly low socio-economic classes, in rural and urban areas. The levels of acceptance and identification with the messages were 100% for breastfeeding; 94% for birth spacing and 86% for prevention of teenage pregnancy. The messages were revised and aired individually for three weeks each, and simultaneously for an additional three weeks beginning November 2009 on national television and radio stations. They were aired in Spanish on TV and additionally in four Mayan languages on radio. Also, copies of the PSAs were provided to all of the partners for distribution.

**Findings:**

Based on evaluations by the media, almost 1 million people were exposed to the messages through the media campaign. Dichter & Neira were contracted to evaluate the exposure and impact of the disseminated PSAs. To date, two of these messages have been evaluated. The preliminary results suggests that for those who were exposed to the media campaign messages, 86% can recognize the importance of birth spacing and 68% can recognize the importance of family planning. The third message will be evaluated in November 2009, and the fourth in December 2009. For Guatemala, the average level of recognition of a PSA is 44%, therefore the results suggest that there was a significant impact on who has been exposed to the messages.

Partners reported that the PSAs had been used extensively and continuously. PSAs were shared with the National Reproductive Health Program and delivered to all of the national hospitals and health areas which have in turn used them as a tool in the post-partum FP strategy. Another USAID funded program has begun using it as part of the educational curricula in the local nursing schools.

Up to the fourth quarter of FY09, 47,956 persons were exposed to a FP/RH message through the varied RH Alliance implementations. In addition, 24,137 persons were trained in FP/RH by the implementing members of the alliance. Another significant result is the percentage of persons with knowledge in FP/RH is measured at 92%. These numbers suggest that the RH Alliance has improved the access to appropriate FP/RH information and services in the rural areas.

**Knowledge contribution or lessons learned:**

Preliminary results seem to suggest that the mass media campaigns designed to increase the awareness of important FP/RH messages for the underserved population in Guatemala are effective, although Guatemala continues to be a traditional, conservative country. They also serve as a vehicle for nontraditional actors in health; specifically private sector corporations and other for profit entities, to support public health messages and in doing so raise awareness of FP/RH issues of the underserved population. These nontraditional actors may later become a significant source of funding and outreach for government health programs, especially those that can be implemented in working environments or with workers' families. Bringing together recognized and successful organizations to work as a team and standardizing materials and indicators to measure, allow more efficient use of resources and collection of more significant data.

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