

## Essential Element 6: Identifying Communication Channels in the Urban Environment

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*This Essential Element will help you learn more about the different communication channels that you can use for your SBCC program. Here are some suggestions for working through this element:*

- Read the text from beginning to end.
- Complete **Worksheets #9, #10 and #11** using data from your program and your audience. Examples of each Worksheet are included to show how the program in Zanbe answered the questions.
- Having completed **Essential Element 1 and Essential Element 4** will provide you with the information you need for **Essential Element 6**. If you have not worked through **Essential Element 1 and Essential Element 4**, make sure you have reliable information about your intended audience. This information can come from reports, documents and statistics from government ministries, international and local NGOs, or research institutes. You may also look at media consumption studies and other research done about your intended audience in your city or in your country.
- Refer to the resources at the end of this Essential Element as needed.

### What is the Purpose of this Essential Element?

The purpose of this Essential Element is to:

- Learn about the pros and cons of communication channels for urban youth and identify which ones might work best for your SBCC program.
- Identify opportunities for possible communication channels and opportunities for your intended audience by using **Worksheet #9: The Day in the Life** exercise.
- Identify the communication channels your intended audience uses on a regular basis and where they want to get SBCC information by using **Worksheet #10: Reviewing Available Communication Channels**.
- Review and select communication channels to use in your SBCC program by using **Worksheet #11: Selecting Communication Channels**.
- Learn that using multiple channels to reach your audience with consistent messaging is an important principle in SBCC programming.

### Why is this Important?

Take a moment and close your eyes. Imagine a day in the life of a young person in your city. Think about what this young person might do every day and how, throughout the day, he/she would be exposed to many different forms of communication (e.g., radio, billboards, newspapers, social media) and many different messages. There are so many people and companies telling young people what to do and often, these messages compete with one another. Just like a young person can be exposed to five different advertisements for five different mobile phone companies in a day, they can also be exposed to many different messages about SRH—messages that do not always align with one another (see image on the next page).

If you want to reach your intended audience with your messages, you have to find a way to stand out from all of those other messages, get their attention, speak their language and motivate them to change their behavior.



## What are the Key Steps?

When identifying communication channels in the urban environment, there are a number of key steps to follow:

1. Consider Communication Channel Pros and Cons for Using with Urban Youth
2. Find Available Channels Reaching the Intended Audience
3. Select a Combination of Lead and Supportive Channels

### 1. Consider Communication Channel Pros and Cons for Using with Urban Youth

Communication channels are the methods used for delivering messages to your intended audience. Different channels are appropriate for different audiences. For example, a poster or leaflet with a lot of text can provide good information about an SRH problem, but may not be effective if the majority of your intended audience cannot read.

Urban audiences are generally exposed to more communication channels than rural audiences and may have more access to TV, computers and the Internet. Mobile phones are a channel that has proven to be very popular among youth and are being used in innovative ways to receive and share information.

#### Definition

A **communication channel** is the method or medium/media used to deliver a message to the intended audience.

Knowing your audience's habits and preferences will help you to identify the best channel to reach them.

The following pages describe the most common communication channels for urban settings, including pros and cons, a few suggestions for how to use each channel, considerations for using channels in an urban environment and examples of how they have been used.



## Younger Adolescents

Keep in mind that young adolescents (10 to 14 year olds) may not have the same access to all channels as older adolescents. For example, they may **not**:

- Have the literacy levels to access and understand materials with more complicated language or information.
- Be able to watch certain programs on television with their family because of program timing or mature content.
- Be able to listen to a radio program during times of the day if an older sibling or parent is home who decides what to listen to or watch.
- Be welcome at larger gatherings with older adolescents or they may be mixed into large group gatherings, so perhaps it's best to sprinkle in a few messages for them to take away, as well.
- Have mobile phones and therefore may not benefit from SMS- or call-in-based activities as much as older peers.



We will now look at some of the most common categories of communication channels. You may be familiar with some terms, while others may be new to you. Each type of communication channel is described, however, if you feel you want to find out more about it, you can refer to the **Resources** section at the end of this Essential Element.

## Mass Media



**What is it?** Television, radio, newspaper, magazine and outdoor/transit (e.g., billboards, transit ads on bus or taxi) that reaches wide audiences.

### Pros and Cons

- **Public service announcements** are short and memorable with a strong call to action, **but** it is difficult to convey complex information.
- **Serial dramas** allow the audience to engage with plot lines with deeper coverage of topics and role models, **but** they can be expensive to produce to a high quality.
- **Talk shows** allow for youth and local experts to take part, **but** it may be hard to keep everyone on topic.
- **Call-in shows and open microphone programs** allow for two-way communication, **but** you may lose focus on audience or message.
- **Newspapers or magazines** can have large reach, **but** you are limited to high-literacy populations.
- **All mass media** can reach very large audiences at once, **but** this means you may not meet specific needs of smaller audience segments.



### Reminders for using mass media

- Works best when paired with other communication channels.
- Radio is generally more affordable and widespread than TV.
- Contact media (e.g., TV and radio stations, newspaper offices) for follow-up analysis to make sure that placement of promotional materials occurred as planned.
- Newspapers can be effective in reaching those who influence urban adolescents (i.e., parents, community leaders, teachers and policy makers).
- Images and text on outdoor media need to be designed so that they can be understood quickly since they are seen by people driving by in vehicles or walking along the road.
- For live radio or TV shows, make sure your host is well-informed and prepared to respond to unexpected questions.
- Involve young people in the production and dissemination of mass media (e.g., radio hosts, callers for call-in shows and articles written for newspapers).



### Example

**Jongo Love** (Kenya), is a radio series set in urban Kenya that addresses love, relationships and family planning to increase contraceptive use among urban adolescents. Each episode is followed by a phone-in discussion during which listeners, DJs and experts continue the conversation started during the show. *Jongo Love* also engages listeners through interactive question and answers posts on Facebook and Twitter.

(<http://ccp.jhu.edu/jongo-love-sweeps-the-airwaves-tupange-brings-family-planning-to-urban-poor-in-kenya>)

### Considerations for using mass media in an urban environment

- Urban youth have more consistent access to mass media than their rural peers.
- Urban youth might prefer television to radio.
- Easier to work closely with mass media on a consistent and continuous basis in a city.
- Urban youth can interact with talk shows by calling in or text messaging. Questions can be immediately answered, which is important for youth.

## Community-based Approaches



**What is it?** Community-based approaches reach people within a certain geographic area or people with common interests or characteristics. This includes activities that gather a large number of people and mobilize the targeted community to participate. Examples of community-based activities include dramas/street theater, puppet shows, games, concerts, contests (e.g., music, art and dance) and mobile video units.

### Pros and Cons

- **Community-based approaches** are less expensive than mass media, **but** reach a smaller number of people.
- **Community-based activities** can be entertaining and educational, **but** take a lot of time to plan and rehearse and require skilled facilitators.



### Reminders for using community-based approaches

- Make sure subject matter discussed or presented is appropriate for all ages or select venues that are more private to ensure that subjects can be discussed openly (e.g., condom demonstrations for older youth).
- Make sure to meet with community leaders, government officials and relevant religious leaders to gain their support for activities at the community level.
- When creating theater activities, make sure the language, names and scripts are appropriate for the specific community.
- Hold a discussion after any theater activities to ensure that the messages resonate with the audience and give the audience a chance to explore SRH topics together.
- For community-based activities, prepare two or three key messages and make sure that these are transmitted throughout the event.

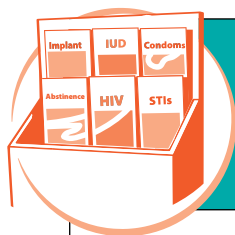
### Example

On ***The Good Life Game Show*** (Uganda), an educational and interactive game show on radio and TV, couples play against each other and test their knowledge about a weekly health topic. Through a telephone hotline, callers answered health questions and commented on the show. Community-based road shows and mobile screenings provided more opportunities for audiences to interact and learn in small groups. <http://ccp.jhu.edu/documents/Afford%20GoodLifeShow%20flyer%20CCP.pdf>

### Considerations for using community-based approaches in an urban environment

- There are a variety of places that young people gather to host community-based activities (e.g., near schools, sports and youth clubs, malls and bars).
- More access to youth who can produce and perform in community-based activities (e.g., acting schools, theater groups and musicians).
- In cities, community-based activities are often more complicated to organize and they tend to be more expensive.

## Print Materials



**What is it?** Primarily paper-based materials that reach intended audiences through written words or illustrations. Examples of print materials include fliers, pamphlets/brochures, protective school book covers, fact sheets, posters, and cards.

### Pros and Cons

- **Use of pictures, photos** and graphics make print materials attractive to multiple audiences **but** print materials often rely on text to get complete information across, so they may only reach literate audiences.
- **Print materials** can often be easily disseminated to intended audiences at events or through strategic locations (e.g., health clinics), **but** are easily lost, discarded or torn down and need to be replaced or redistributed frequently.
- **Print materials** allow a user to receive and think privately about a message, or can spark group conversation, **but** they do not allow for response to further questions an audience member might have.



### Reminders for using print media

- Print materials are best used in combination with other interpersonal or more interactive communication channels.
- Print materials may be shared between many individuals; it is important that messages be phrased clearly and in a way that prevents misinterpretation.
- Consider when, how or by whom the material will be distributed, or where it will be posted. Will your fact sheet given by a provider at a clinic look the same as what peer educators hand out at community-based activities?
- You won't be able to fit everything you want to say about an issue in a poster, brochure, or pamphlet. Try to only include key messages in an attractive layout and consider including how users can find additional information (e.g., website, social media).

### Example

**HIV Talkline** (Zambia), several brochures were developed around SRH to support the 24-hour HIV Talkline. Brochure topics included Risk Reduction: Abstinence; Girls and Growing UP!; Boys and Growing Up; Frequently Asked Questions about STIs; and Frequently Asked Questions about HIV and AIDS.

[http://www.thehealthcompass.org/sites/default/files/project\\_examples/Brochure%20Youth%20IEC%20Abstinence.pdf](http://www.thehealthcompass.org/sites/default/files/project_examples/Brochure%20Youth%20IEC%20Abstinence.pdf)

### Considerations for using print materials in an urban environment

- Involve young people by hosting poster contests and featuring young people's art to help convey your message.
- Urban youth have higher school enrollment and literacy rates than rural youth.
- Urban adolescents have a high level of independence; print materials can be placed in locations where youth can see them without their parents' or family's presence.
- Adolescents in urban areas may be attracted to more bold designs, images and wording than non-urban adolescents.

## Interpersonal Communication



**What is it?** Personal interaction with the intended audience that could be done one-on-one, in small groups, large groups or as a forum. IPC can be delivered in many formats—in person, over the phone (e.g., hotline) via social media—as well as by any number of health providers, peers and near-peers, community health workers, pharmacists and teachers, to name a few.

### Pros and Cons

- **One-on-one IPC** can personalize interaction and address that person’s specific situation and is effective for discussing sensitive topics in a private setting, **but** requires trained educators/ facilitators and oversight to ensure all are delivering the same message.
- **Small group IPC** can engage small interpersonal networks (i.e., peers) for social support, **but** may need repeated sessions and people may not be able to attend regularly.
- **Large group IPC** can reach more people and challenge dominant norms and resistant behaviors, **but** large group IPC activities are the least interactive and personalized, and often more “health education” style and challenging to manage.
- **Peer educators** can be effective because they are approximately the same age as the intended audience, speak the same language and are easy to relate to, **but** effectiveness depends on the quality of the program—some peer educators might find it difficult to move beyond simply sharing information to helping build skills for behavior change.



### Reminders for using IPC

- Communication should be interactive and avoid lectures and one-way communication.
- Adapt existing materials or develop new materials, including:
  - » A curriculum or guide for facilitators, role-play scripts, games, photos, other visuals and tools to train facilitators.
  - » Branded items for staff/volunteers that identify them with the program (e.g., hat, T-shirt, bag).
  - » Print materials for the intended audience (e.g., brochure, flier, comic books).
- Determine the number of sessions that participants need to attend and find ways of ensuring regular participation.
- Decide on the type of facilitators (i.e., peer, near-peer, program staff and teachers).
- Recruit and train IPC facilitators. Supervision of your IPC facilitators (including observation visits) is key to success. Include regular meetings and feedback to make sure everyone is consistent in message delivery.

### Example

**Nyeri Youth Health Project** (Kenya), trained young parents to be “friends of youth” and shared knowledge and skills regarding SRH with youth individually or in groups, community adults and teachers; and referred youth to newly trained youth-friendly private sector clinics.  
<http://www.advocatesforyouth.org/publications/1157-nyeri-youth-health-project-kenya>

### Considerations for using IPC in an urban environment

- Outreach can be to youth in places that are less conventional—there is a variety of places where they hang out or are found on the street.
- Urban areas have a diverse group of people who can share their expertise and give talks (e.g., therapists, medical providers).
- With high unemployment in urban areas, there are plenty of youth available to be trained as peer educators.

## Mobile Phones



**What is it?** Use of mobile phones and smart phones for health information and services. Often, this means using SMS technology to push out messages to the intended audience or have two-way conversations via SMS. Mobile phones with Internet access can also be used for social media outreach.

### Pros and Cons

- **Mobile phones** are available in all socio-economic levels, **but** literacy is required for reading and sending text messages.
- **Privacy and confidentiality** are common with phones, both of which are important to youth, **but** sometimes phones are shared by several people and private information should not be sent in this way.
- **SMS surveys and quizzes** can be used to gather self-reported changes in knowledge and behavior, **but** 160 characters per SMS message limits complex information.
- **SMS messages** can be received and sent at any time of day or night, **but** calling a hotline to talk with someone is limited to hours of operation.



### Reminders for using mobile phones

- Understand your audience and how they use mobile phones to determine whether a mobile phone program will be effective and reach them.
- Privacy and confidentiality are extremely important, especially regarding SRH, so programs should be opt-in rather than opt-out.
- Use mobile applications that allow youth to text a sexual health question to a number and receive a texted response quickly at any time.
- Use texting to provide youth with sexual health information and appointment reminders.
- Require those who join to provide their demographic information to provide a picture of who is accessing the services and how.
- SMS programs can use messages and materials that have already been developed, tested and used in other programs to save time and money.
- Invite community partners to promote the SMS platform through their networks.

### Example

**mCenas!** (Mozambique) This SMS platform delivers a story to increase knowledge of contraceptive methods, and dispel myths and misconceptions among youth aged 15 to 24. The story uses messages that youth can relate to, informational messages about contraceptive methods and an interactive “Frequently Asked Questions” function where youth can ask questions and receive SMS messages on a range of SRH topics. The story also encourages further dialogue and reflection with peers. <http://www.pathfinder.org/our-work/projects/sms-client-education-to-improve-family-planning-uptake-among-youth.html>

### Considerations for using mobile phones in an urban environment

- Urban youth have better access to mobile phones, quality services and connection.
- Urban youth are more likely to access social media on their mobile phones and more likely to have access to smart phones now or soon.
- There is more competition between providers, so prices are competitive and lower.
- Consider partnering with a network provider and mobile application developers to create or adapt a program to meet your needs, and promote your messages and service at their retail outlets and outreach events.



## Social Media




**What is it?** Internet-based applications that encourage social interaction among people in which they create, share or exchange information and ideas in virtual communities and networks. Different forms include blogs and microblogs (e.g., Twitter), photographs or pictures (e.g., Instagram), social networks (e.g., Facebook, MXit, Badoo) and video (e.g., YouTube). It's any online technology that lets people publish, converse and share content online.

### Pros and Cons

- **Social media** is less expensive than traditional media, **but** does require someone's time to monitor, create content and respond in a timely manner.
- **Free applications** and sites are abundant, **but** access requires reliable Internet and technology is less universal at this time in parts of Africa.
- **Information-sharing** with a wide network is made quick and easy, **but** this can jeopardize privacy and confidentiality.
- **Reaching young people** can be made easier with social media, **but** trusting, meaningful relationships are often developed in person.
- **Content** on social media sites can be generated by anyone, **but** the quality and accuracy of content is threatened if it is not checked by an expert consistently.



### Reminders for using social media

- Create content that is engaging and worth talking about or sharing with others.
- Hire youth to design and manage social media sites. 
- Learn about the sites and applications that your intended audience use and utilize those to reach them.
- Learn how your audience uses the applications and sites (e.g., what do they share on Facebook—images, quotes, poems or their own messages?).
- Consider the Internet speed in your country and whether it will be able to sustain heavy graphics, videos, animated images or interactive activities, and think about using packages that do not require a very fast Internet connection.

### Example

**YoungAfricaLive** (South Africa) is a portal that is entertainment-oriented, fun, interactive and provocative. The platform shares information and educates, generates discussion and promotes HIV testing. It welcomes youth to dialogue about SRH with guest bloggers and live chats with doctors and relationship experts.

<http://socialtech.org.uk/projects/young-africa-live/>

<http://blog.praekeltfoundation.org/post/12195561521/full-youngafricalive-youth-sex-survey-poll-results>

<http://youngafricalive.com>

### Considerations for using social media in an urban environment

- Even if they do not own a computer, urban adolescents can access social media sites in cyber cafes, at schools, in libraries or on mobile phones.

## 2. Find Available Channels Reaching the Intended Audience

With so many great communication channels available for reaching urban adolescents, how do you decide which ones to use? One of the best ways is to start with your intended audience—learn which communication channels they mostly use and which ones they trust most to receive SRH information.

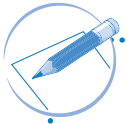
You can find the channels that are reaching your intended audience by asking them to describe a typical day in their life. The **Worksheet #9: Day in the Life** exercise can be used to provide detailed insights regarding the lifestyle and potential opportunities for communicating with your intended audience. The exercise tracks a typical day, from dawn to dusk, listing the things your audience does and places it goes, and identifies potential communication channels at each point along the way. It is helpful to conduct this exercise with each intended audience segment that you plan to reach.

Once you have a sense of the communication channels that are reaching your intended audience, review those channels to determine whether they are feasible and appropriate for your SBCC program. **Worksheet #10: Reviewing Available Communication Channels** can be used to review communication channel information for your intended audience.



### Reminder!

Media consumption studies can help you figure out what types of media your audience pays attention to. Usually these won't be able to give you the amount of detail that you are looking for, but are a good place to start. For instance, you may be able to find out what stations and program categories youth of a certain age group listen to and watch, but you may not be able to find out from these studies whether those youth are sexually active, pregnant or living with HIV.



## WORKSHEET #9: DAY IN THE LIFE

**Purpose:** To identify opportunities for possible communication channels and opportunities for your intended audience.

**Preparation:**

Assemble a small group of people who represent your intended audience(s). You will need to conduct separate groups for each segment of your intended audiences (primary and secondary). A small group of six to eight people should be representative of your intended audience and allow for better discussion and easier facilitation.

**Directions:**

1. Ask the group to think about someone like themselves and give the person a name.
2. Tell them that this person represents your intended audience and is not one person in particular. Giving a name helps you think of your intended audience as a person and not a demographic (i.e., female, 10 to 14 years old, out of school).
3. Ask them to think about a typical day for this person, and for each “time of day,” ask the group to write down what “activity” the person is doing (including home, work and fun), the “location” of the activity and suggestions for “ways to communicate with them.” Fill in the boxes on **Worksheet #9**.
4. Refer to the **Worksheet #9: Zanbe Example** to help you complete this blank Worksheet with the information relating to your program.
5. Ask the group to present their person’s “Day in the Life” and answer any questions that your team may have.
6. Ask the group to reflect on what they learned from this experience and write down the three key pieces of information learned from filling in this Worksheet.
7. After completing this worksheet, you will use this information to work through **Worksheet #10** Reviewing Available Communication Channels.

Intended Audience:

Name:

## WORKSHEET #9: DAY IN THE LIFE (CONTINUED)

Time of Day	Activities	Locations for Each Activity	Potential Ways to Deliver Messages
Early Morning			
Mid-morning			
Midday			
Early Afternoon			
Late Afternoon			
Early Evening			
Dinner			
Late Evening			

## WORKSHEET #9: DAY IN THE LIFE (CONTINUED)

Special Events (List day, week or month)			
Seasonal Opportunities (Harvest time, holidays, rainy/dry or cold/hot seasons, etc.)			

\* Source: The tools for this exercise are from Chapter 6 Channels and Tools, "A Field Guide to Designing a Health Communication Strategy," Johns Hopkins Center for Communication Programs, page 148. The entire manual can be downloaded at <http://ccp.jhu.edu/documents/A%20Field%20Guide%20to%20Designing%20Health%20Comm%20Strategy.pdf>. The example for this exercise is found on page 145.

### TIME TO REFLECT

Before you move on, take a moment to reflect on your experience with this Worksheet. What are the three key pieces of information you learned from filling out this Worksheet?

1.

2.

3.

## WORKSHEET #9: DAY IN THE LIFE

### Zanbe Example

This example is based on what a "day in the life" would look like for Awa, who is introduced in Part 1 of the I-Kit. Additional insights are provided in the text bubbles.

Intended Audience: *Urban women, 10 to 19, out of school*

Name: *Awa*

Time of Day	Activities	Locations for Each Activity	Potential Ways to Deliver Messages
Early Morning	<ul style="list-style-type: none"> <li>5:00 a.m., wakes up and turns on Capital Radio 95.5 FM.</li> <li>Prepares breakfast for herself and her mother.</li> <li>Walks from her neighborhood into the city. Her mother usually walks with her to pick up things she needs.</li> <li>Walks to Central Market and sets up clothes in stall.</li> </ul>	<ul style="list-style-type: none"> <li>Home</li> <li>Neighborhood streets</li> <li>Main city roadside to market</li> <li>Central Market</li> </ul>	<ul style="list-style-type: none"> <li>Capital Radio 95.5 FM through a PSA or a talk-show dedicated to SRH</li> <li>Wall signs on small shops along the road</li> <li>Billboards on the main road</li> <li>Parent outreach</li> </ul>
Mid-morning	<ul style="list-style-type: none"> <li>Has a tea break with her friends, near her stall.</li> </ul>	<ul style="list-style-type: none"> <li>At her friend's stall</li> </ul>	<ul style="list-style-type: none"> <li>IPC with peer educators</li> <li>Drama performance during a less busy time in the market</li> </ul>
Midday	<ul style="list-style-type: none"> <li>Very busy with customers.</li> </ul>	<ul style="list-style-type: none"> <li>Market stall at Central Market</li> </ul>	<ul style="list-style-type: none"> <li>Not a good time</li> </ul>
Early Afternoon	<ul style="list-style-type: none"> <li>Listens to the radio in her stall and changes from news to music to dramas, depending on the station.</li> <li>Has a tea break with her friends, near her stall.</li> <li>She sends SMS messages to her friends.</li> </ul>	<ul style="list-style-type: none"> <li>Market stall at Central Market</li> </ul>	<ul style="list-style-type: none"> <li>IPC with peer educators</li> <li>Drama performance during a less busy time in the market</li> <li>Radio PSA, talk-show, call-in show or serial drama</li> <li>SMS via mobile phone</li> </ul>
Late Afternoon	<ul style="list-style-type: none"> <li>Listens to the radio in her stall and changes from news to music to dramas, depending on the station.</li> <li>She chats with customers.</li> <li>She sends SMS messages to her friends.</li> </ul>	<ul style="list-style-type: none"> <li>Market stall at Central Market</li> </ul>	<ul style="list-style-type: none"> <li>IPC with peer educators</li> <li>Drama performance during a less busy time in the market</li> <li>Radio PSA, talk-show, call-in show or serial drama</li> <li>SMS via mobile phone</li> </ul>

## WORKSHEET #9: DAY IN THE LIFE (CONTINUED)

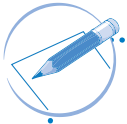
### Zambe Example

Early Evening	<ul style="list-style-type: none"> <li>Packs up her stall for the night.</li> </ul>	<ul style="list-style-type: none"> <li>Market stall at Central Market</li> </ul>	<ul style="list-style-type: none"> <li>Wall signs or billboards near market</li> </ul>
Dinner	<ul style="list-style-type: none"> <li>Eats dinner with her friends outside of her home if sales have been good for the day.</li> </ul>	<ul style="list-style-type: none"> <li>Night market, side of road, or cafe</li> </ul>	<ul style="list-style-type: none"> <li>Wall signs or billboards near cafe</li> </ul>
Late Evening	<ul style="list-style-type: none"> <li>Usually hangs out with her friends.</li> </ul>	<ul style="list-style-type: none"> <li>Home of friends, the night market, or cafes</li> </ul>	<ul style="list-style-type: none"> <li>Wall signs or billboards near cafe</li> </ul>
Special Events (List day, week or month)	<ul style="list-style-type: none"> <li>On Sunday morning, she goes to church.</li> </ul>	<ul style="list-style-type: none"> <li>All Saints Cathedral</li> </ul>	<ul style="list-style-type: none"> <li>Church: message in sermon, classes</li> </ul>
Seasonal Opportunities (Harvest time, holidays, rainy/dry or cold/hot seasons, etc.)	<ul style="list-style-type: none"> <li>During the dry season, the market has fewer shoppers, so she works shorter days.</li> </ul>		<ul style="list-style-type: none"> <li>IPC outreach during dry season</li> <li>Community engagement during dry season (participatory theater, large-group IPC)</li> </ul>

### TIME TO REFLECT

Before you move on, take a moment to reflect on your experience with this Worksheet. What are the three key pieces of information you learned from filling out this Worksheet?

- There are so many media opportunities for reaching Awa at different times of the day.
- Some of the channels are very public, so might not be appropriate depending on the message.
- It would be fun to see if Capital Radio was interested in having a serial drama.



## WORKSHEET #10: REVIEWING AVAILABLE COMMUNICATION CHANNELS

**Purpose:** To review communication channel information for your intended audience.

**Preparation:**

Gather all the secondary information about communication channels used by your intended audience:

- Primary and secondary research about your intended audience (i.e., **Worksheet #1** from **Essential Element 1**).
- Audience profile (i.e., **Worksheet #6** from **Essential Element 4**).
- Communication channels used. If you have not completed **Essential Element 1 and Essential Element 4**, make sure you have reliable information about the communication channels used by your intended audience. This information should be reliable and come from reports, statistics, studies and research.
- Any media consumption studies.

**Directions:**

1. Complete this Worksheet using your data about your intended audience.
2. Use the information you have to answer the questions in this Worksheet.
3. Write down the sources of the information you use to answer the questions (i.e., study name, date of study, page number or table number).
4. Refer to the **Worksheet #10: Zanbe Example** to help you complete this blank Worksheet with the information relating to your program.
5. After completing this Worksheet, you will use this information to work through **Worksheet #11: Selecting Communication Channels**.

**Intended Audience:**

1. What channels does your intended audience use on a regular basis?

(Information Source: \_\_\_\_\_)

2. Who does your intended audience listen to about the desired behavior? Who is a credible source of information? Who is most motivating?

(Information Source: \_\_\_\_\_)



## **WORKSHEET #10: REVIEWING AVAILABLE COMMUNICATION CHANNELS (CONTINUED)**

### **TIME TO REFLECT**

Before you move on, take a moment to reflect on your experience with this Worksheet. What are the three key pieces of information you learned from filling out this Worksheet?

1.

2.

3.

## WORKSHEET #10: REVIEWING AVAILABLE COMMUNICATION CHANNELS

### Zambe Example

This example is based on Zambe's "Let's Talk About It" program introduced in Part 1 of the I-Kit to show how the program managers used information (both quantitative and qualitative) to identify potential communication channels for their intended audience. Additional insights are provided in text bubbles.

Intended Audience: *Urban women, 10 to 19, out of school*

1. What channels does your intended audience use on a regular basis?

*A local research company conducted a media and communications survey among a nationally representative sample of Tokona youth (ages 15 to 24) and found that the most used communication channel was radio (95 percent).*

*While fewer youth owned a TV (19 percent), a higher percentage (33 percent) said they watched TV and were more likely to report watching TV in public places (16 percent) or at someone else's house (19 percent). Youth were also more likely to use a DVD (23 percent) and read the newspaper (35 percent).*

*Most Tokonans of all ages do not have access to computers and the Internet. Youth who access the Internet are more likely to do so in cyber cafes (61 percent). Mobile phones are used for making calls (58 percent), text messaging (42 percent) and listening to the radio (19 percent).*

This data would suggest radio and IPC channels might be good to pursue. However, this data does not provide information specific to Zambe, out-of-school, women, 15 to 19, or the specific stations they listen to.

This information suggests that although TV is viewed among youth, it may not be the best channel, compared to the reach that radio has. Again, this data is for both urban and rural youth so the picture could look quite different for Zambe urban women.

(Information Source: "Media Study with Tokona Youth,"  
Consumer Research Group, May 2014 )

## WORKSHEET #10: REVIEWING AVAILABLE COMMUNICATION CHANNELS (CONTINUED)

### Zambe Example

2. Who does your intended audience listen to about SRH? Who is a credible source of information? Who is most motivating?

*Young people (12 to 19 year olds) prefer to get SRH information from teachers or school, health care workers and the radio; however, young women (15 to 19 year olds) expressed a strong preference for getting SRH information from health workers and clinics and family members (i.e., mothers, aunts). Radio was slightly less preferred because the lack of interaction from receiving information from the radio. Urban young women reported having weaker access to SRH information through informal channels (e.g., family and friends) than their rural peers.*

Since radio is the most used channel, it could still be considered if additional "interaction" elements were included, like a radio call-in show where youth could have their questions answered by an expert. It will also be very important to develop strong links with health providers and include those health providers in your messaging.

(Information Source: Adolescent Sexual and Reproductive Health Report: Tokona 2006)

### TIME TO REFLECT

Before you move on, take a moment to reflect on your experience with this Worksheet. What are the three key pieces of information you learned from filling out this Worksheet?

- Radio and IPC may be best channels for this program.*
- If using radio, could have a 'call-in' show with 'ask the experts' and bring on healthcare providers since adolescent girls trust them for SRH information.*
- Make sure to link any information to a youth-friendly health clinic.*

### 3. Select a Combination of Lead and Supportive Channels

Once you know the communication channels that your intended audience uses and the channels available in your city, it's time to narrow down the channels and select the ones that you will use in your SBCC program.

The lead channel is the main channel used in your intervention. Most of the information is passed through the lead channel, which is likely to have the greatest reach.

The supporting channels are other channels of communication that are used in the intervention. The aim of supporting channels is to reinforce messages by increasing the likelihood that audiences will hear them more often and through a variety of channels.

For example, an intervention's lead communication channel may be television. The intervention might use television to reach the whole country with advertisements and a serial drama. Supporting channels may include:



- Small group discussions in the community where people watch an episode of the serial drama and then discuss it with a facilitator (IPC).



- Posters and billboards that depict characters from the serial drama with key messages relating the the storyline and the health issue being addressed (mass media).



- Participatory theater in the community where performers represent the characters from the serial drama and enact scenes relating the the themes discussed by the drama (community-based approach).



- A Facebook page about the serial drama where key messages and related articles are posted regularly (social media).

Think about your SBCC program and how you would answer these questions:

- Which channels are available to you based on your program budget and timeline?
- Which channels can facilitate the type of communication needed? (e.g., one-way delivery of information or more interactive discussion, or information delivered publicly or privately.)
- Which channels are best for reaching your intended audience? (e.g., is radio preferred or is it perceived as an unreliable source of information?)
- Which channels are already most accepted by your audience for the types of information or messages you are trying to convey?
- Which channel will reach the largest proportion of the intended audience?

#### Definition

A channel is **effective** if it gets the attention of your intended audience and inspires behavior change.

A channel is **efficient** if it is reaching the largest number of your intended audience for the amount of money spent on that channel.

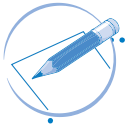
To get the best value for your budget, select channels that are going to be the most effective and efficient for reaching your intended audience. See Figure 12: Choosing Communication Channels for considerations when choosing communication channels. **Worksheet #11: Selecting Communication Channels** will help you apply this to your program.

## Choosing Communication Channels

Considerations	Appropriate Channels / Approaches
Complexity of the Challenge	<ul style="list-style-type: none"> <li>• Face-to-face communication allows for dialogue and discussion with your audience.</li> <li>• Mass media can model complex behaviors for large audiences.</li> <li>• Social media can encourage discussions about the challenge through e-mails, images, memorable slogans/quotes, text messages, chat rooms or voice mails.</li> <li>• If your audience can read, take-home and written materials allow the audience to refer back to them as often as they would like.</li> </ul>
Sensitivity of the Challenge	<ul style="list-style-type: none"> <li>• Interpersonal approaches and one-to-one communication work well when discussing sensitive topics or when working with marginalized groups.</li> </ul>
Effectiveness of Approach to Address Challenge	<ul style="list-style-type: none"> <li>• An approach may be more or less effective depending on the challenge being addressed. For example, entertainment education formats are well suited for motivational messages and moving social norms.</li> </ul>
Literacy	<ul style="list-style-type: none"> <li>• If audience is not literate, an approach that does not rely on the written word will be more effective.</li> </ul>
Desired Reach	<ul style="list-style-type: none"> <li>• Mass media, most Internet-based interventions and many mHealth interventions have an advantage in their potential reach and can provide regional and national coverage. Such approaches can deliver messages to scale.</li> </ul>
Innovation	<ul style="list-style-type: none"> <li>• Consider using approaches that are new and fresh for your audience. Using an approach that is unexpected can make it more appealing and interesting to your audience.</li> </ul>
Cost	<ul style="list-style-type: none"> <li>• Consider the cost and the cost effectiveness (in terms of cost per person reached) of the various approaches and determine how best to use your budgeted funds. Mass or community-based approaches may have higher up-front costs, but then may lessen over time. Interpersonal approaches may be less expensive, especially if working with volunteers or integrating activities with professionals' existing jobs or work.</li> <li>• Tools which help calculate the value for money and quantify the impact of approaches can be found at <a href="http://www.nsmcentre.org.uk/resources/vfm">http://www.nsmcentre.org.uk/resources/vfm</a>.</li> </ul>

**Figure 12: Choosing Communication Channels<sup>13</sup>**

<sup>13</sup> Adapted from McKee, N., Bertrand, J., & Becker-Benton, A. (2004). Strategic Communication in the HIV/AIDS Epidemic. SAGE Publication.



## WORKSHEET #11: SELECTING COMMUNICATION CHANNELS

**Purpose:** To review and select communication channels to use in your SBCC program.

**Preparation:**

Gather the following data to help you fill out this Worksheet for your program:

- **Worksheets #8 and #9** filled out with your data.

**Directions:**

1. Answer the questions in this Worksheet using your data.
2. Refer to the **Worksheet #11: Zanbe Example** to help you complete this blank Worksheet with the information relating to your program.
3. Continue reading the text after the Worksheets as it provides important insights for channel selection

**Intended Audience:**

**Behavioral Objective:**

1. Channel Summary. For each column, pull information from previous Worksheets.
  - Column 1: list all of the potential ways to deliver messages to your intended audience from **Worksheet #9**, removing any duplicates from the list.
  - Column 2: list the communication channels your intended audience uses on a regular basis from **Worksheet #10**.
  - Column 3: list to whom your intended audience listens about SRH and the desired behavior from **Worksheet #10**.

For some channels, like radio, television and newspapers, there may be several options that your audience can use. For example, there are probably several radio and television channels to choose from, or different newspapers that are available. Where possible, be precise as to which radio/TV channel or newspaper your intended audience prefers.

## WORKSHEET #11: SELECTING COMMUNICATION CHANNELS (CONTINUED)

Column 1: Channels from "Day in the Life"	Column 2: Channels Used	Column 3: Channels Listened to for SRH

2. Channel Overlap. Review the channels written in columns 1, 2 and 3 and list the channels that are listed in all columns.
  
3. Consider potential challenges using these channels, as well as other channels or combination of channels that could be used, although reach or effectiveness may be reduced. List the channels and explain your decision.
  
4. List communication channels that you consider appropriate for your audience and would like to explore further (i.e., ask intended audience if channel is appealing, collect costs from media channels and mobile phone providers).

## WORKSHEET #11: SELECTING COMMUNICATION CHANNELS (CONTINUED)

5. Lead and Supporting Channels. From the list in question #4, is there one channel that would be most effective and efficient for reaching your intended audience? If so, this would be your "lead channel." Write down your lead channel and provide an explanation for why you chose it.

My lead communication channel is:	Chosen because:

From the list in question #4, what other channels could provide additional support to the lead channel to reach your intended audience? These are your "supporting channels." Write down your supporting channels and provide an explanation for why you chose them. List at least two to three supporting channels to consider.

Supportive communication channels are:	Chosen because:



## WORKSHEET #11: SELECTING COMMUNICATION CHANNELS (CONTINUED)

### TIME TO REFLECT

Before you move on, take a moment to reflect on your experience with this Worksheet. What are the three key pieces of information you learned from filling out this Worksheet?

1.

2.

3.

## WORKSHEET #11: SELECTING COMMUNICATION CHANNELS

### Zambe Example

This example is based on the Zambe Let's Talk About It! program introduced in Part 1 of the I-Kit to show how the program managers used information (both quantitative and qualitative) to prioritize the communication channels to use for out-of-school urban women, 15 to 19 years old. Additional insights are provided in text bubbles.

Intended Audience: *Urban women, 15 to 19 years old, out of school*

Behavioral objective: *Increase the proportion of modern contraceptive method use among sexually active, out-of-school, young women ages 15 to 19 in Zambe between January 2009 and December 2011, from 35 percent to 45 percent.*

1. Channel Summary. For each column, pull information from previous Worksheets.
  - Column 1: list all of the potential ways to deliver messages to your intended audience from [Worksheet #9](#), removing any duplicates from the list.
  - Column 2: list the communication channels your intended audience uses on a regular basis from [Worksheet #10](#).
  - Column 3: list to whom your intended audience listens about SRH and the desired behavior from [Worksheet #10](#).

For some channels, like radio, television and newspapers, there may be several options that your audience can use. For example, there are probably several radio and television channels to choose from, or different newspapers that are available. Where possible, be precise as to which radio/TV channel or newspaper your intended audience prefers.

Column 1: Channels from "Day in the Life"	Column 2: Channels Used	Column 3: Channels Listened to for SRH
<i>Wall signs and billboards along road, in small shops and near cafes and market</i>	<i>Radio</i>	<i>Health workers/clinics</i>
<i>Church: message in sermon, classes</i>	<i>Friends and family</i>	<i>Family members (i.e., mothers, aunts)</i>
<i>Participatory theater, large-group IPC</i>	<i>Other people in the community</i>	<i>Radio</i>
<i>IPC with peer educators</i>	<i>TV</i>	
<i>Mobile phone SMS</i>	<i>Newspaper</i>	
<i>Night club: posters, IPC</i>	<i>Mobile phones</i>	
<i>Parent outreach</i>		
<i>Radio PSA, talk-show, call-in show or serial drama, especially Capital Radio 95.5 FM</i>		

## WORKSHEET #11: SELECTING COMMUNICATION CHANNELS (CONTINUED)

### Zambe Example

2. Channel Overlap. Review the channels written in columns 1, 2 and 3, and list the channels that are most frequently mentioned across all columns.
  - *Face-to-face conversation*
  - *Radio*
  - *Mobile phones*
3. Consider potential challenges using these channels, as well as other channels or a combination of channels that could be used, although reach or effectiveness may be reduced. List the channels and explain your decision.
  - *Radio (serial drama, talk shows and discussion groups): In the media research, we learned that young women did not like radio because it was only one-way communication and they wanted to be able to interact more. Adding radio call-in talk shows and discussion groups would complement a radio serial drama. Since out-of-school young women may be hard to find for IPC activities, radio has the potential to reach these women wherever they are.*
  - *Mobile phone messaging: Having a phone hotline, where someone answers calls and talks with the caller would be great; however, if resources do not allow for this, SMS could be used to send out messages, as well as allow someone to text in a question and receive a text response.*
  - *Outdoor billboards and transit ads: Can direct young women to listen to the radio drama, call-in during the talk show with questions or promote Bright Star City Clinics with directionals.*
4. List communication channels that you consider appropriate for your audience and would like to explore further (i.e., ask intended audience if channel is appealing, collect costs from relevant media channels and mobile phone providers, etc.).
  - *IPC sessions with peer educators, parents or other adults influencing young women*
  - *Peer outreach activities (e.g., street theater in nightclubs and market place)*
  - *Radio: serial drama, talk shows and discussion groups*
  - *Mobile phone messaging*
  - *Outdoor billboards and transit ads*

## WORKSHEET #11: SELECTING COMMUNICATION CHANNELS (CONTINUED)

### Zambe Example

5. Lead and Supporting Channels. From the list in question #4, is there one channel that would be most effective and efficient for reaching your intended audience? If so, this would be your "lead channel." Write down your lead channel and provide an explanation for why you chose it.

My lead communication channel is:	Chosen because:
<i>Radio</i>	<ul style="list-style-type: none"> <li>• <i>Radio is the most accessible channel in Zambe and youth listen to it.</i></li> <li>• <i>A radio serial drama can be entertaining and educational and include a variety of characters that are dealing with similar challenges as Awa, and model the intended behavior.</i></li> <li>• <i>There are no other serial dramas that target youth so this would get their attention.</i></li> </ul>

From the list in question #4, what other channels could provide additional support to the lead channel to reach your intended audience? These are your "supporting channels." Write down your supporting channels and provide an explanation for why you chose them. List at least two to three supporting channels to consider.

Supportive communication channels are:	Chosen because:
<i>Mobile phone</i>	<ul style="list-style-type: none"> <li>• <i>A SMS platform could be used to engage the audience to text the answer to questions posed in the serial drama. In addition, SRH information could be sent to subscribers.</i></li> </ul>
<i>Outdoor billboards and transit ads</i>	<ul style="list-style-type: none"> <li>• <i>Ads on outdoor billboards and taxis and buses can be used to remind youth to tune in for the radio serial drama and call in to discuss.</i></li> </ul>
<i>IPC</i>	<ul style="list-style-type: none"> <li>• <i>Peer educators can reach out to youth and elaborate on the topics covered in the serial drama</i></li> </ul>
<i>Community-based approaches</i>	<ul style="list-style-type: none"> <li>• <i>Drama groups can perform scenes from the serial drama in areas where youth gather (e.g., market place, bars) and engage discussions with youth on the topics raised.</i></li> </ul>

## WORKSHEET #11: SELECTING COMMUNICATION CHANNELS (CONTINUED)

### *Zambe Example*

#### TIME TO REFLECT

Before you move on, take a moment to reflect on your experience with this Worksheet. What are the three key pieces of information you learned from filling out this Worksheet?

- 1. Need to make sure that our lead channel (radio) is accompanied by interactive communication tools, such as social media or call-in options for the serial drama.*
- 2. Make sure members of our intended audience are part of the script development for the radio drama.*
- 3. Check on literacy levels of our audience—think about an alternative to SMS if levels are low (e.g., voice messages).*



## Reminder!

### Creating Surround Sound and Message Reinforcement

Creating “surround sound”—using multiple channels to reach your audience with consistent messaging—is an important principle in SBCC programming. When the intended audience receives messages in fresh and different ways from different channels the message is more likely to be heard.

When planning your SBCC intervention, make sure that the same messages are passed through different channels. In this way, the messages reinforce each other and they are more likely to lead to behavior change.

This means that messages Awa hears on the radio are the same as or complementary to the messages that are delivered by peer educators and displayed on posters and fliers. Make sure your messages have common branding (images, name, logo and slogan) as this will help the audience make the associations between messages and reinforce them.

To get a picture of “surround sound,” think of Awa during a typical week in her life and the various channels through which she receives consistent messaging as part of the *Let’s Talk About It!* program:



*Awa wakes up early on Monday to hear her favorite radio DJ chatting about how to have a healthy relationship and he mentions that the Bright Star City Clinics are places where youth-friendly providers are available to counsel young people on contraception.*

*As she listens to the radio, she hears the promotional spot reminding her to tune in at 4:00 p.m. every Wednesday for the latest episode of “Zanbe Love,” the serial drama about the love lives of urban adolescents that is funded by the Lets Talk About It! program. Once her mom is awake, she turns off Awa’s radio program to listen to the news.*

*As Awa walks to school, her journey takes her through small trading centers with small shops. She often sees a poster in the window of her favorite clothes store with a picture of a young girl on her way to university and a tagline that says she avoided an unintended pregnancy by using contraceptives and is pursuing her dreams. She continues walking along the main road as mini-busses pass by, several with posters of the different characters in “Zanbe Love” on the side of their vans.*





After school, Awa often looks for her friend Léonore, who sells grains and spices in the city market. On Wednesdays, Léonore usually talks to her about what she has learned at her peer education training. This week, she shares what she learned about how to have a healthy relationship and tells Awa about the risks of having unprotected sex. She answers Awa's questions as best she can, but also suggests that she go to a Bright Star City Clinic to get accurate information from a health care provider.

On Wednesday, Awa listens for 30 minutes to "Zanbe Love." This week, she finds out that her favorite character, Maria, may have to drop out of school because her parents can't pay the fees. An older man Maria knows hints that he could give her the school fees if they have a sexual relationship, but she remains strong and refuses. This makes Awa think about the boys that are starting to suggest things to her when her mother doesn't have money for her school fees. She texts a question she has to the Zanbe Love number, since they always respond quickly and the information is private.



On Fridays, Awa often works in the Central Market selling clothes, and, after closing up her stall for the day at sundown, she heads out to meet some friends at a café and notices the neon star sign for Bright Star City Clinic. Though most businesses are closed, this one seems to still be open...

As you can see from Awa's week, she was exposed to positive messages about contraception and sexual health through different channels:

- Her favorite radio program discusses SRH and reminds listeners of the Bright Star Clinics and their services.
- Radio spots remind her of the Zanbe Love serial drama, where SRH is discussed.
- Going to school she sees posters and billboards on busses about SRH and Zanbe Love.
- Her friend is becoming a peer educator and shares information about SRH with Awa

Ensuring that your SBCC programs use similar messages across different channels will increase the likelihood that your intended audience will hear them, think about them and eventually take action!

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## Resources for Essential Element 6



Resources for **Essential Element 6** include:

- Communication channels (including TV, radio, print, websites)
- Community-based approaches
- IPC
- Mobile phones
- Social media

### **Communication Channels**

#### **AudienceScapes – The InterMedia Knowledge Center**

Outlines information, communication and the media environment for 15 countries and plans to add more. <http://www.audiencescapes.org/>

#### **BBC Country Profiles**

Has a media section which describes common media channels used, popular print media, television and radio stations. [http://news.bbc.co.uk/2/hi/country\\_profiles/default.stm](http://news.bbc.co.uk/2/hi/country_profiles/default.stm)

#### **The DELTA Companion: Marketing Planning Made Easy**

*PSI*

DELTA is PSI's strategic planning, management and alignment tool for social marketing and BCC programs.

[http://www.thehealthcompass.org/sites/default/files/strengthening\\_tools/DELTA-Companion-Social-Marketing.pdf](http://www.thehealthcompass.org/sites/default/files/strengthening_tools/DELTA-Companion-Social-Marketing.pdf)

### **Mass Media**

#### **How to Write a Radio Serial Drama for Social Development: A Script Writer's Manual (1996)**

*Johns Hopkins Center for Communication Programs*

This book is a practical manual for script writers preparing radio serial dramas for development projects. The manual largely concentrates on the practical aspects of script writing.

<http://ccp.jhu.edu/documents/How%20to%20Write%20Radio%20Serial%20Drama%20for%20Soc%20Develop%20.pdf>

*Examples using TV:*

#### **HEART (Zambia)**

- [http://www.aidstar-one.com/promising\\_practices\\_database/g3ps/helping\\_each\\_other\\_act\\_responsibly\\_together\\_heart](http://www.aidstar-one.com/promising_practices_database/g3ps/helping_each_other_act_responsibly_together_heart)
- <http://www.c-hubonline.org/resources/heart-helping-each-other-act-responsibly-together>



*Examples using radio:*

**Let's Talk about Sex** (Liberia), <http://ltalkaboutsex.blogspot.com>  
<http://ccp.jhu.edu/jongo-love-sweeps-the-airwaves-tupange-brings-family-planning-to-urban-poor-in-kenya/>

**Jongo Love** (Kenya), <http://ccp.jhu.edu/jongo-love-sweeps-the-airwaves-tupange-brings-family-planning-to-urban-poor-in-kenya/>

**Get it together** (Nigeria), <http://www.nurhitoolkit.org/program-areas/demand-generation/radio-drama>

Health Radio (2005)

This webpage created by The Soul Beat provides a list of examples from around Africa of how community radio has been used to address health issues. Case studies are described from Ghana, South Africa, Zimbabwe, Zambia, Rwanda, the Ivory Coast, Mali, Burkina Faso, Kenya, Ethiopia, Uganda and Tanzania.

<http://www.comminit.com/global/content/health-radio>

*Examples using print:*

**Straight Talk SRH program (Uganda)** has successfully used the newspaper as one of its channels to reach young people with SRH information and messages. Each month, one of the leading national newspapers publishes "Straight Talk," a four-page printed insert that covers SRH topics and a page of answers to letters from youth. The print run is 150,000 copies per issue and is inserted into the newspaper for general distribution, reaching out-of-school youth, and delivered to secondary schools for distribution to in-school youth. Many schools in Uganda have started Straight Talk Clubs, which bring young people together to read the articles and talk about SRH together. The clubs are then linked to youth-friendly services in the local community. To find out more about Straight Talk, click here: [http://straighttalkfoundation.org/?page\\_id=2250](http://straighttalkfoundation.org/?page_id=2250)

*Examples using websites:*

**TeenWeb** (Kenya) [http://www.cpc.unc.edu/projects/teenweb/TeenWeb\\_Nairobi\\_survey\\_report-1.pdf](http://www.cpc.unc.edu/projects/teenweb/TeenWeb_Nairobi_survey_report-1.pdf)

**Scrutinize** (South Africa) <http://www.scrutinize.org.za/about-scrutinize.html>

## **Community-based Approaches**

### **Entertainment-Education for Better Health (2013)**

*Johns Hopkins Bloomberg School of Public Health*

Managers of family planning/reproductive health programs and policy makers can use this report to become more knowledgeable advocates for entertainment education and better prepared to oversee entertainment education projects. Also, this report can help entertainment education managers with choosing formats and producing products.

[http://www.thehealthcompass.org/sites/default/files/strengthening\\_tools/entertainment%20education.pdf](http://www.thehealthcompass.org/sites/default/files/strengthening_tools/entertainment%20education.pdf)

### **Theatre-Based Techniques for Youth Peer Education: A Training Manual (2005)**

*Youth Peer Education Network*

This manual is intended for program managers and youth peer educators who are interested

in adding a theatre component to their reproductive health and HIV prevention activities or in strengthening a theatre component that is already part of a program.

[https://www.iywg.org/sites/iywg/files/theatre\\_based\\_techniques.pdf](https://www.iywg.org/sites/iywg/files/theatre_based_techniques.pdf)

### **Participatory Theater for Conflict Transformation: Training Manual**

*Searching for Common Ground*

This is a manual developed in the Democratic Republic of Congo that brings together Forum Theater techniques and a 'common ground' approach aimed at seeking collaborative rather than adversarial solutions to conflict. While this resource is not focused on youth SRH, it may be useful for teaching basic elements of participatory theater.

<http://www.dmeformpeace.org/sites/default/files/Participatory-Theatre-Manual-EN.pdf>

### **Feel! Think! Act! A Guide to Interactive Drama for Sexual and Reproductive Health with Young People (2008)**

*International HIV/AIDS Alliance*

This toolkit provides guidance on how interactive drama can be used in work with young people to encourage them to think about and take action to improve SRH. The guide contains ideas for drama and discussion activities designed to help youth learn about sexual health issues and gain skills in facilitating and using interactive drama techniques.

<http://www.aidsalliance.org/resources/318-feel-think-act>

### **Young 4 Real: Young People's Sexual and Reproductive Health Information and Services Advocacy Training Handbook (2013)**

*SAfAIDS*

The handbook provides trainers with a comprehensive tool to train young people as sexual and reproductive health and rights champions in their communities. It is also a useful reference book for parents, service providers, teachers and carers on the integration of sexual reproductive health and rights and HIV services.

[http://catalogue.saf aids.net/sites/default/files/publications/Young4Real\\_Information\\_Services\\_Advocacy\\_Training\\_Handbook.pdf](http://catalogue.saf aids.net/sites/default/files/publications/Young4Real_Information_Services_Advocacy_Training_Handbook.pdf)

### ***Young People's Information and Services Advocacy Sexual Reproductive Health and Rights***

### **Champions Flipchart for Community Sessions (2012)**

*SAfAIDS*

This flipchart forms part of SAfAIDS' Young People's Sexual and Reproductive Health Information and Services Advocacy (YPISA) resource kit. YPISA is a set of initiatives designed to train and empower young people on sexual and reproductive health and rights and HIV services and to become champions, for adolescent SRH rights in their communities. The YPISA Resource Kit consists of a training manual for training young people, caregivers and service providers, and a flipchart for use by the sexual and reproductive health and rights champions to train their peers.

<http://catalogue.saf aids.net/sites/default/files/publications/YPISA-SRHR-Flipchart-Community-Sessions.pdf>

## **Act 2015 Advocacy Strategy Toolkit**

*UNAIDS*

A practical toolkit for young people who are passionate about advancing HIV and sexual and reproductive health and rights through national advocacy in the post-2015 agenda. This toolkit is designed for advocates planning to take action in the post-2015 development process, with a particular focus on the window of opportunity between April and October 2014. However, the resources in the toolkit may be applicable to your program, regardless of whether you are taking part in the post-2015 advocacy process.

[http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2014/advocacy\\_toolkit\\_en.pdf](http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2014/advocacy_toolkit_en.pdf)

## **The Power to Lead: A Leadership Model for Adolescent Girls (2009)**

*CARE*

This paper outlines the process for engaging and empowering young girls in the community.

[http://www.care.org/sites/default/files/documents/GE-2009-PW\\_Leadership.pdf](http://www.care.org/sites/default/files/documents/GE-2009-PW_Leadership.pdf)

## **How to Reach Young Adolescents. A Toolkit for Educating 10 – 14 year olds on Sexual and Reproductive Health (2011)**

*DSW*

This toolkit is designed to guide implementation of SRH projects targeting 10 to 14 year olds who are enrolled in schools. The activities proposed in the toolkit, therefore, rely on programmers creating strong partnerships with local schools.

<http://www.dsw.org/publications-and-media/publications.html>

## **TRAIL Behavior Change Video Series (2014)**

*Pathfinder International*

These three videos, each approximately 20 minutes long, belong to a series from Pathfinder aimed at demonstrating the community mobilization method of “Tailored Reflection and Integrated Learning,” or TRAIL. The methodology is used to engage communities by involving small groups and moving them through the process of problem identification and solution. The videos are available with English and French subtitles.

<http://www.pathfinder.org/publications-tools/publication-series/trail-behavior-change-videos.html>

## **Interpersonal Communication**

### **IPC Toolkit (2011)**

*PSI*

This is a compilation of examples, lessons learned and best practices in IPC programs based on the IPC Deep Dive conducted in 2011.

[http://www.thehealthcompass.org/sites/default/files/strengthening\\_tools/PSI\\_IPC%20toolkit%20English.pdf](http://www.thehealthcompass.org/sites/default/files/strengthening_tools/PSI_IPC%20toolkit%20English.pdf)

## **An Interpersonal Communication and Counseling Skills Training Manual for Health Facility Support Staff: Facilitator's Guide (2008)**

*Johns Hopkins Center for Communication Programs*

The manual is meant for support staff at health facilities that interact with clients and providers. The manual is organized by lessons to help guide the trainer to gain confidence and skills to conduct an interpersonal communication and counseling training workshop for health facility support staff.

<http://ccp.jhu.edu/documents/IPC%20Skills%20Training%20Manual%20For%20Health%20Facility%20Support%20Staff.pdf>

The accompanying trainer's guide can be found here.

[http://ccp.jhu.edu/documents/Final\\_Copy\\_IPC\\_Manual\\_For%20Production\\_17\\_01\\_2007.pdf](http://ccp.jhu.edu/documents/Final_Copy_IPC_Manual_For%20Production_17_01_2007.pdf)

## **Pathways to Change Game (2013)**

*Pathfinder International*

The Pathways to Change game is designed to make the concept of behavior change more understandable. When outreach workers use the game with their communities, it stimulates thinking that can motivate individuals and communities to change. Playing Pathways to Change can also help community health workers and peer educators understand the target population's perceptions of barriers to change and facilitators of change. When the game is used in this way, it functions as an informal data collection tool that can be helpful for designing and tailoring interventions.

<http://www.pathfinder.org/publications-tools/pathways-to-change-game.html>

## **Cue Cards for Counseling Adolescents on Contraception (Multiple Languages) (2014)**

*Pathfinder International*

The set of cue cards is designed to help a range of community- and facility-based providers to counsel adolescents and young people on their contraceptive options. The cue cards address combined oral contraceptives, progestin-only pills, emergency contraception, male and female condoms, injectables, implants, intrauterine devices and the lactational amenorrhea method. The provider can use the front side of the cards to give information about all available options and, after the adolescent chooses a method, turn to the back side to give specific instruction on use.

<http://www.pathfinder.org/publications-tools/cue-cards-for-counseling-myanmar.html>

## **GREAT Scalable Toolkit**

*Institute of Reproductive Health, Pathfinder International, Save the Children*

The Scalable Toolkit is a set of tools created to bring fun and engaging activities that transform gender and reproductive health outcomes through a three-stage process: review of relevant programs, extensive formative research with adolescents and the people who influence them, and a pretest of draft materials followed by revisions.

<http://www.pathfinder.org/publications-tools/great-scalable-toolkit.html>

## **Manuel de Formation Santé de la Reproduction des Adolescents (2006)**

*DSW*

This interactive manual emphasizes the participatory aspects of learning and addresses key sexual and reproductive health issues that concern young people, including: the reproductive anatomy, gender, adolescent sexuality, life skills for developing healthy sexual behaviors, STIs and contraception. It has been conceived as a manual for peer educators but contains helpful and creative activities for anyone to address SRH with young people. Versions are available in English and French.

[http://www.dsw.org/fileadmin/content/Docs/SRH\\_manual/merged\\_smallpdf.com\\_\\_2\\_.pdf](http://www.dsw.org/fileadmin/content/Docs/SRH_manual/merged_smallpdf.com__2_.pdf)

### **Mobile Phones**

#### **M4RH (Rwanda, Kenya, Tanzania)**

This online tool includes background information and practical tools for using mobile phones to reach a wide audience with information about SRH.

<http://m4rh.fhi360.org>

#### **Text to Change (Uganda)**

Text to Change sends and receives information via mobile telephony in emerging countries, customizing mobile-based solutions to enable partners, such as USAID and UNICEF, to interact with people.

<http://www.texttochange.org>

#### **SMS 4 SRH: Using Mobile Phones to Reduce Barriers to Youth Access to Sexual and Reproductive Health Services and Information**

*Marie Stopes International*

This summary report provides an overview of how mHealth programming may be used to improve youth access to SRH services and information.

<http://www.mariestopes-us.org/sites/www.msi-us.org/files/SMS%204%20SRH%20%282013%2011%2013%29.pdf>

#### **mBCC Field Guide: A Resource for Developing Mobile Behavior Change Communication Programs**

*Abt Associates*

A tool that helps users guide the design of mobile applications for health and provides insights about what works in mobile BCC.

<http://mbccfieldguide.com>

## **The mHealth Planning Guide: Key Considerations for Integrating Mobile Technology into Health Programs**

*k4health*

The guide helps individuals and organizations appropriately plan for mHealth deployments. It's intended primarily for global health technical experts, program managers and staff working to implement mHealth solutions in low-resource settings.

<https://www.k4health.org/toolkits/mhealth-planning-guide>

### **RapidSMS**

RapidSMS is a toolset for rapidly building text message services for data collection and group coordination using basic mobile phones. It can be used both to impart and collect information as it allows interaction with the user. RapidSMS was initially created by UNICEF's Innovations Unit in 2007 to support UNICEF's data collection of youth engagement activities. It has since been customized and deployed with diverse functionalities, including remote health diagnostics, nutrition surveillance, supply train tracking, registering children in public health campaigns, information sharing and community discussion. A list of projects using this technology to reach target populations with key information can be found at:

<https://www.rapidsms.org/projects/>

## **Social Media**

### **Internet and Facebook statistics by country**

<http://www.internetworldstats.com/stats1.htm>

### **Socialbakers**

Provides monitoring and tracking tools for analysis of social networks (Facebook, Twitter, YouTube and Google+) by country.

<http://www.socialbakers.com/facebook-statistics/>

### **oAfrica**

oAfrica covers information on how people in each African country are using the Internet.

<http://www.oafrica.com/uncategorized/african-social-networks/>

### **Reaching Them Where They Are: A guide for using online and social media to conduct sexual health outreach with youth (2011)**

This guide, developed for a U.S. audience, provides information about how to use popular social media channels to reach hard-to-reach young people, develop effective messages and overcome common barriers.

<http://hpcpsdi.rutgers.edu/training/YouthSocialMediaGuidance.pdf>

### **The Health Communicator's Social Media Toolkit (2011)**

*Centers for Disease Control and Prevention*

This toolkit was designed to provide guidance and share lessons learned in more than three years of integrating social media into the Centers for Disease Control and Prevention's (CDC) health communication campaigns, activities and emergency response efforts. The information includes how to get started with using social media—from developing governance to determining which channels are best and to creating a social media strategy. It was developed for a U.S. audience.

[http://www.cdc.gov/socialmedia/tools/guidelines/pdf/socialmediatoolkit\\_bm.pdf](http://www.cdc.gov/socialmedia/tools/guidelines/pdf/socialmediatoolkit_bm.pdf)

## **CDC's Guide to Writing for Social Media**

*Centers for Disease Control and Prevention*

This guide aims to assist you in translating your messages so they resonate and are relevant to social media audiences and encourage action, engagement and interaction. It is largely tactical, giving you specific ways to write for social media channels. Although a wide variety of social media tools exist, this guide will focus on three specific channels: Facebook, Twitter and text messages (SMS).

<http://www.cdc.gov/socialmedia/tools/guidelines/pdf/guidetowritingforsocialmedia.pdf>

## **Family Planning Goes Social: Using social media to create, connect and come together (2013)**

*John Snow, Inc.*

This toolkit aims to help people working in the field of family planning better understand the major social media tools and networks available and how they can be used to strategically advance program goals and increase visibility among target audiences.

[http://www.jsi.com/JSIInternet/Inc/Common/\\_download\\_pub.cfm?id=14050&lid=3](http://www.jsi.com/JSIInternet/Inc/Common/_download_pub.cfm?id=14050&lid=3)