



Social Marketing of CycleBeads in Banke and Bardiya Districts of Nepal

Since 2011, Nepal's modern method contraceptive prevalence rate (mCPR) has stagnated at 43% (NDHS, 2011 and 2016). Over the same period, the prevalence of traditional method use increased from 7% to 10%.

Two districts bordering India, Banke and Bardiya, have complex family planning (FP) use profiles. Banke's mCPR is lower than the national average at 41.7%, while Bardiya has a high mCPR in urban areas, but a much lower mCPR in rural areas of the district (NDHS, 2016). Additionally, the unmet need for FP is higher among certain religious minorities including Muslims in Banke and specific ethnicities in rural Bardiya.

The Standard Days Method® (SDM) has the potential to fill some of the FP gaps and reach users through alternative distribution mechanisms such as social marketing. SDM has been introduced through social marketing in various countries (Kavle et al., 2009), including Benin and the Democratic Republic of Congo, where CycleBeads were distributed through pharmacies and drug shops (Institute for Reproductive Health, 2008).

Formative research conducted in Banke and Bardiya suggests that SDM addresses the concerns of women who want to avoid hormonal methods due to fear of side effects. Study participants reported that potential users prefer private clinics and pharmacies to government health facilities due to higher levels of privacy, prompt service, and quality of care. Utilizing these types of facilities is consistent with the Nepalese Ministry of Health and Population (MoHP) strategies that embrace the private sector and social marketing efforts. Based on these findings, both the MoHP and USAID decided to test a social marketing strategy for SDM introduction in the urban areas of Banke and rural areas of Bardiya through the Nepal Contraceptive Retail Sales (CRS) Company.

CRS and MoHP have collaborated in social marketing efforts for 40 years. CRS applies modern marketing tools and techniques to increase awareness and use of health and FP products in Nepal. The organization has a well-established network of community change agents (CCAs) and Sangini (Depo-Provera) pharmacies in the two districts.

SDM: A Side-Effect-Free Option



- Standard Days Method® (SDM) is a modern method of family planning based on reproductive biology that follows a precise protocol for correct use and was scientifically tested for efficacy in a clinical trial that showed it to be 95.5% effective with correct use and 88% with typical use (Arevalo, Jennings, Sinai 2002).
- SDM identifies a fixed fertile window of days 8 to 19 in the menstrual cycle when pregnancy is most likely in women with cycles 26 to 32 days long.
- SDM is typically used with CycleBeads®, a visual tool that helps women track their cycle to know when they are fertile and monitor their cycle length.
- SDM is incorporated into national family planning norms and policies in over 20 countries around the world. WHO recognizes SDM as an evidence-based practice and includes it in FP guidance documents.

Project Objectives

- Diversify the family planning method mix in Nepal
- Increase access to CycleBeads (referred to as “Malachakra” in Nepali)
- Assess the capacity of CRS’ CCAs to create demand for CycleBeads and of service providers in the Sangini franchising network to offer CycleBeads

INTERVENTION

CRS tested a multi-level approach for the social marketing of CycleBeads across 76 service sites in Banke (35) and Bardiya (41) from May 2017 to May 2018 with technical assistance from the Institute for Reproductive Health. The intervention was implemented within the Remote Area Initiative (RAI) — which relies on CCAs to provide health services through existing structures such as mothers’ groups — and in coordination with other services being offered in the district.

CRS carried out demand generation activities in the target communities and provided CycleBeads via Sangini franchising pharmacies. Specifically, the intervention ensured the availability of CycleBeads by:

- Increasing the capacity of service providers at Sangini pharmacies (to provide the method) and community based health workers (to promote SDM)
- Using diverse advertising activities including distribution of point of sale (POS) promotional materials, radio and visual TV advertisements, and community-level promotion to increase brand awareness and generate demand
 - At the community level, [Pragati games](#) were used by CCAs to start conversations about fertility (the menstrual cycle), side-effects of family planning methods, and existing social norms

- Screening and counseling clients
- Selling CycleBeads at a per-unit cost of NRs 75 (USD 0.64) to clients with a profit margin of NRs 25 (USD 0.25)
- Providing training to service providers and community health workers on recording and reporting SDM consultations and CycleBeads sales
- Providing CycleBeads for training and distribution (logistics and procurement)

Capacity Building and Demand Generation

To generate demand for the method through promotional efforts, CRS trained peer facilitators within the Health Communication Capacity Collaborative (HC3) project in Banke and CCAs through CRS’ Rural Area Initiative (RAI) in Bardiya.

FACT Project staff provided trainings to SIFPO-II’s Reproductive Health Female Volunteers (RHFVs) and volunteers from the Fatima Foundation in Banke. These trained promoters carried out community-level social marketing activities, including group meetings with community members. For example, in Health Mothers Groups, RHFVs introduced SDM in discussions, demonstrated how CycleBeads work, and to referred interested women to Sangini pharmacies. FACT Project staff also trained CCAs in Bardiya to implement three Pragati games that made learning about fertility and FP fun and engaging.

A total of 76 Sangini providers and 38 community promoters were trained to offer SDM and received supportive supervision and a refresher training to address biases and reinforce key counseling points.

Mass media campaigns used radio jingles (15,936 spots through four FM stations) and television scrollers (18,000 times over a six-month period). In-store promotional products were distributed at Sangini pharmacies to increase brand visibility.

Products Supporting the Social Marketing of CycleBeads



MONITORING RESULTS

In Bardiya, CCAs conducted 1,390 SDM counseling sessions, reaching 22,061 individuals. Over the course of the project in Bardiya, a total of 5,344 community members played the Pragati games (Menstrual Cycle, Son & Daughter and Side Effect Puzzle), which also stimulated conversations in the community around fertility, gender-determination, and family planning methods including SDM.

CRS administered a competency checklist to thirty CCAs and forty CRS Sangini providers to assess their understanding of SDM/CycleBeads and ensure quality counseling on the method, respectively.

- Almost all CCAs (93.3%) correctly explained how CycleBeads work and 86.7% described the darker brown bead as an indicator for a short cycle.
- All Sangini providers interviewed correctly described the SDM eligibility criteria (including recent hormonal method use), explained how CycleBeads work, and when to come back for another method if SDM was no longer appropriate for the user.
- All CCAs correctly explained:
 - SDM/CycleBeads eligibility criteria
 - the meaning of the different colored beads
 - how to move the ring
 - what to do on the fertile days

- Despite the providers' high levels of competence across various areas of SDM counseling, only 65% of Sangini providers asked the client about recent delivery and current breastfeeding practices.

To assess correct use and acceptability, CRS staff conducted client follow-up visits with 20 women currently using SDM between 22 and 31 years old. All users:

- Reported moving the ring to the red bead at the start of every period and daily during the menstrual cycle
- Used condoms or abstain from sex during fertile days
- Knew to seek counseling from the Sangini provider if their period started before the darker brown bead or after the last brown bead, or if they had unprotected sex on the fertile days
- Reported that their spouse agreed to use condoms or practice abstinence on fertile days, and that their husbands supported them buy moving the ring every day or reminding them to move the ring

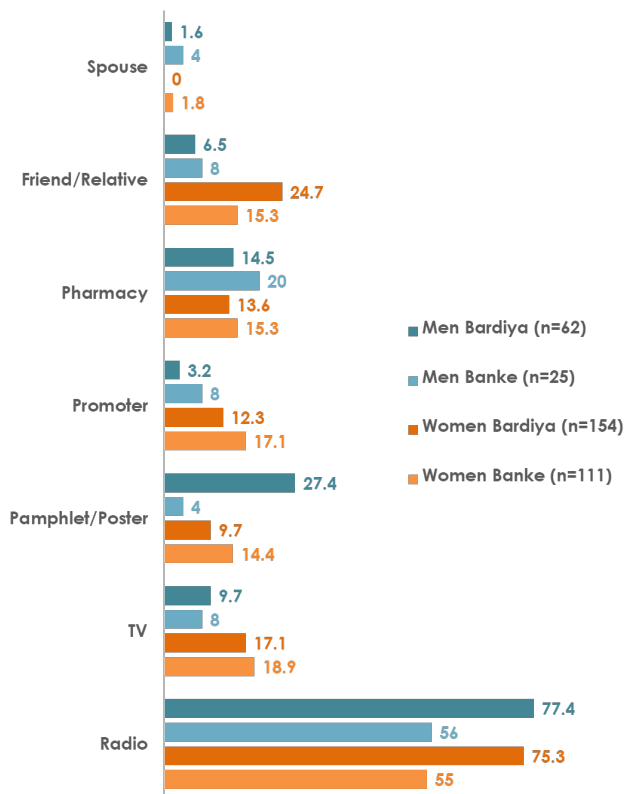
EVALUATION RESULTS

IRH conducted a mixed-method cross-sectional evaluation using a convenience sample of 1,152 beneficiaries (women=766; men = 386) aged 18 to 39 years within distribution areas of Banke and Bardiya.

Interviews with 10 CRS Sangini providers, 10 community promoters, 10 female SDM-users, and three male partners of SDM users provided more information on awareness and acceptability of SDM/CycleBeads, points of sale for CycleBeads, and user experience.

Very few women in the survey took part in the community level promotion sessions (<5%) or visited a Sangini outlet in the last year (<3%). Among those who did visit a Sangini outlet, 90% reported that they visited the outlet for FP services. It is important to note that the participants in this survey may not adequately reflect the true percentage of women who typically utilize Sangini pharmacies or interact with CCAs given the convenience sampling methodology employed.

Source of Malachakra Information Among Those Aware



“While using other methods, we would be worried whether using it would show any side effects or would harm the body but this CycleBeads is a natural method and if we can control ourselves then it would be very nice to use it.” – **Male Partner of an SDM User, Banke**

“I became more careful after I started using this method. I was also safe. It made everything positive between husband and wife. When [we] tell our husband then they also can be more careful. It makes the relationship better.” – **Female SDM User, Bardiya**

“When people know or hear that we have CycleBeads then people come to our shop to learn about it. Even if they don't buy CycleBeads there is more flow of people. When they come just to learn about CycleBeads they buy something as well. Since there is more flow of people our shop seems busy and it is a good thing.” – **Female Sangini Provider, Bardiya**

Although only a few participants had contact with community promoters (RHFV, CCA, and Fatima Volunteers), about one third of participants had heard of CycleBeads, indicating a moderate level of awareness.

This awareness is attributed to mass-media promotion implemented district-wide.

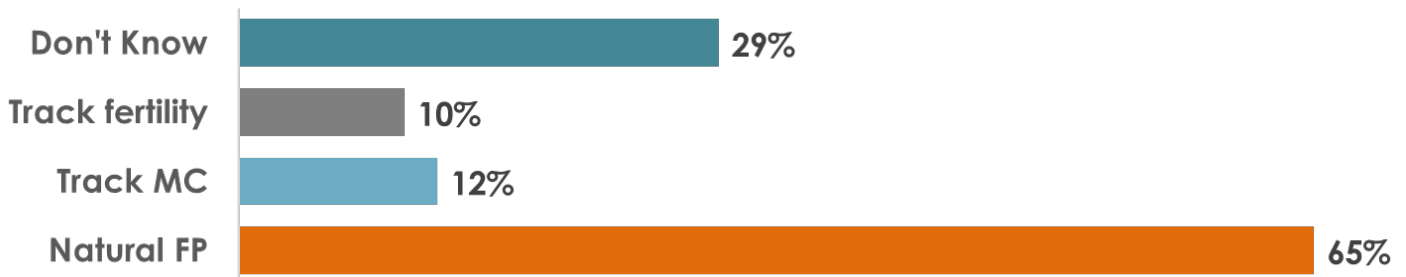
Awareness of CycleBeads was higher among both women and men in Bardiya, a district where the Pragati games were integrated, in contrast to Banke where games were not played.

Among those who heard of CycleBeads, more than 50% of women had heard about it through radio spots. About 15% reported hearing about SDM/CycleBeads from a pharmacy. Other sources of information were television, community promoters, and friends and relatives.

Among those aware of SDM and CycleBeads, approximately 70% of participants could describe correct use of the method. About 65% responded that CycleBeads/SDM was a natural FP method and 60% knew they could obtain CycleBeads from a CRS Sangini outlet in their community. Only 4% of participants knew a current or previous CycleBeads user and only 1% of respondents reported currently using the method. Seventy-five percent of women responded that they were not likely to use CycleBeads in the future for the following reasons: their intention to continue using their current method (37%), CycleBeads as not a good fit for them (11%), lack of understanding regarding how to use the method (31%), and not wishing to use any FP method (24%).

Fewer than 40% of participants who were aware of CycleBeads thought that it was an effective method of FP. Those who did not find the method effective (> 60%) reported barriers such as the need for spousal cooperation, the daily challenge of moving the beads, the need to use a condom on fertile days, and their lack of trust in this new method. However, among those currently using CycleBeads, most reported that they found the method to be safe, effective, and favorable because it increased spousal cooperation and support and there are no associated side effects. Most current users had a high level of trust in the method.

Purpose of CycleBeads (Malachakra) Among Women Aware of the Method (n=352)



CONCLUSION

Although initial uptake of CycleBeads was low in this intervention (230 users), gains in awareness levels were moderate and some of the branding and marketing activities resonated with people in the communities.

- Pharmacies, television, and community promoters helped to spread detailed and correct information about CycleBeads (though they were responsible for overall awareness to a lesser extent).
- Approximately one-quarter of participants aware of the method reported a likelihood to use CycleBeads in the future.
- Current users also reported improved spousal communication and support for FP use.

Participants reported that CycleBeads raised customer interest and curiosity about SDM and other family planning methods through promoter referral and materials such as the Pragati games. CRS plans to integrate SDM and the Pragati games into four low-CPR, Menstrual Hygiene Management (MHM) Project districts in Nepal, incorporating lessons from the social marketing and demand generation activities.

Recommendations for Future Interventions

Awareness and knowledge of fertility and the benefits of FP may be improved through the integration of social marketing of CycleBeads. Amplifying supportive supervision is necessary to sustain and enhance the competency of the providers and promoters and to overcome counseling and method-management challenges. Qualitative data suggests that lack of outreach towards men deters couples from adopting SDM. Providing information about SDM and CycleBeads to couples and including men in counseling may improve uptake. Radio ads were found to be the most effective way to raise awareness within these communities. Joint marketing of CycleBeads and condoms may also benefit the potential social marketing of both methods. In the future, timely availability of commodities and promotional materials may also help Sangini providers increase sales and profits.