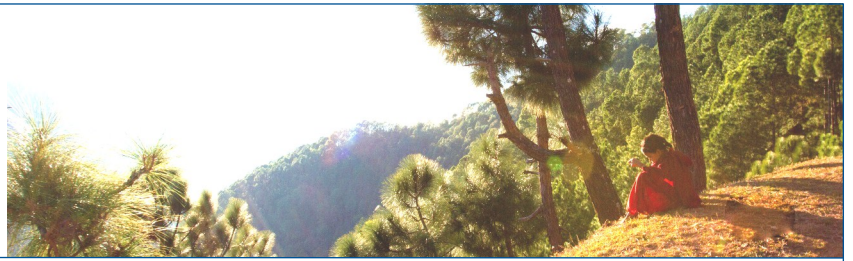




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HEALTH FOR LIFE TECHNICAL BRIEF

STRONGER SYSTEMS, HEALTHIER LIVES

DECEMBER 2016

Healthy Behavior through Local Radio Programs

Community Radio: A Key to Promoting Health

USAID's Health for Life, a health system strengthening project, works with the Government of Nepal to improve knowledge and behavior related to family planning, and maternal and child health, among other goals. In this mountainous country where literacy rates, especially among women, remain low, radio programming has proved to be a low-cost and very effective medium for disseminating health messaging. Over the last twenty years, the number of local/community radio stations has exploded in Nepal, reaching more listeners than ever before.

Some challenges to the development of these radio stations remain, however. Most of the content local stations broadcast is produced elsewhere, meaning that most radio programs, although aired locally, do not specifically discuss local issues. As a result, local producers often lack the professional training and exposure to create quality programming at the local level.

To take advantage of the benefits of radio while simultaneously addressing these challenges, Health for Life partnered with Antenna Foundation Nepal (AFN), a production house specializing in social messaging, to produce *Jeevan ka laagi Swasthya* ("Health for Life"), a weekly health program that focused on family planning, maternal, newborn and child health, and adolescent sexual and reproductive health in the context of the local community. The program ran for one year, broadcasting 1,404 episodes from 28 radio stations in 14 districts.

Methodology

Jeevan ka laagi Swasthya was designed in a 30-minute "magazine" format to include interviews, news updates, call-ins, quizzes, dramatizations, and more. AFN started by training radio personnel on program production and management and followed up by mentoring staff on formats, communication approaches and program packaging, feature writing, storytelling approaches, field research and incorporating data to substantiate information. A Content Advisory Group that included health officials, Health for Life staff and radio station personnel was established in each district to draft scripts every month. Drafts were then edited and refined by AFN, and final drafts were then sent back to the radio stations for production and broadcast.



Delivering health messages tailored to the community's needs through local radio stations

In addition to locally produced content, Health for Life provided radio stations with 21 radio spots/jingles on family planning and maternal newborn and child health (FP/MNCH). These spots were then re-recorded in the local language and aired 5-10 times a day.

Outcomes

Jeevan ka laagi Swasthya had multiple outcomes, including successfully raising awareness of health-related issues, growing the prominence of health issues, and improving the skills of local radio producers. Follow-up surveys found that those who had listened to the program displayed greater health knowledge than non-listeners. For example, 90 percent of listeners were aware that newborns should not be bathed immediately after birth (a common local practice) versus 61 percent of non-listeners; 97 percent of the listeners were aware that delivery should be done at a health facility versus 82 percent of non-listeners; and 86 percent of listeners versus 75 percent of non-listeners knew the legal age of marriage.

Through Content Advisory Group meetings, radio station personnel have built a working relationship with local health officials. This has resulted in health issues making a greater appearance in other programs, such as in local news broadcasts. Furthermore, aspects of Jeevan ka laagi Swasthya spurred other local media to devote greater coverage of local health issues, including governance and accountability.

Finally, the training and guidance provided by AFN has helped to improve skills among radio station staff with the result that those radio stations now have greater capacity and are in a better position to produce original content in the future.

Challenges

The biggest initial challenge was low technical capacity among the local radio partners. Most radio stations had no experience producing original health programs, having only aired public service announcements or interviews with health workers. While the training and mentoring conducted by AFN greatly increased skills, this responsibility fell to just one or two members of the AFN staff, meaning that adequate time could not be devoted to each radio station. Also, because mentoring was conducted via email and phone, adequate skills transfer was frequently difficult.

In addition to technical skills, the lack of subjective understanding of health issues among radio staff also caused some problems, affecting their ability to edit the material in a coherent manner. For many of the local radio station staff, the research and effort needed to produce evidence-based programming represented an entirely new approach.

There were several instances of local health officials demanding that the program cover health issues beyond Health for Life's focus on family planning, maternal newborn and child health, and sexual and reproductive health. In such cases, Health for Life staff guided the program back to the intended focus.

Internal problems at the radio stations related to management, electricity and resources, among others, affected the regularity and quality of programming, as well.

Because of the additional work required by this program, a number of producers felt that should have received money beyond their regular salaries. In cases where the funds received by station managers did not filter down to the staff, feelings of resentment may have precluded successful implementation. It is unclear, however, to what degree AFN or Health for Life could have intervened in internal management issues.

Conclusion

The *Jeevan ka laagi Swasthya* program achieved its goals of disseminating health messaging, raising awareness of health as a local issue, and built the capacity of community radio stations. Through the Content Advisory Group, the initiative strengthened collaboration between local health officials, the community and local media, setting the stage for future cooperation. Nonetheless, the capacity of partner radio stations remains low and most of them are facing managerial challenges, affecting their efficacy.

Recommendations

The capacity of radio stations must be taken into consideration when being selected. Radio stations should be selected based on their ability to benefit from learning the challenging process of producing original content, and should have a positive attitude towards mentoring. Also, because of the time involved in training, mentoring and supporting local radio staff, it is recommended that fewer stations participate in the future. Furthermore, despite the relative success of the mentoring approach taken by AFN, supporting radio station staff remotely is less than ideal. One or more coordinators who can actually visit and mentor the radio producers should be placed in the region. Similarly, quality needs to be monitored at the regional level, perhaps through a consultant.

Many local radio stations struggle financially, and material support (equipment, human resources, etc.) would be very helpful. This is particularly true regarding salaries, as the program approach demands considerable commitment of time and resources. To that end, it is recommended that each radio station have a producer dedicated exclusively to *Jeevan ka laagi Swasthya*, with the position included in the budget.

Finally, it would be beneficial if the issues raised in *Jeevan ka laagi Swasthya* are promoted among other media, including print and television to create greater coverage and synergy.

Health for Life

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