

## SOCIAL MOBILIZATION AS A STRATEGY TO HEALTH EDUCATION CAMPAIGN AND PROGRAMMES

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### ***ABSTRACT***

*Sustainable social and behavior change requires collaboration at multiple levels, as partnerships yield stronger impacts than isolated efforts. Social mobilization is a process to engage a wide range of traditional, community, civil society and opinion leaders around a common cause or issue. Expanding beyond community engagement as a focus, social mobilization reaches out to non-governmental organisations, professional groups/networks, youth groups, women's groups, community-based organisations, faith-based organisations, professional networks and the private sector to catalyse these different groups to take action and/or support change a common cause (e.g. immunization or Vitamin A supplementation; back to school campaigns etc.). Through alliance-building and partnerships often combined with media campaigns, social mobilization also engages and motivates various partners at national and local levels to raise awareness of and demand for a particular development objective and to provide sustainable, multi-faceted solutions to broad social problems. Therefore, strategies of social mobilization and community engagement include using advocacy to mobilize resources, media and leaders to raise awareness, create public spheres for debate and build partnerships. This study hereby seeks to investigate social mobilization as a strategy to health education campaign and programmes.*

**KEYWORDS: Social mobilization, community mobilization, health education campaign/ programmes**

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### **Introduction**

Social mobilization is the process of bringing people together to raise their awareness and demand for a particular programme, to assist in the delivery of resources and services, to strengthen community participation for ownership, sustainability and self-reliance. It is a means of transforming target populations from being recipients of benefits to being active participants in development

processes through **Information Education Communication (IEC)** and **Behavioral Change Communication (BCC)**. It is the process of enabling individuals to build their potentials to improve their quality of life, social-economic wellbeing and become aware of and articulate their rights/needs and to use community organization to bring about the desired changes.

**United Nations Children's Fund (UNICEF, 1101X)** refer to social mobilization as a process that engages and motivates a wide range of partners and allies at national and local levels to raise awareness of and demand for a particular development objective through dialogue; members of institutions, community networks, civic and religious group and others work in a coordinated way to reach specific groups of people for dialogue with planned messages; in order words, social mobilization seeks to facilitate change through a range of players engaged in interrelated and complementary efforts. it is a process that raises awareness and motivates people to demand change or a particular development; it is mostly used by social movements in grassroots groups, governments and political organization to achieve a particular goal, in most cases, the process of social mobilization takes place in large gatherings, such as processions, demonstrations, marches and mass meetings and it is used by organizations to facilitate change.

**WHO (1101L)** saw social mobilization as the process of bringing together all feasible and practical intersectoral allies to raise people's knowledge of and demand for good quality care and health care in general, assist in the delivery of resources and services and also strengthen community participation for sustainability. In any health intervention programme, it is essential to educate and mobilize communities to be engage in bettering their health behaviors and access to healthcare (**Unit for Sight International, 1101X**). Social mobilization is the tool to health education programme. Social mobilization is the sole responsibility of health **Education Officer** who is also known as the **Social Mobilization Officer**.

Health education is that part of healthcare that is concern with promoting healthy behaviors. Through health education, people are helped to understand their behaviors, how these behaviors affect their health and his encourage them to make their choices for leading health lives. **Health Education** is the sum of all experience that favourably influences knowledge, attitudes and practices relating to individual and community health; it focuses on people's ways of lives and behavior by using a wide range of different educational methods and strategies to lead them to make the right decision for themselves about their health (**Briggs, 11010**).

Health education campaign is a type of enlightenment which attempt promotes public health by making new health interventions available and possible. **WHO (1100M)** noted that many disease and medical problem have a "**Health Education Campaign**" Or "**Awareness Campaign**" associated with them. **WHO** continued that the goal of such a campaign was to make people conscious of the impact of disease and to provide them the information about the disease since it was important for the public to learn more about them. Examples of such campaign are measles campaign, polio eradication campaign, smoking cessation campaign, **HIV** prevention campaign, exercise campaign and yellow fever campaign.

**Achalu (11001)** wrote that health education programmes (campaign) consist of two major components, which include the educational process and the information content. Noting that the educational process was concerned with human motivation, development process, nature of learning, individuals potentials and expectation; while the information content involves the presentation of fact or health information about the prevention and management of various health problem to the people. To achieve these, social mobilization strategy is used. In this paper, social mobilization as a tool to health education campaign/programme is discussed under the following main headings: introduction, the need for social mobilization activities in health education campaign/programme and social mobilization strategy.

## **The Need for Social Mobilization Activities in Health Education Campaign/Programmes**

During health education campaign, awareness is created on a particular health issue to encourage individual and community acceptance and participation in that programmes is order to improve and promote the health of the people. For example, during immunization programmes, health education is usually used to create awareness about the programmes to the people to encourage them to accept, be involved and participated in the programme. Health education campaign is used to provide health information to the student for positive behavioural change to improve their status.

Social mobilization activities and strategy help the professional health education officer to know where to start and how to go about the health education campaign with individuals, families, organizations and the whole community (Admasu, 1101v). Most of the world's major health problems and causes of premature deaths are prevented through awareness creation for community involment and participation to achieve positive human behavioral change (Admasu). The health education officer has the know-how and technology through health education messages, but these messages have to be transformed into effective action at the community level. Social mobilization is the tool the health education officer would use to systematically transform the messages into effective action in the community to achieve positive behavioral change.

### Social Mobilization Strategy

Social mobilization involves planned actions, process and strategy to reach, influence and involves all relevant segment of society across all sectors from the national to the community levels, in order to create an enabling environment, effective positive behavior and social change (UNICEF, 1101i). The social mobilization strategy has 111 main components namely, **Advocacy**, **Community Mobilization** and **Programme Communication**.

1. **Advocacy:** This is the act or process of supporting a cause or issue; it is a set of targeted actions in order to built support for a cause or issue, influences others to support the cause and try to influences or change legislation that affects the cause or issues (Omoru, 11010). UNICEF (1101i) referred to advocacy as a method of winning the support of key stakeholders or constituency for the sake of influencing policies to bring about social change. It is the art as well as process of seeking support for a cause of an issue that facilitates the attainment of desire change; essentially, it is a tool for influencing development partners/donors, policy makers, community and institutional leaders targeted for prompting favorably policy formulation and adoption. Advocacy is as necessary precursor to getting the entire community to participate in programs/campaigns designed to bring about desirable changes in the lives of the people by securing the support of the leaders first. Advocacy is an important component of social mobilization which involves convincing, persuading and motivating individuals and groups that there is a programme/problem and that there are appropriate policies and strategies which could be adopted for implementing the programme and solving such problem.

### Process/steps of Advocacy

Omoru (11010) and UNICEF (1101i) enumerated the process of advocacy as follows

- i. **Need analysis:** Accurate information on and in-depth understanding of the programme, the implementation, time of the implementation and personal involved, should be obtained. Stakeholders analysis (identifying groups to be visited) is also conducted, these are, the primary stakeholders (the people who are directly affected), secondary stakeholders (people/intermediaries who are being used to reach the communities) and the keys stakeholders (people who influences the success of the intervention);
- ii. **Formulation of strategy:** in carrying out advocacy, strategy to be used is formulated which could be:
  - a. **Persuasion**, which is the act, process, method, art, or power of convincing and influencing individuals/organizations to accept and

- support a cause.
  - b. **Education**, which is a process of providing targeted at individuals and organizations to improve knowledge aim at behavioural change;
  - c. **Networking**, which refers to a conscious coming together of people from diverse backgrounds and affiliation in pursuit of a common goal or interest and it comprises individuals, groups or organization that agree to collaborate or assist one another;
  - d. **Negotiation**, which is the process of arranging or bargaining for the purpose of achieving mutual agreement;
- iii. **Coalition/constituency building**: it is important to involve many interest groups, network with others of similar vision, have clear roles/groups norms, form a team of component and committed persons and appoint a team leader
- iv. **Message and materials development**: put together the content and ideas to be conveyed and used to persuade the audience, the language to be used, time, place, consistency of the message and choose the credible member of the team to deliver the message. The team should be equipped with a comprehensive advocacy kit containing, for example, depending on the programme, flyers, posters, calendars, purposively designed file jackets/lectures bags, car stickers, badges, fez caps, t-shirts, exercise books and biro;
- v. **Identification of communication channels**: identify the channels and means through which the message will get to the target audience, for example, local (drama groups or church announcements), mass media (radio or television spots) or social media. Good media relationship is important and necessary;
- vi. **Implantation of advocacy activities**: book an appointment with group/groups to be visited via letters, contact persons, e-mail, telephone and any other means, confirm the appointment and arrive early (about ix minutes before the agreed time). Team leaders should introduce self and other team members, express gratitude for the audience. Deliver the advocacy materials, create an opportunity for response, thank the leaders/stakeholders for the time and anticipated support and use agreements reach for publicity;
- vii. **Monitoring and evaluation of advocacy activities**: there is the need to take stock of the advocacy efforts, this helps the team to know which strategies were accurate and which one needed to be reviewed; and
- viii. **Continuity and sustainability of advocacy activities**: the advocacy activities should continue with what works and should be sustained to achieve the aims of reaching individuals and the public for effective acceptances involvement and participation in health programmes for positive behavioral change.

## 2. **Community mobilization**

This is the use of deliberate, participatory processes to involve local institutions, local leaders, community groups and members of the community to organize for collective actions towards a common purpose. UNICEF (1101) defined community mobilization as a capacity building process through which individuals, groups, or organizations, plan, carry out and evaluate activities on a participatory and sustained basis to improve their health and other needs, either on their own initiative or stimulated by others. It is concerned with mobilizing human, financial and technical resources to support large scale implementation that will benefit communities. Achalu (1100) noted that community mobilization was the key to success of any health programme, which involves bringing the members

of the community together for a given purpose usually for the benefits of the community.

### ***Main purpose of community mobilization***

*Achalu (2001)* wrote that the main purposes were to:

- Create a awareness of health programmes and encourage participation;
- Educate and inform community members about health problems and gain support for health programmes; and
- Educate and motivate them to prevent disease and promote community health.

### ***Strategies for community mobilization***

UNICEF (2001) discussed the strategies for community mobilization as follows;

*i. Community dialogue:* this is the process of engaging communities in discussion for participation and ownership for behavior and social change. It is the exchange of information between 11 or more people with the ultimate aim of reaching agreement over health issues concerning. The steps in carrying out community dialogue are as follows:

- **Step 1:** Establish a company based facilitation team. There should be:
  - Gender balance;
  - Range of skills;
  - Inside-outside mix, that is, local Government and community members working together; and
  - All trained to facilitate dialogue.
- **Step 2:** Issue identification by the facilitation team:
  - Within the partner/Governments area or interest, what the community thinks is important;
  - establish a general area of focus for the community dialogue; and
  - For example, within immunization plus days, to focus on immunization of infants in that community
- **Steps 3:** first, obtain permission and support from leaders to walk in the community, then carryout stakeholders' analysis, that is, know:
  - The powerful groups in the community;
  - The vulnerable groups;
  - Who already has a voice;
  - Who needs to be heard; and
  - The keys leaders.
- **Step 4:** small group discussion with the support of community leaders:
  - Bring women together to discussed their situation and vision for the future. Udiono I. Ekpa, Usoro E. Harison & Comfort P. Udobang
  - Bring young people together;
  - Bring other relevant groups together; and
  - Find innovative ways to help people express the ideas (drama, mapping, etc.)
- **Step 5:** larger group exchange:
  - Find "safe spaces" to bring small group together to share the ideas arising from small-group discussion;
  - Women discussing with youths, youths discussing with elders, etc.; and
  - Listening is as important as speaking.

- **Step 6:** development of community action plan:
    - Leaders from each small groups form a committee to draft an action plan that addresses the issues;
    - Roles and responsibilities for implementing the plan are assigned to each groups;
    - The plan is re-presented to the community for approval.
  - **Step 7:** Presenting the community action plan to local Government for support:
    - Interpersonal communication;
    - Community or rural radio; and
    - Mass media to give community plans impact.
- ii. Education and entertainment:**
- a. Education within the context of community mobilization refers to the process of informing and getting people to know about a health issue with the ultimate aim of bring about positive behavioral change; and
  - b. Entertainment refers to the use of fun, amusement, arousal and pleasure for the purpose of education and awareness creation. It is also referred to as Infotainment, Edutainment, and Entereducate.
- iii. Networking:** this refers to a conscious coming together of people from diverse backgrounds and affiliation in pursuit of a common goal or interest and it comprises individuals, groups or organizations that agree to collaborate or assist one another.
- iv. Negotiation:** this is the process of arranging or bargaining for the purpose of achieving mutual agreement.
- v. Social Mobilization Action Team (SMAT):** This is a team energetic, highly respected and committed community members carefully selected through the guidance of community leaders to facilitate the participation of the entire community in any health development programs, structures and plans of actions.
- vi. Partnership:** this refers to a conscious and mutual relationship between 11 or more individual or organizations for the purpose of achieving a common health goal.

### **Benefits of community mobilization**

UNICEFF (11011) outlined the benefits as follows:

- Increase community, individual and group capacity to identify and satisfy their needs
- Improve programme design, quality and results;
- Improve programme evaluation;
- A cost effective way to achieve sustainable results and
- Increase community ownership of a programme.

### **3. Programme communication:**

This is the act of carrying out s awareness creation and enlightenment activities on a particular health programme through Information, Education, and Communication (IEC). Its main purpose is the generation of information or release ready-made information, specific key messages and distribution through all available communication methods. It could be regarded as information campaign or communication project, which provides the community, groups, and individuals relevant information and motivation through appropriate media/channels mix including interpersonal communication, group, mass media like communication and use of participation (UNICEFF, 11011).

Examples of IEC strategies are design, packaging and production of appropriate radio/television programmes, jingles, news, spots shows, documentary films, news papers articles, posters, books, newsletters, leaflets, pamphlets, stickers, banners or even messages on items like t-shirts, caps and bags.

Programme communication is a research-Based consultative process of addressing knowledge, attitude, and practices through identifying, analyzing and segmenting audiences and participants in programmes and by providing them with relevant information/motivation through well defined strategies using an appropriate mix of interpersonal, group and mass media channels, including participatory methods (UNISEF, 1100L).

### **Conclusion**

Social mobilization is a tool to health education campaign/programme. In any health intervention or health-related programme, it is the tools used by professional health education officers to hand down key or specific messages through Information Education Communication and Behavioral Change Communication to individuals, groups and community in order to accept be involved and participate in the programme to encourage ownership/sustainable and positive behavioral change. In health education, social mobilization strategy helps the health education officer to know where to start, what to do, who to meet with and how to go about the health education campaign.

### **Recommendations**

The following recommendations were deemed necessary:

Social mobilization should be actively involved by all, including civil society, traditional, community and opinion leaders. With this there will be wider scope of awareness on the issue at hand as well as giving a fast solution to the challenge faced. Social mobilization should be the type that reaches out to non-governmental organisations, professional groups/networks, youth groups, women's groups, community-based organisations, faith-based organisations, professional networks and the private sector for effective service delivery. Community mobilization should create opportunity for Community dialogue where communities are engaged in discussion for participation and ownership for behavior and social change. Education and entertainment are also welcome as there is need to inform and get people to know about a health issue with the ultimate aim of bring about positive behavioral change.

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