



1000 Days Campaign Pilot Evaluation Study Report

January 2021



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Acronyms

ANC	Antenatal Care
DFID	Department for international development
FCDO	Foreign, Commonwealth & Development Office
PSI	Populational service international
SAHAN	Somali advocates for health and nutrition
SHINE	Somali health and Nutrition program
SHDS	Somali health and demographic survey
UNICEF	United Nations Children's Fund
WRA	Women of reproductive age

Acknowledgement

The evaluation study and development of this report involved various people whose support and dedication are highly acknowledged. Heart-felt gratitude goes to the study participants who included '1000 days' campaign Facebook page followers and campaign participants. Special appreciation also goes to the campaign's implementation team who have dedicated their time in providing quality awareness videos on ANC, nutrition, and birth spacing.

1.0 Introduction

1.1 Somalia/Somaliland context

Women in Somalia and Somaliland have a one in 20 lifetime risk of maternal death making the maternal mortality rates in Somalia and Somaliland amongst the highest in the world. It is estimated that the maternal mortality ratio is 699 deaths per 100,000 live births (SHDS 2020). Giving birth remains one of the greatest risks in the lives of Somali women given the life-time risk of dying due to pregnancy related causes is approximately 1 in 12 (UNICEF, 2019). Over 70% of Somali women give birth at home under the care of unskilled attendants. Childhood immunization coverage (children who received all basic vaccinations) was only 10.7% (SHDS 2020), only 17% of women received two or more doses of tetanus toxoid during their last pregnancy.

A fair chance in life begins with a strong, healthy start. Unfortunately, many children in Somalia and Somaliland are still deprived of this. 4 in 100 Somali children die during the first month of life, 8 in 100 before their first birthday, and 1 in 8 before they turn five. This accounts for more than 60% of the under-five deaths in the country. More than 80% of new-born deaths are due to prematurity, asphyxia, complications during birth, or infections such as pneumonia, diarrhoea, measles, and neonatal disorders. Use of contraceptive methods is very low with only 7% of married women currently using any method of contraceptive while only 1% currently using modern contraceptive methods even though there is high unmet need of contraceptives with 37% of currently married women wanting to delay pregnancy (SHDS 2020).

Despite the high disease burden and extreme child mortality rates, there is still a low demand for public health services. Data from UNICEF reveals that Somali children under the age of five visit a health facility every fourth year. Low government investment in health services, poor infrastructure and several socioecological factors also contribute to low access and utilization of maternal health services. Family planning which could reduce maternal and new-born mortality is highly unpopular in Somalia. Misconceptions associated with contraceptive use, religious and cultural barriers have been repeatedly identified among reasons that prevent both women and men from accessing reproductive health information and services.

The Somali society is highly patriarchal such that positions of authority are considered an exclusive entitlement of men even at the level of the family unit. Women's roles are typically in most cases confined to domestic and informal labour, while decision making, including those related to reproductive health issues is left solely to the head of the family, who is the man. Due to this longstanding tradition, young girls are taught that submission to her husband is paramount to the success of her marriage.

FCDO (formerly DFID) is implementing a health system strengthening programme under the name Somali Health and Nutrition (SHINE) from 2016 to 2021. This program has both a supply side strengthening and demand creation components. PSI is implementing the demand creation for health services, called SAHAN (Somali Advocates for Health and Nutrition) component which aims to increase utilization of reproductive, nutrition, child, and maternal health services and to promote healthy behaviour change. SAHAN uses an adaptive, evidence-based, participatory design process to better understand the persistent barriers to uptake of health services and health-seeking behaviour and develop and test innovations to increase demand. These strategies target both internal factors to an individual, social, and physical environment factors that influence or constrain health seeking behaviours.

1.2 1000 Days Campaign Intervention Summary

The 1000 days of child life is vital time for the health, physical and mental development of any child. SAHAN's 1000 days campaign was a mass media awareness program that targeted mothers and their influencers from interpersonal to community level, motivating them to be a part of bigger campaign to change health seeking behaviours of mothers. Using mass media allowed for wide dissemination of key messages at the larger community. Further engagement was done with audiences through social media, particularly Facebook where

1000 Days digital posters and videos were uploaded. The campaign was intended to have also following objectives: -

- Increase the knowledge of women of reproductive age (WRAs) and their influencers on maternal health (health during pregnancy, childbirth, postpartum period and birth spacing) and child health.
- Increase the knowledge WRAs on the five pillars of safe motherhood.
- Dispel myths and misconceptions inhibiting the use of maternal and reproductive health products and services.
- Create demand for maternal and child health services in the public and private sector.
- To sensitize mothers and caregivers of children under 5 on the importance of child immunization.
- Promote healthy feeding and good nutrition practices among pregnant women and care givers of children under five.
- Promote exclusive breast feeding for the first 6 months and continuation of supplemental feeding until 2 years.

2.0 Objectives of the evaluation study

Objectives of this study was to determine the effects of the 1000 days campaign on community's awareness of maternal health and to document successes and failures.

2.1 The Specific Objectives:

- To determine the number of people reached.
- To find out the Somali community's view of the intervention.
- To find out the effect of the intervention on its audience.
- To find out which SAHAN thematic area was most liked appealing (ANC, birth spacing, or nutrition)
- Document successes, failures and lessons learnt.

3.0 Methodology

The survey consisted of both quantitative and qualitative data collection. The quantitative data collection was conducted on Facebook using digital survey data collection. The questionnaire was posted on the 1000 days Facebook page and sponsored for 7 consecutive days to reach a large number of Facebook users. Only those who volunteered to fill out the questionnaire were considered for analysis.

3.1 Sampling

The 1000 Days Campaign Facebook page had more than 2,000 followers during the data collection period. A sample of 200 study participants out of these were targeted during 7-day sponsorship of the study. After the sponsorship period, the study questionnaire link was removed.

3.2 Data collection

The questionnaire was minimized as much as possible to capture the main objectives of the study. This was because as data was collected online, it was presumed that volunteers would not want to spend too much time answering a questionnaire online. In addition to the online questionnaire, some secondary data analysis and qualitative data collection was done.

3.3 Cleaning and Validation

The data cleaning and validation was part of the data collection. A structured questionnaire with data validation was used to avoid incomplete or wrong data as much as possible. All submitted questionnaires were checked for validity and completeness. Incomplete or wrongly filled questionnaires were disregarded.

3.4 Ethical Considerations

Informed consent was obtained from each participant before the interview. The consent form was uploaded and displayed before the questionnaire for all participants prior to completing the questions. Only those who were willing to participate were involved. The right not to respond or refuse participation was respected. Personal privacy and cultural norms were also respected.

4.0 Key findings:

4.1 Demographic information

4.1.1 Study participants per region

The post to take part in the study reached 58,479 Facebook users during the 7-day data collection period with the link being liked 1,161 times. 462 messages were also received from Facebook users and with the post receiving 88 reactions (mostly likes and shares). There was no negative feedback for this post; in other words, there were no users who disliked, clicked hide or reported the post as spam. A total of 191 Facebook users participated the study, but only 167 persons submitted a complete questionnaire (Meaning N=167). Analysis is therefore based on the responses provided by the 167 respondents. Majority of the study participants were from Banadir (94%) and Marodijeh regions (6%).

4.1.2 Gender and age of respondents

54% of study participants were women while 46% were men. 87% of the participants were young (i.e. less than 35 years of age).

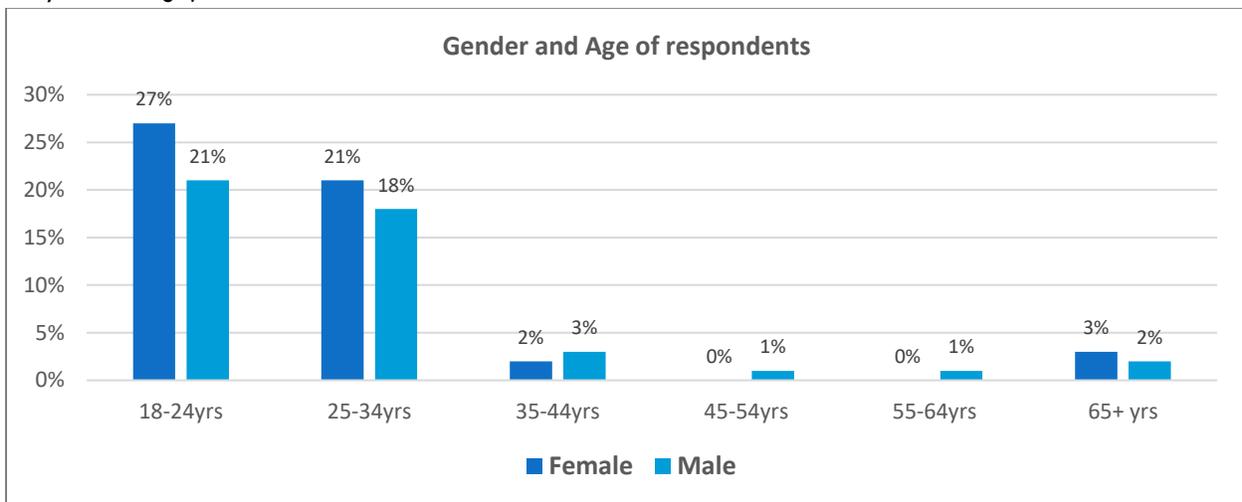


Figure 1: Gender and age of respondents

4.1.3 How respondents found out about the 1000 days campaign

50% of the study participants found out about the 1000 days campaign through the campaign's Facebook page while 26% were told by someone. 9% found out through radio while the rest found out through TV and other media channels.

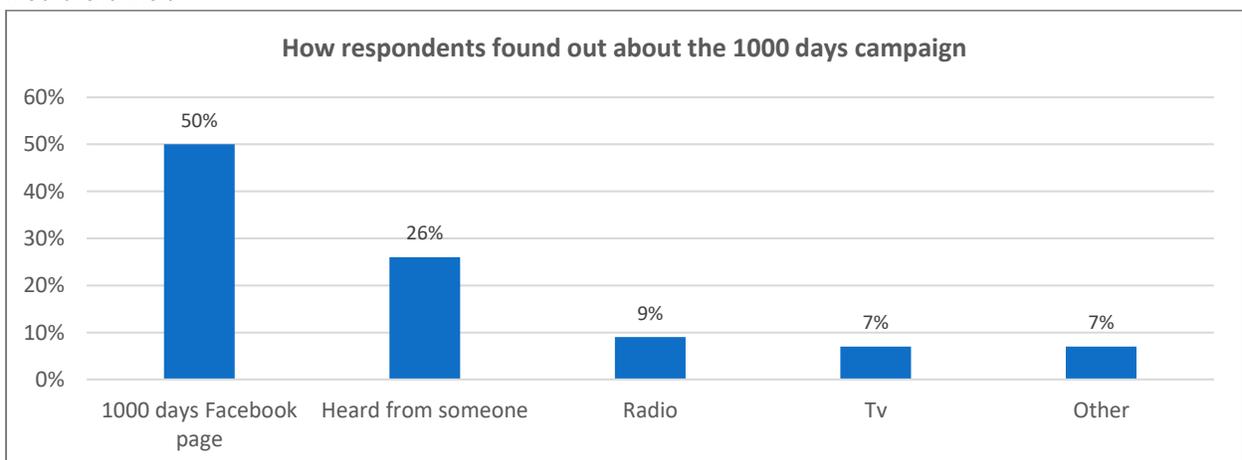


Figure 2: How respondents found out about the 1000 days campaign

4.2 Respondents' view of the 1000 days campaign

82% of the study participants said that 1000 days campaign was very interesting meaning the participants had a positive attitude towards the campaign.

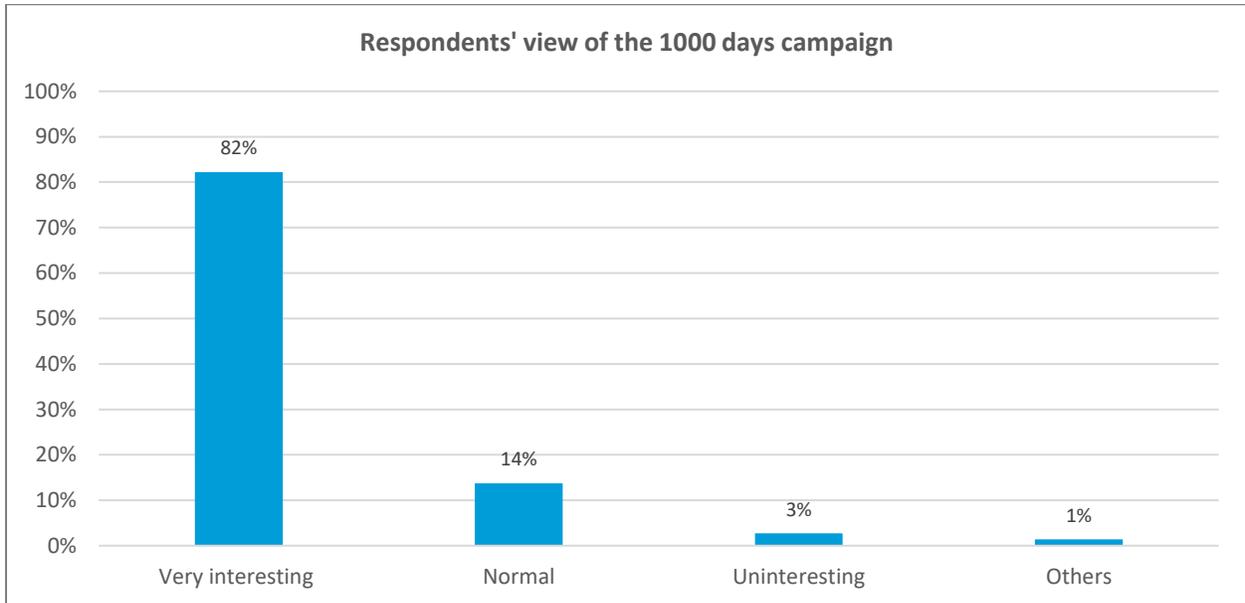


Figure 3: How did you see 1000 days campaign

4.3 Respondents' view on using social media to educate Somali people on child and maternal health

93% of the respondents agreed that social media was a good channel to educate Somali people on child and maternal health.

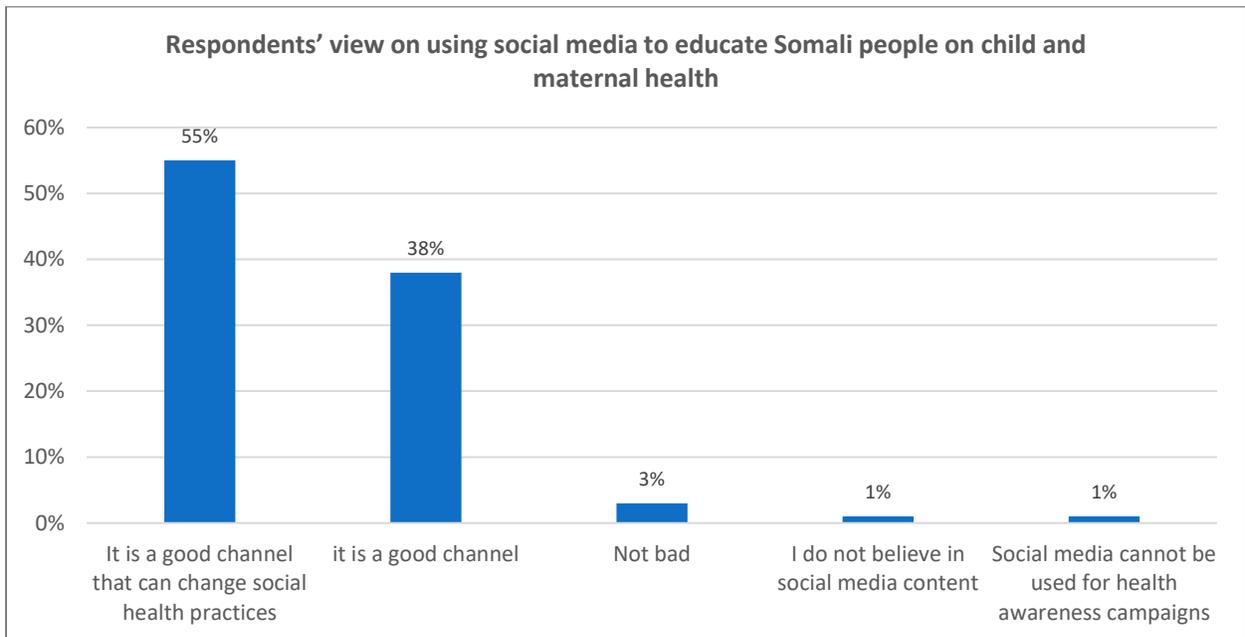


Figure 4: Respondents' view on using social media to educate Somali people on child and maternal health

4.4 Most popular campaign messages

The 1000 days message from model parents was most liked (52%) whereas the 26% of the respondents liked the message from the doctor.

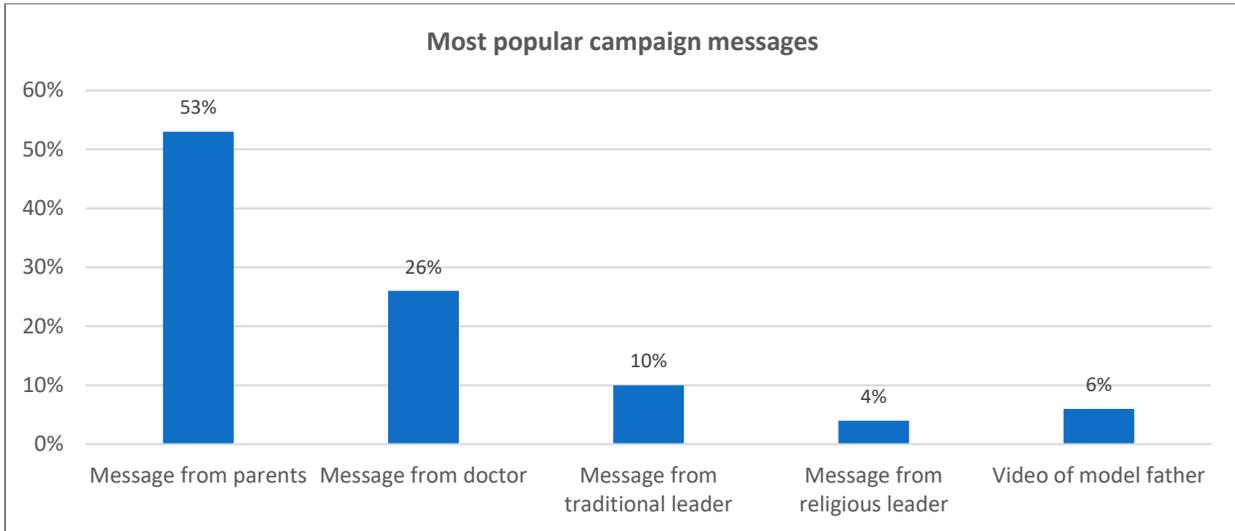


Figure 5: Campaign messages most liked

4.5 Messages reposted by respondents on Facebook and other social platforms

Study participants were asked if they reposted the 1000 days campaign messages on their Facebook wall or in other social platforms. 70% of participants responded to the affirmative. Among those of responders who reposted messages, 17% reported that they have reposted message from doctor and 11% message from traditional leaders.

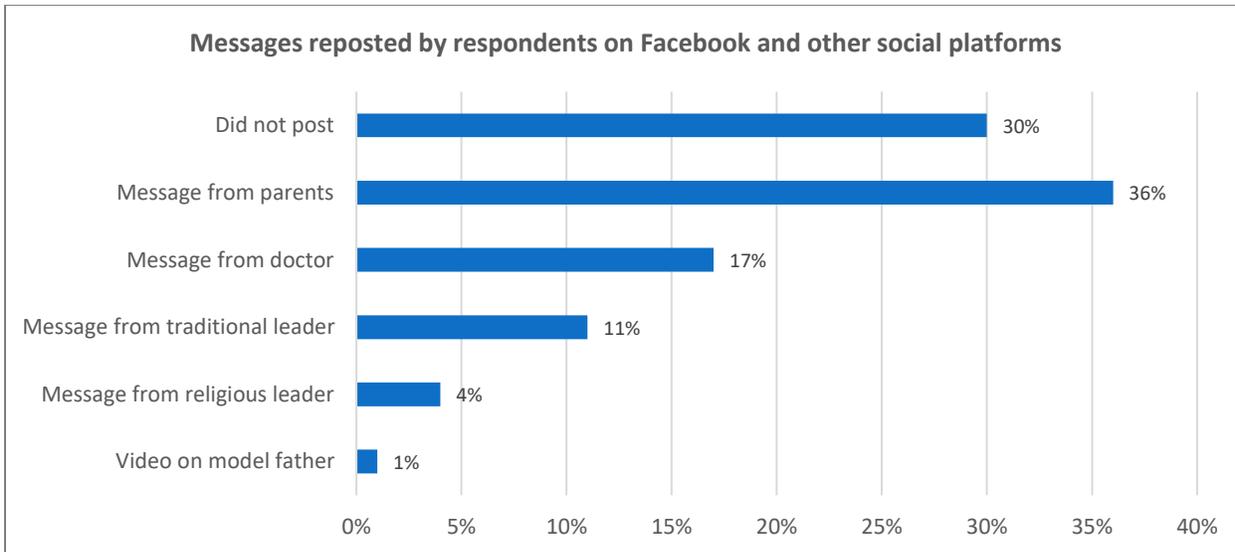


Figure 6: Did you repost one of the 1000 days campaign messages

4.6 1000 days message that made respondents take an action

51% of the respondents stated that message from the doctor motivated them to take an action. The doctor message talked about the mothers' needed preparation during pregnancy, childbirth, and the complications that can occur during pregnancy. The message also encouraged mothers to make antenatal and postnatal visits to

nearest health facility. Another 26% of the respondents reported that message by parents made them act, while 12% reported that they did not take any action.

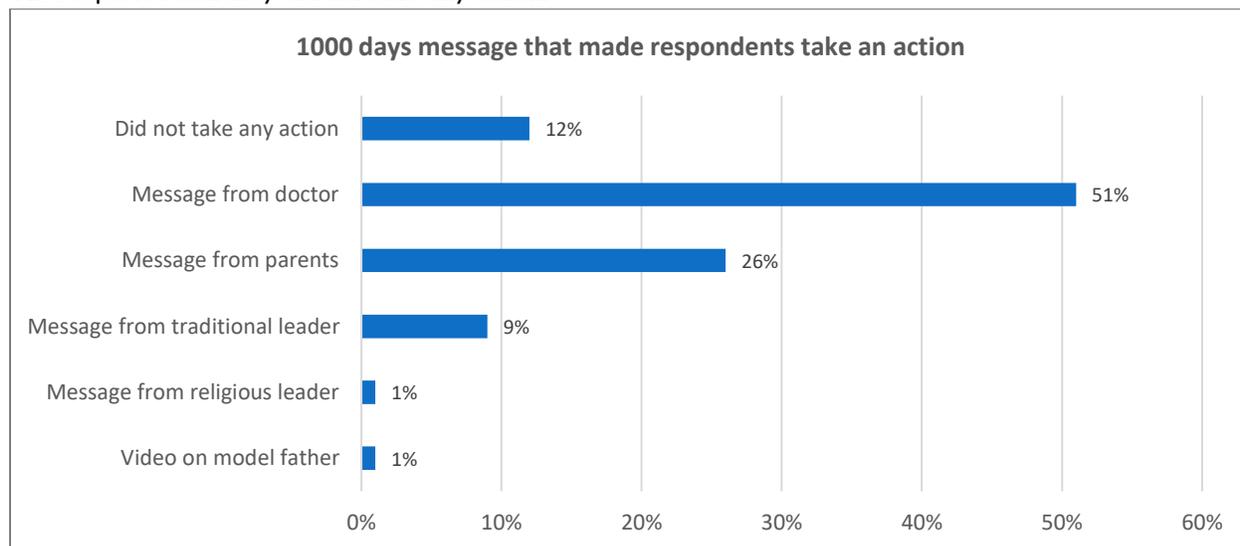


Figure 7: the media campaign which made you take an action

4.7 Secondary data analysis from 1000 days Facebook page

All comments, views, reactions, and followers were counted to analyse overall engagement. The Facebook page had 2,628 users. The total number of views for all 1000 days page post was recorded at 2,462,800 views. The total number of post engagement for all posts was 615,404 engagements¹ with more than 20,100 reactions (i.e., likes, loves, laugh emoji etc). The total number of post comments and shares were 1,326 and 6,071, respectively.

4.7.1 Secondary data analysis of ANC posts

The last ANC post had lots of reactions and reached a lot of users. The overall post engagement was 110,999, with 393,843 views. Overall post reaction was 1,315 reactions of likes, loves and laugh emojis. Followers also put their feedback and comments to the posts. One of the respondent's comment said, *"it is good strategy to provide a pregnant mother health related awareness through social media"*. Another also strongly supported the use of social media by saying, *"health awareness program is something that is always needed"*

4.7.2 Secondary data analysis of birth spacing posts

Birth spacing posts had 44,575 post engagements with 215,579 views and 1,483 reactions. The post comments were 121 with 559 post shares. Users commented and feedback to the posts. One of respondents stated that, *"Birth spacing is good for both families and nationwide"*.

4.7.3 Secondary data analysis of nutrition posts

Post engagements for nutrition were 128,433 with 30,211 views, 1,259 reactions, 181 comments and 851 shares by Facebook users. Most of comments from users were positive and they were all encouraged child nutrition. One respondent said, *"it is good to breastfeed the children. A child who is well breastfed is not the same as one who does not get enough breastfeeding"*.

¹ **Post Engagements** are the number of times people have **engaged** with anything posted on your Facebook Page. **Engagements** can be anything from likes, to comments, to shares. **Engagements** are very important for any business using Facebook.

5.0 Lessons Learnt, Conclusion and Recommendations

5.1 Lessons Learnt

- Social media is an effective channel for health awareness campaigns.
- Messages from and endorsed by doctors were most effective for respondents to take actions.

5.2 Conclusion

This study showed that social media, particularly Facebook can be used as channel to communicate health messages to increase awareness of the target audience. A large number of the target audience can be reached through social media. 1000 days Facebook page had 2,462,800 views with ANC having most views with 393,843 views. Overwhelming majority (82%) of Facebook users who participated in this study reported that 1000 days campaign was very interesting and 93% of them agreed that social media platforms are very good means of educating the community. The messages in the posts had call to action which enabled 51% of the respondents to take actions after they saw doctors' messages in the page.

5.3 Recommendations

- Study respondents recommended that more health messaging contents should be continually uploaded to the 1000 days Facebook page.
- Future programming should continue to explore and use social media as a channel of communication for health messages as it has proven to be an effective channel.

6.0 Annexes

6.1 Data collection tools

6.1.1 Quantitative Questionnaire for 1000 days

Question	Options	Skip
Demographic Information		
1. Region		
2. Town		
About 1000 days campaign		
How did you hear first?	<ol style="list-style-type: none"> 1. First 1000 days campaign Facebook page 2. Someone else told me. 3. Campaign video 4. Campaign posters 5. Campaign Post 6. Radio 7. TV 8. Didn't hear before 9. others 	Single Choice If Select # 8, quit the interview
1. How did you see about first 1000 days campaign?	<ol style="list-style-type: none"> 1. Very interesting 2. Normal 3. Not interesting 4. Others 	
2. What do you think about using social media as means of educating community about maternal and child health?	<ol style="list-style-type: none"> 1. A method that health behaviour can be changed. 2. It is good method. 3. Not bad 4. I do not believe social media contents. 5. I believe social media cannot be used health awareness campaigns 6. Others 	
3. Which campaign messages did you like most?	<ol style="list-style-type: none"> 1. Message from parents 2. Message from traditional leader 3. Message from religious leader (Super Sheikh) 4. Message from doctor 5. Drama on model father 6. Others specify 	
4. Did you repost one of the 1000 days campaign messages to your Facebook wall or in another social platform?	<ol style="list-style-type: none"> 1. Post Message from parents 2. Message from traditional leader 3. Message from religious leader 4. Message from doctor 5. Drama on model father 6. Not posted any 	
5. Specify the media campaign which makes you take an action?	<ol style="list-style-type: none"> 1. Post Message from parents 2. Message from traditional leader 3. Message from religious leader 	

	4. Message from doctor 5. Drama on model father	
6. Will you recommend doing more child and maternal health campaigns through social media platforms?	1. Yes 2. No	
7. Any recommendations		

6.1.2 Facebook analytics of 1000 days Campaign Page

No	Description	Total
1	Number of followers	2,628
2	Number of views on 1000 days page (Reach)	2,462,800
3	Number of loves on 1000 days page	1,802
4	Number of likes on 1000 days page	18,275
5	Number of Post Engagement on 1000 days page	615,404
6	Number of angry emoji on 1000 days page	16
7	Number of laugh emoji on of 1000 days page	53
8	Number of comments on 1000 days page	1,326
9	Number of shares of 1000 days page	6,071

6.1.3 The final post for ANC

No	Description	Total
1	Number of Post Engagement	110,999
2	Number of views of the final post for ANC (Reach)	393,843
3	Number of loves of the final post for ANC	101
4	Number of likes of the final post for ANC	1,200
5	Number of Messaging Conversations Started of the final post for ANC	0
6	Number of angry emoji of the final post for ANC	2
7	Number of laugh emoji of the final post for ANC	12
8	Number of comments of the final post for ANC	19
9	Select randomly three comments and then write down; what did they say?	<ol style="list-style-type: none"> 1. It is a plan that community needs which enable mothers to get health information on their mobile phones and this deserved to be supported (Ayanle) 2. This is required every time (Asma Abdulqadir) 3. It will help alleviate pain of giving birth (Istaahil Maxamed)
10	Number of shares of the final post for ANC	563

6.1.4 The final post for Family Planning

No	Description	Total
1	Number of Post Engagement	44,575
2	Number of views of the final post for birth spacing (Reach)	215,579
3	Number of loves of the final post for birth spacing	78
4	Number of likes of the final post for birth spacing	1,400

5	Number of Messaging Conversations Started of the final post for birth spacing	741
6	Number of angry emoji of the final post for birth spacing	1
7	Number of laugh emoji of the final post for birth spacing	3
8	Number of comments of the final post for birth spacing	121
9	Select randomly three comments and then write down; what did they say?	<ol style="list-style-type: none"> 1. Thanks to All, please men give sympathy to women and give her rest (Kubey Yare) 2. Child spacing is very good for the family and the country (Hamda Aaden) 3. Thanks to Allah, this is truth mentioned in Quran and May Allah reward the Sheikh (Ikhlaas Ali Osman)
10	Number of shares of the final post for birth spacing	559

6.1.5 The final post for nutrition

No	Description	Total (People)
1	Number of Post Engagement	128,433
2	Number of views of the final post for nutrition (Reach)	30,211
3	Number of loves of the final post for nutrition	151
4	Number of likes of the final post for nutrition	1,100
5	Number of Messaging Conversations Started of the final post for nutrition	2,751
6	Number of angry emoji of the final post for nutrition	2
7	Number of laugh emoji of the final post for nutrition	6
8	Number of comments of the final post for nutrition	181
9	Select randomly three comments and then write down; what did they say?	<ol style="list-style-type: none"> 1. Thanks to Allah and Thank you for bringing it to us (Sundus Maxamed Muuse Jiir) 2. Thanks to Allah, it is good, even children who are fully breastfed are not same as those breastfed in shorter time (Umu Mushtaaq) 3. I strongly support to give mothers regular health education (Maryamo Cabdulqaadir)
10	Number of shares of the final post for nutrition	851