# Information, Education and Communication (IEC) Operational Plan Summary

**OP Management:** Line Director - Director, IEM, DGFP

### Implementation Period: January 2017 to June 2022

**Overall Objectives:** To create demand for FP-MNCH information and services and to raise awareness regarding consequences of child marriage and teenage pregnancy including benefits of delaying marriage and first pregnancy, ANC, PNC, birth planning, spacing between pregnancies, small family, etc.

### **Specific Objectives:**

- Create demand for FP-MNCH information and services through massive SBCC activities using different innovative channels with special focus in low performing regions and pockets;
- Design and implement short and long-term SBCC campaigns to address child marriage, teenage pregnancy, unmet need and FP dropout rate as well as massive promotion of PPFP and LARC/PM;
- Engage and mobilize community leaders, gate keepers, religious leaders, youth representatives and media from planning to implementation of SBCC initiatives;
- Undertake high level advocacy initiative through policy dialogue/roundtable discussions to draw policy attention towards pressing FP-MNCH and population issues;
- Collaborate with media to increase coverage and reporting on FP-MNCH and population issues;
- Promote PPP/Partnership with NGOs, INGOs and private sectors for greater coverage.

### Total Estimated Cost (Taka in lac)

	Total (BDT)	GOB (BDT)	Project Aid (RPA) (BDT)	Source of Project Aid
Estimated Cost	29346	15007	14339 (13469) \$17.9m	IDA Pool Fund, USAID,
of OP	(\$36.7m)	(\$18.75m)	(\$16.8m)	UNFPA, UNICEF and others

#### **Background Information**

The IEC OP has been developed based on the current context, lesson learns and best practices and it is very much in alignment with the sector wide Strategic Investment Plan and Project Implementation Plan. This OP also draws on the recently developed and approved Comprehensive Social and Behavioral Change Communication Strategy 2016 by MoHFW. SBCC activities under this OP aim at sustainable social and behavioral changes to increase health seeking behavior, promote family welfare, healthy lifestyle and safe nutrition practices.

#### **Relevant Strategies in the Project Implementation Plan**

Strategic Objective 8: To promote health life-style choices and a healthy environment

### Major Program Components and Key Activities

1. Community Mobilization, Sensitization & Advocacy

- Support countrywide awareness through multi-media campaigns on child marriage, teenage pregnancy, delay first pregnancy among adolescents, facility delivery; promote PPFP & LARC/PM
- Orientation workshops on prevention of early marriage, promotion of small family norms, nutrition, ANC, PNC & FP in light of Islam, birth spacing and limiting, ARH, facility delivery, safe motherhood
- Develop BCC materials for target population groups;
- Community based program with adolescents, young couples, opinion leaders on FP-MNCH issues

### 2. Media campaign, ICT & Social Media

- Message dissemination through call center and Mobile voice call
- Functional integration with OOHS, through capacity development on e-Toolkit and e-Learning course for the frontline service providers (FWVs, FWAs, AHI & HA)
- Broadcast programs through Population cell of Bangladesh Betar and Bangladesh TV
- Media campaign on ARH, FP-MCH specially LAPM, newborn danger signs and care seeking.

## 3. Regional Service Package for HTR, low performing and urban slums

- Develop counselling Handbook on FP-MNCH and AH; conduct training for the frontline workers
- Motivational program on early marriage, FP, MNCH, ARH & Gender Issues through traditional media
- Organize audio-visual shows at schools, local clubs to reach adolescents and youth population
- Introduction of special kits like FP Kit, adolescent Kit, newly-wed couple Kit, etc

### 4. Capacity Building for different service providers, supervisors and managers and Planners

- Skill development training on IPC for service providers (FWA, FPI, FPI, FWV, SACMO etc.)
- Develop training curriculum on pre-marital counseling to be used by front-line FP workers.
- Organize workshop on effective planning and distribution of IEC/BCC materials
- Organize Strategic SBCC training for DGFP, Upazila and District managers.

# 5. Production, distribution and Display of SBCC materials

- Production of TVC, RDC, Short film to disseminate messages on FPRH and MNCH issues
- Printing of different IEC materials
- Message dissemination on FP-MCH through daily newspapers, hoardings/bill boards
- Country wide film show, especially at schools, clubs, in hard-to-reach and low performing areas.

### 6. Monitoring, Research and documentation of best practices

- Document best practices and success stories for dissemination at national and international fora
- Conduct operational research, formative research; mid-term and end evaluation
- Monitoring of the implementation of communication initiatives.
- Integrate SBCC monitoring checklist in DGFP MIS to reflect achievements of SBCC initiatives.

### 7. Coordination, Collaboration and Partnerships

- Capacity building of OOHS field workers and supervisors and managers of different levels
- Organizing different BCC activities jointly with OOHS staff: rally, discussion/round tables
- Involvement in Regional Service Package delivery
- Performance review and monitoring through regular joint coordination meeting
- Coordination through HPN Coordination Committee and Continue supporting BCC Working Group to facilitate and incorporation and harmonization of new BCC initiatives.

# Performance Management

Indicators	Baseline	Project Target (Middle and End of Project)	
Results Framework Indicators		By June 2020	By June 2022
Under 5 Mortality Rate	46		34
Neonatal Mortality Rate	28		18
Maternal Mortality Ratio	176		121
Total Fertility Rate	2.3		2.0
% women aged 15-19 who have begun childbearing	30.8%		25%
Contraceptive Prevalence Rate (CPR)	62.4%		75%
CPR (modern methods) in lagging regions	Sylhet-40.9%; Ctg- 47.2%		60%
ANC coverage (at least 4 visits)	31.2%		50%
% delivery by skilled birth attendant	42.1%		65%
% mothers with non-institutional deliveries	5.4%		10%
receiving post-natal care from a medically			
trained provider with 2 days of delivery			
Ratio of birth in health facilities of the richest	14.9%:70.2% =		1:3.5
wealth quintile to the poorest quintile	1:4.7		
OP Level Indicators			
Number of FP, MCH and Nutrition campaign organized	127	500	650
Number of workshops organized for awareness building of community leaders, professional and religious leaders on FP, MCH and Nutrition at Upazila level	280	1500	2200
Number of IEC materials (audio and video)	Video prod-15;	Video prod-40;	Video prod-60;
produced and broadcast in mass media	Video tel-1784; Audio broad-15830	Video tel-10000; Audio broad-20000	Video tel-15000; Audio broad-30000
Number of survey/research conducted and best practices documented	1	3	5