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ACCELERATING FAMILY PLANNING PROGRESS IN WEST AFRICA: A RANDOMISED CONTROLLED TRIAL SHOWS RADIO CAMPAIGNS CAN INCREASE UPTAKE OF CONTRACEPTION BY 20%.

A study by Development Media International (DMI) in Burkina Faso, independently evaluated by Innovations for Poverty Action (IPA) and the Abdul Latif Jameel Poverty Action Lab (J-PAL), indicates that radio is a powerful and cost-effective tool for improving family planning outcomes at a large scale.

An estimated 218 million women across low- and middle-income countries (LMICs) have an unmet need for contraception: that is, they want to avoid a pregnancy but are not using modern contraceptives. Mass media reaches a large share of the population in low-income countries, but how effective is it in changing behaviours? To answer this question DMI conducted a randomised controlled trial (RCT) to evaluate the impact of an intensive, 2.5-year radio campaign in Burkina Faso that promoted family planning. This trial was funded by the Global Innovation Fund (GIF), Development Innovation Ventures (DIV) of the United States Agency for International Development (USAID) and an individual philanthropist.

The radio campaign evaluated in this trial was developed and implemented by DMI and consisted of short 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 was broadcast for 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 adoption of contraception. The campaign provided information about the modern methods of contraception that are available in Burkina Faso (implants, injectables, condoms and pills) and the health and economic benefits of birth spacing. It also addressed concerns about side effects, misconceptions about infertility risks and the responsibilities of men.

Researchers selected sixteen community radio stations - collectively reaching over 5 million people - that had minimal overlap in coverage area and broadcast in different languages. Half of these radio stations 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. The research team used panel survey data from 7,500 women (aged 15-49 years), combined with survey and administrative data from 838 clinics across the trial clusters, to measure contraception distribution and use.

- DMI's trial showed a statistically significant 20 percent increase in modern contraceptive use among women living in areas that received the radio campaign compared to women living in areas that did not.
- The rate of increase of contraceptive uptake was double that observed in control areas, meaning that it would have taken those areas a further 2.5 years to catch up.
- The rate of contraceptive uptake was also higher than any other country in Africa measured by PMA 2020 (the most reliable source of national family planning data).
- Following the success of the trial, the campaign was scaled up nationally in Burkina Faso, resulting in an estimated 225,000 additional women using modern contraception, at a cost of \$7.7 USD per woman.
- The cost of achieving this rapid increase was equivalent to just 7.5% of the national family planning budget in Burkina Faso. While demand-side campaigns are dependent on supplies being in place, the study shows that mass media is a highly cost-effective add-on.

Results from the trial are published in a working paper by the Centre for The Study of African Economies at the University of Oxford. [“The Media or the Message? Experimental Evidence on Mass Media and Modern Contraception Uptake in Burkina Faso.”](#) (Ref: WPS/2021-04, Authors: Victor Pouliquen, Rachel Glennerster, Joanna Murray)

The findings and their implications will be discussed in an online event at 16.00-17.30, UK time, on 20th April 2021.

[“Accelerating progress in family planning. How can we double the uptake of modern contraceptives by 2030?”](#) features Paul Kaba Thieba - former Prime Minister of Burkina Faso; Roy Head, CEO, Development Media International;

Rachel Glennerster, former Executive Director J-Pal - now Chief Economist, FCDO; Marie Ba, Director, Ouagadougou Partnership Coordination Unit; Darren Welch, Director of Global Health, FCDO; Alix Peterson Zwane, CEO, Global Innovation Fund. The panel discussion is moderated by David Heymann, former Assistant Director-General, World Health Organisation.

Sienou Awa, of Boromo, Burkina Faso, decided to get an implant after her third child. However, her husband Tanga demanded that she have it removed, for fear that it might damage her health. She tried to convince him that the rumours of health risks were not true but Tanga could not be convinced. The couple tried to use natural family planning methods but Sienou soon fell pregnant again. As she was still recovering from a recent pregnancy just three months earlier, she became weak and ill and unable to help her husband in the fields. She was forced to give up her small business selling peanuts and struggled to take care of her youngest baby while pregnant. Her fourth baby was born weak and sickly and the family fell on hard times. Sienou then heard a DMI programme about family planning on the radio, which dispelled myths about the health risks of modern contraception and explained the benefits of birth spacing. This programme gave her the courage to talk to her husband again about getting an implant. Tanga was so convinced by the radio messaging that he gave Sienou money to have another contraceptive implant fitted and encouraged her to do so. Sienou and her baby are now fully recovered and she has been able to restart her peanut-selling business to support her family.

Burkina Faso has a total fertility rate of six children born to each woman, one of the highest rates in the world. Its population has quadrupled since 1950 and is predicted to quadruple again by 2100. Before the DMI radio campaign began, the study's baseline survey found 46% of women in rural areas had an unmet need for contraception i.e. they wanted to avoid a pregnancy but were not using contraception.

The study also tested whether radio itself had a modernizing, positive effect on family planning by giving radio sets to women in both intervention and control groups. The finding was surprising: that having access to radio in the control groups had a negative effect: less progressive attitudes and lower contraception. It was only by mounting a vigorous campaign (in the intervention areas) that a positive result was obtained. So it's the message, not the medium, that is generating an effect.

While the World Health Organisation has encouraged information campaigns to address unfavorable attitudes towards family planning, until now there has been no rigorous proof that this results in higher contraceptive uptake.

The campaign led to a 5.9 percentage point increase (a 20% relative increase) in modern contraceptive prevalence rate (mCPR) in the intervention zones compared to controls. A key mechanism for the increase in mCPR uptake appears to be improved understanding of modern contraception; the campaign led to a large - 35% - reduction in women who think that modern contraception can make a woman sterile (a 9 percentage point reduction) and a 22% reduction in those who believe contraception causes sickness (an 8.4 percentage point reduction). Survey results were supported by administrative clinic data which showed a positive impact on the number of family planning consultations and contraceptives distributed in treatment areas. There is evidence that the impact on contraception translated into a 10% reduction in fertility and increased women's self-assessed health and well-being. The campaign's impact was also greater amongst women who had previously used contraception, who reported using it more consistently.

Roy Head of DMI, who designed the campaign and led the study in partnership with IPA and J-PAL says: *"Until now, no one has rigorously tested whether mass media can increase contraceptive use. This study shows that to really accelerate family planning you need to generate demand as well as supply"*.

Rachel Glennerster, Chief Economist at FCDO and the Principal Investigator on this study says: *"This was an ambitious study and we're delighted to see the substantial (and statistically significant) impact on the uptake of modern contraceptives. Through simple messaging that combated misperceptions, the campaign has been able to enable women to take their health into their own hands."*

Alix Peterson Zwane, Chief Executive Officer of the Global Innovation Fund, says: *"GIF is committed to partnering with innovators who prioritise generating rigorous evidence of impact and demonstrating their potential for scale. Our partnership with DMI epitomizes this approach, and I am delighted to see these fantastic RCT results emerge, highlighting the power of mass media to change the complex behavioural barriers and social norms that prevent effective family planning."*

Note to the Editors

Event details

“Accelerating progress in family planning. How can we double the uptake of modern contraceptives by 2030?”

Tuesday April 20th, 2021. 16.00-17.30 London / 15.00-16.30 Ouagadougou / 11.00-12.30 Washington DC / 17.00-18.30 Geneva

Development Media International invites you to a virtual panel discussion featuring:

- Paul Kaba Thieba - former Prime Minister of Burkina Faso,
- Roy Head, CEO, Development Media International,
- Rachel Glennerster, former Executive Director J-Pal, now Chief Economist, Foreign, Commonwealth and Development office,
- Marie Ba, Director, Ouagadougou Partnership Coordination Unit,
- Darren Welch, Director of Global Health, Foreign, Commonwealth and Development Office,
- Alix Peterson Zwane, CEO, Global Innovation Fund,

Moderated by David Heymann, former Assistant Director-General, World Health Organisation.

Register here: <https://tinyurl.com/6u4c69zw>

Contact details

Interviews are available on request. An animation of the study results and impact, footage of a case study, example radio spots and images are also available from DMI:

<https://www.developmentmedia.net/project/familyplanningrct>

Please direct any queries or requests to:

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About the partners & funders

Development Media International (DMI), <https://www.developmentmedia.net>

DMI creates evidence-based behaviour change campaigns that improve health and save lives in developing countries. DMI is a non-profit organisation based in London, with regional offices in Burkina Faso, Mozambique and Tanzania. Set up in 2005 by Roy Head, DMI's main objective is to reduce morbidity and mortality in low-income countries, with a focus on Sub-Saharan Africa. DMI's focus areas include child survival, family planning and early childhood development.

GiveWell, an independent evaluator of not-for-profits, has rated DMI as a 'standout charity' based on its health impact, evidence base and cost-effectiveness. According to GiveWell, DMI "offers donors an outstanding opportunity to accomplish good with their donations".

Abdul Latif Jameel Poverty Action Lab (J-PAL), <https://www.povertyactionlab.org>

The Abdul Latif Jameel Poverty Action Lab (J-PAL) is a global research center, based at the Massachusetts Institute of Technology (MIT) and works to reduce poverty by ensuring that policy is informed by scientific evidence. Anchored by a network of 194 affiliated professors at universities around the world, J-PAL conducts randomized impact evaluations to answer critical questions in the fight against poverty.

Today, J-PAL's core staff includes more than 400 research, policy, education, and training professionals across seven offices worldwide. Two of its founders, Abhijit Banerjee and Esther Duflo, received the Noble Prize for Economics in 2019, along with Michael Kremer of Harvard University.

Innovations for Poverty Action (IPA), <https://www.poverty-action.org>

Innovations for Poverty Action (IPA) is a research and policy non-profit that discovers and promotes effective solutions to global poverty problems. IPA brings together researchers and decision-makers to design, rigorously evaluate, and refine these solutions and their applications, ensuring that the evidence created is used to improve the lives of the world's poor.

In recent decades, trillions of dollars have been spent on programs designed to reduce global poverty, but clear evidence on which programs succeed is rare, and when evidence does exist, decision-makers often do not know about it. IPA exists to bring together leading researchers and these decision-makers to ensure that the evidence we create leads to tangible impact on the world. Since our founding in 2002, IPA has worked with over 600 leading academics to conduct over 830 evaluations in 51 countries. This research has informed hundreds of successful programs that now impact millions of individuals worldwide.

Global Innovation Fund (GIF), <https://www.globalinnovation.fund>

The Global Innovation Fund is a non-profit innovation fund headquartered in London with an office in Washington D.C. that invests in the development, rigorous testing, and scaling of innovations targeted at improving the lives of the world's poorest people. We believe that the best ideas for solving some of the world's most critical problems can come from anyone, anywhere. Through our grants and risk capital, we help breakthrough solutions to global development challenges from for-profit firms, non-profit organisations, researchers, and government agencies to maximise their impact and affect meaningful change.

United States Agency for International Development (USAID), www.usaid.gov

United States Agency for International Development (USAID) works to end extreme global poverty and enable resilient, democratic societies to realize their potential. USAID invests in ideas that work to improve the lives of millions of men, women and children by: investing in agricultural productivity so countries can feed their people; combating maternal and child mortality and deadly diseases like HIV, malaria and tuberculosis; providing life-saving assistance in the wake of disaster; promoting democracy, human rights and good governance around the world; fostering private sector development and sustainable economic growth; helping communities adapt to a changing environment; and, elevating the role of women and girls throughout all our work. For more information, visit