

Challenging Myths and Barriers to IUD Use: The “Truth” Campaign

Support to the MOH IUD Re-Introduction Initiative in Kisii District, Kenya

Background

Use of the intra-uterine device (IUD) has declined significantly as a proportion of Kenya's contraceptive method mix over the past 20 years—dropping from 31 percent of all modern contraceptives used in 1984, to 15.4 percent in 1993 to 7.6 percent in 2003. Overall, while contraceptive prevalence has reached 39 percent, only 2.4 percent of married women in Kenya are currently using the IUD (Kenya DHS, 2003).

In 2003, the Kenya Ministry of Health, Division of Reproductive Health (MOH/DRH) launched an IUD reintroduction initiative with the collaboration of over 18 international and local partners. From 2003-2005, project partners designed and implemented a comprehensive program that addressed barriers to IUD use at all levels where needs had been identified: advocacy to policy makers and providers, provider clinical training, improved logistics and supplies, and community level education. Following the success of this initial re-introduction initiative, USAID is supporting the MOH/DRH to expand the IUD program to seven other districts, where different non-governmental organizations are supporting each district with technical assistance. The ACQUIRE Project/Kenya¹ has received funding to support the program in Kisii district, from January 2005 – December 2006.

ACQUIRE has agreed with the MOH/DRH and local stakeholders in Kisii to also pilot several new project components there, with the hope of contributing to future efforts to scale up the IUD revitalization nationally. On the supply side, these include a more in-depth counseling training curriculum, and the introduction of disposable IUD insertion kits. On the demand side, ACQUIRE is developing a strategically designed

¹ 1 The ACQUIRE Project is a USAID-funded project led by EngenderHealth, and includes 5 other international NGOs (www.acquireproject.org). EngenderHealth is the lead organization; Meridian Group International, Inc., provides technical assistance in social marketing and communications, and Care and ADRA provide technical assistance and access to community mobilization programmes.

communications campaign to change perceptions of the method and to reposition the IUD as a viable contraceptive choice. The campaign is being designed to provide a set of compelling messages, materials and a media component that can support local community education of the type that was used during the 2003 program, to test whether a combined media and community level program can have enhanced impact.

Kisii District, Kenya

Kisii is a district located within the Nyanza province in the western part of Kenya, with a population of just under 500,000 people. DHS data (2003) indicate that IUD prevalence in Nyanza province - where Kisii is located - is only one fifth the national rate, and also has the highest rates of HIV/AIDS in the country.

Best Practices

Assessments

Unlike most other sub-saharan African countries, knowledge of the IUD in Kenya is relatively high, at 75% among married women of reproductive age, compared to 95% knowledge of any modern method, and 94%, 93% and 92% knowledge of the injectable, pills and condoms, respectively. However, the key barrier hampering demand at the consumer level is the prevalence of misinformation and frightening negative myths and rumors about dangers of IUD use, combined with a lack of knowledge about the method's benefits.

Focus groups and client exit interviews at clinics revealed that men and women universally report having heard (and believe) that the method causes harmful medical complications such as reproductive tract infections and cancer, interferes with sexual intercourse, can migrate within the body and must often be surgically removed, and/or is ineffective and subsequently comes out during delivery with the device stuck on the baby's body. Overall, the research confirmed that the majority of women who have never used the IUD (and men) are very negative about the method and are not aware of its benefits. Other findings included that neither women (including current users of the IUD) nor men understand how the IUD works, and that basic education about the method is needed. The good news emerging from the research, however, was that current users of the IUD are very satisfied with it. And among non-users, once women and men's misinformation was corrected and they learned of the method's benefits, they become interested in learning more about it and wanted to know where they can obtain IUD services.

The research also revealed two other audience groups that would need to be addressed. The first is local community members and those who impact their views, such as community and religious leaders. In research with IUD users, respondents said that although they are very happy with the method, that because of the lack of support for the method in the general public, neither they nor their husbands discuss their experience. This effectively keeps the method use a 'secret', and greatly limits positive word of mouth among peers. The second group is providers. Assessments used to plan the initial IUD revitalization program in 2003 had revealed, as did ACQUIRE's

assessment in Kisii, that many of the nurses and doctors who could potentially provide IUDs harbor the same misinformation and rumors as consumers and were discouraging use of the IUD.

Other barriers at the provider level included the need for clinical training and improved access to equipment and supplies needed to provide the method. All of these provider-level factors are being addressed by provider training and other supply-side measures.

Finally, other methods (particularly the short term methods) are simply better known, promoted, and preferred by consumers and providers. While no media promotion of the IUD has taken place, social marketing for condoms, injectables and oral contraceptives has been ongoing for over a decade. These methods are branded and more readily available in both the public and private sectors. Despite high discontinuation rates for the injectable, this remains the most popular method and providers report that women ask for it when they come for family planning.

Strategic Communications: The “Truth” Campaign

The conclusions that emerged from the assessment were that advertising was needed that would help the target audience to know that the IUD is a safe and effective contraceptive choice and that it is now available near where they live. Women and men would believe that the IUD is an alternative worth considering (to using no family planning or a method they are not happy with) that might increase their comfort and peace of mind. The campaign would aim to make eligible women curious enough about the method to go and seek additional information from one of the project’s clinics, and would create a more enabling environment for use of the method: influencers (spouses, community members, etc.) will also know it is a good method and be supportive of women and couples who choose it.

The resulting campaign designed by a local advertising agency working with ACQUIRE and local stakeholders is a “myth-busting” campaign. It directly counters the most entrenched rumors about the IUD and positions it as a flexible method with many unique benefits. The campaign carries the slogan “Fahamu ukweli wa mambo” (Translation: *Now you know the truth*), and features women and couples – satisfied users - ‘standing up’ to challenge myths and negative perceptions held by their peers. One poster and the educational materials also feature a provider speaking. The choice of campaign messengers was based on the research finding that women and men said that providers are their most trusted source of information, but that they also needed to hear about the IUD from satisfied users to see that the method is safe and others are happy using it.

As such, the campaign takes a testimonial approach in all materials and activities. Materials include posters, an illustrated brochure and leaflet, and radio spots featuring satisfied users, recorded in both Kiswahili and Ekegusii, the local language spoken in Kisii. Radio spots will air on national and local radio. Public relations will target all audiences via radio and print interviews with providers and satisfied users. At the community level, a series of educational events called “Ladies Clubs” will be held

regularly during the campaign period in conjunction with women's groups active in Kisii. The campaign will be linked to other community activities as described below.

Holistic Programming: Linking with the Supply Side

All campaign materials will encourage interested clients to see a service provider, and will feature the names of ACQUIRE-supported public and private sector sites where providers have been trained and capacity to provide quality services has been assured. This will ensure that increased demand for the method is met with quality services, which, in turn, is expected to help foster positive experiences with the method and positive word of mouth.

As a trusted source of information with direct access to family planning clients, provider champions are also often instrumental in recruiting clients. Their buy-in and acceptance of the campaign is also important, to ensure that they give messages consistent with the messages that clients are hearing on the radio and in the community. To ensure this, a team of providers reviewed initial campaign ideas, edited final materials, and will help ensure that prior to the campaign launch, all providers at program sites receive brochures, leaflets and posters for use in their clinics.

Revitalizing the IUD in the context of Choice

In keeping with the Ministry of Health's commitment to promoting all contraceptive methods in the context of informed choice, the campaign addresses the IUD directly but all materials encourage consumers to be fully informed and to consider the family planning method that is best for them among the range available.

Finally, GTZ² is supporting the program in Kisii by recruiting and training community based distribution agents, who will distribute not only short term methods but will also be trained to provide information and referrals for the IUD.

Ownership and Sustainability: Linking with the Community and Local Stakeholders

To complement its communications efforts, ACQUIRE is developing a network of community based peer educators to increase the knowledge and use of IUD services. Working with women's groups, religious organizations, as well as the MOH's existing community health workers, and the GTZ-supported community-based distribution agents, these individuals will use campaign materials and messages to help to spread the word about the IUD through interpersonal communication, and will provide another link between clients and IUD services in the community.

Results

The campaign will be launched in April of 2006, and will run through November, 2006. Results will be measured primarily through changes in IUD service statistics at project sites. Other measures will include changes in provider attitudes toward the method as

² GTZ is the German development organization Deutsche Gesellschaft für Technische Zusammenarbeit.

measured by a survey done prior to provider training, and one that will be done at the end of the project, and client intake surveys to assess the source of information that led the client to seek IUD services. It is expected that if successful, the campaign will be adapted for use in the other six program districts and eventually nationally, starting in 2007.