

2-week digital health campaign on social media significantly improved contraceptive knowledge and self-efficacy among youth in Burkina Faso, Côte d'Ivoire, and Senegal.

Leveraging African social norms and gender-sensitive digital health strategies to enhance contraceptive knowledge and self-efficacy among youth in Burkina Faso, Côte d'Ivoire, and Senegal.

Philip Massey*, Nikolas Wianecki*, Leona Ofei*, Kate Crespi*, Rabiadou Sangare**, Deffa Wane**, Mbatiao Diaw**
 *University of California, Los Angeles (UCLA), **Réseau Africain d'Éducation en Santé (RAES)

PURPOSE

To enhance contraceptive knowledge and self-efficacy among young adults through gender-sensitive digital health strategies.

METHODS

Participants: 492 youth aged 15-24 recruited online from Burkina Faso, Côte d'Ivoire, and Senegal.

Intervention: Participation in a 2-week digital health campaign that provided educational information on issues about sexual and reproductive health. Participants were randomized into Facebook groups with different message strategies, including content delivered by peers, influencers, and a regional NGO.

Data Collection: Baseline and endline surveys with measures including contraceptive knowledge (score 0-12), self-efficacy (scale 0-10), and self-reported contraceptive use (yes/intend to/no).

Analyses: Paired t-tests to compare baseline and endline measures of knowledge, attitudes, and self-efficacy.

TABLE 1. Study Inclusion Criteria

Age	Participants aged 15-24
Residency	Residents of Senegal, Côte d'Ivoire, or Burkina Faso
Social Media	Active use of Facebook
Language	Proficiency in reading and writing French
Screening	Systematic check to remove duplicate and fake accounts
Final Eligibility	Participants with active and verifiable Facebook accounts

CONCLUSION

The C'est La Vie (CLV) digital health campaign improved contraceptive knowledge and self-efficacy among youth in Burkina Faso, Côte d'Ivoire, and Senegal.

By leveraging gender-sensitive and culturally relevant digital strategies, the campaign engaged young men and women, challenged gender norms, and increased self-reported SRH service use.

Findings highlight the potential of targeted digital health interventions to drive meaningful changes in SRH behaviors and attitudes. Future efforts should tailor messages to cultural contexts, engage men more effectively, and evaluate the scalability of these strategies for sustained impact.

RESULTS

Enhanced Contraceptive Knowledge: Both female and male participants showed significant gains in their contraceptive knowledge from baseline to endline, across all message strategies, with males demonstrating slightly higher improvement (**Figure 1**).

Improved Self-Efficacy: Participants, especially males, showed increases in self-efficacy around family planning methods, indicating greater confidence post-campaign, across all message strategies (**Figure 2**).

Positive Attitude Shifts: There was a shift in attitudes, with increased disagreement with the statement that "contraceptives should only be used by women," challenging traditional gender norms (**Figure 3**).

Increased Contraceptive Use: The proportion of male participants reporting contraceptive use increased notably, while females showed a significant rise in their intention to use contraceptives (**Figure 4**).

FIGURE 1. Knowledge Score Changes by Gender, 2024

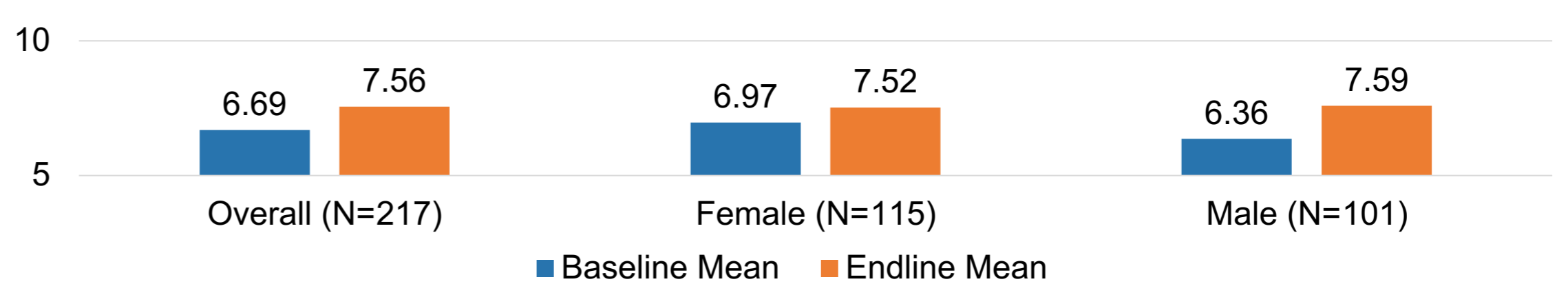


FIGURE 2. Self-Efficacy Score Changes by Gender, 2024

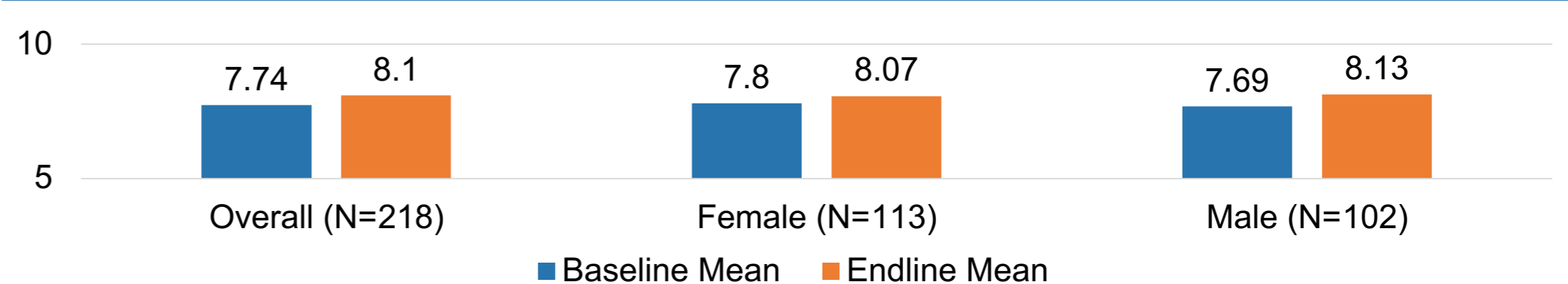
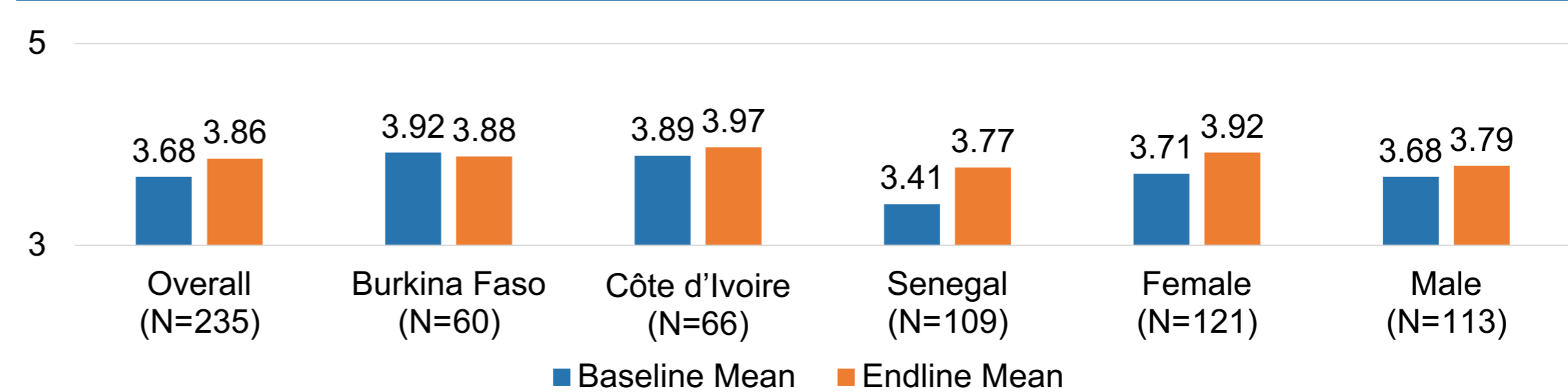


FIGURE 3. Changes in Agreement with the Statement 'Contraceptives Should Only Be Used by Women' 2024



Note: Participants rated their agreement with the statement on a scale from 1 (strongly agree) to 5 (strongly disagree), with higher scores indicating greater disagreement.

FIGURE 4. Percentage point change in Contraceptive Use from Baseline to Endline, 2024

