

---

2-28-2023

## Advancing Social and Behavior Change Measurement for Family Planning—Slide deck

Breakthrough RESEARCH

Follow this and additional works at: [https://knowledgecommons.popcouncil.org/focus\\_sexual-health-repro-choice](https://knowledgecommons.popcouncil.org/focus_sexual-health-repro-choice)

**How does access to this work benefit you? Click here to let us know!**

---

### Recommended Citation

Breakthrough RESEARCH. 2023. "Advancing Social and Behavior Change Measurement for Family Planning—Slide deck," Breakthrough RESEARCH Legacy and Learning Event Series. Washington, DC: Population Council.

This Presentation is brought to you for free and open access by the Population Council.

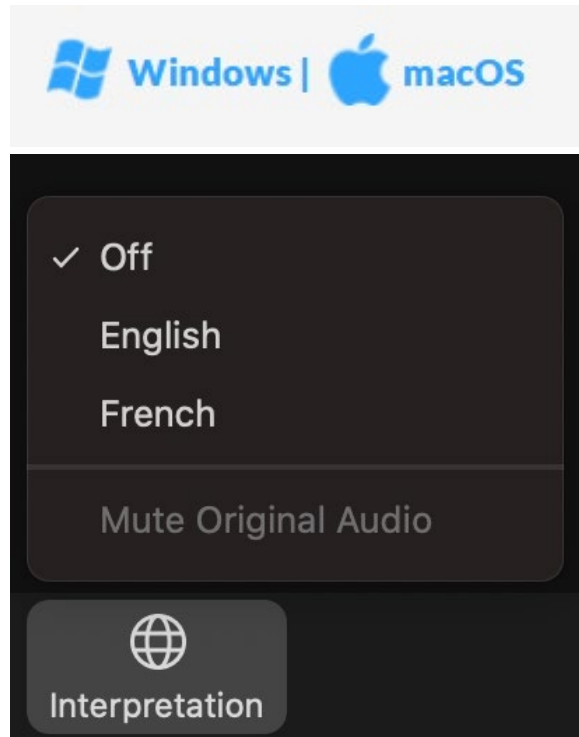
Breakthrough RESEARCH Legacy and Learning Event Series

FEBRUARY 28, 2023

# Advancing Social and Behavior Change Measurement for Family Planning



# Select Your Preferred Language: Desktop computer



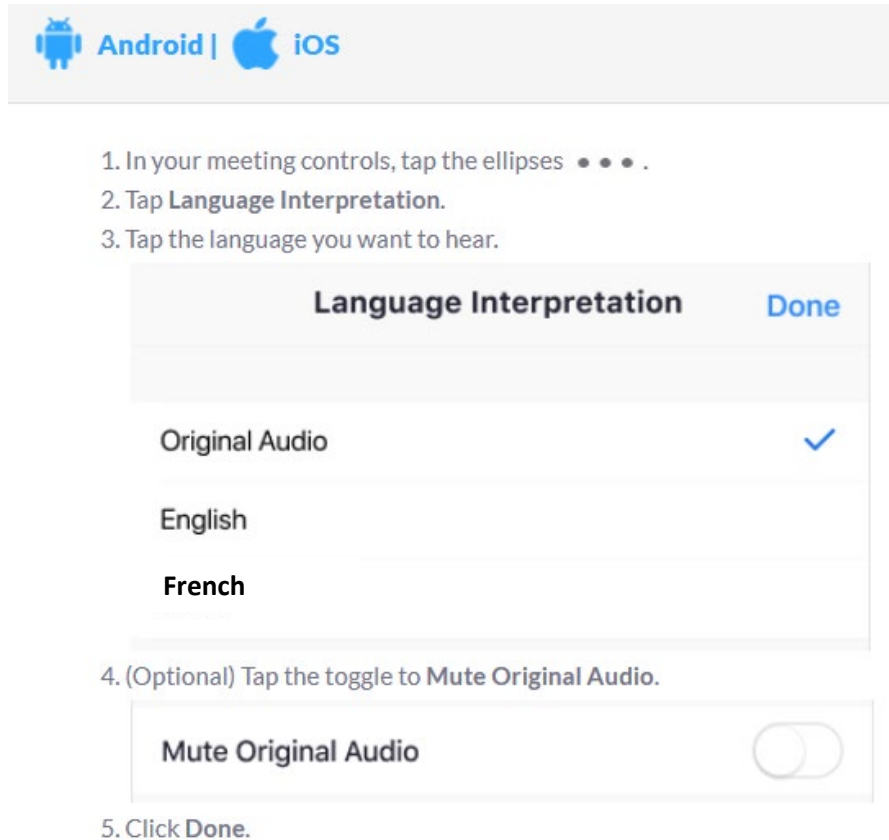
Click on the Interpretation icon on the bottom right of your screen and select your preferred language.

Cliquez sur l'icône Interprétation en bas à droite de votre écran et sélectionnez votre langue préférée.

(Optional) To hear the interpreted language only, click **Mute Original Audio**.

(Facultatif) Pour entendre uniquement la langue interprétée, cliquez sur **Mute Original Audio**.

# Select Your Preferred Language: Mobile phone application



Under “meeting controls” press the three (3) dots then press **Language Interpretation**. Select English or French.

*Sous « contrôles de la réunion », appuyez sur les trois (3) points, puis appuyez sur **Interprétation de la langue**. Sélectionnez l'anglais ou le français.*

(Facultatif) Pour entendre uniquement la langue interprétée, cliquez sur **Mute Original Audio**.



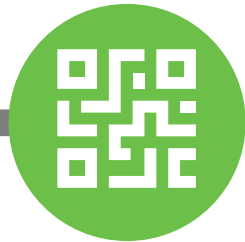
# Logistics for today



Use the chat! Ask questions (in English or French) at any time to the group or directly to a moderator if you need technical assistance.



We'll be using Mentimeter today—you can use this on your phone, tablet, or laptop.



QR codes and links (via chat) will be provided throughout the webinar for you to access resources and tools.



Links to webinar recording, presentation, and resources will be shared.

---

# Welcome!

# Breakthrough RESEARCH

- Flagship social and behavior change (SBC) research and evaluation project for USAID Global Health Bureau to drive the generation, packaging, and use of innovative SBC research to inform programming.
- Six-year project—August 2017 to July 2023
- Led by the Population Council in collaboration with our consortium partners: Tulane University, Avenir Health, Population Reference Bureau, Institute for Reproductive Health at Georgetown University, and ideas42.



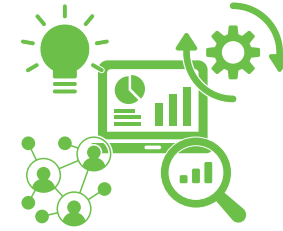
# Breakthrough RESEARCH Snapshot



Worked in **19**  
countries



Engaged with **21** local  
and global partners



Conducted **53**  
research studies



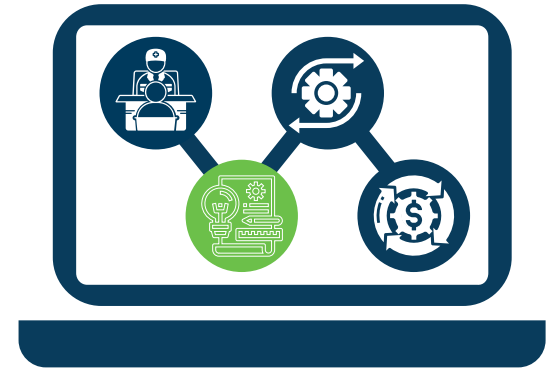
Published **27** articles  
in peer-reviewed  
journals to date



Cited **94** times in  
grey and peer-reviewed  
literature to date

# Webinar Objectives

- **2<sup>nd</sup>** of 4 complementary legacy and learning webinars
  1. Provider Behavior Change: SBC Approaches to Quality of Care in Family Planning
  2. Advancing SBC Measurement for Family Planning
  3. SBC and the Enabling Environment for Family Planning
  4. Costing for Family Planning SBC
- Highlight evidence, insights, and learnings from the past 6 years from Breakthrough RESEARCH's work to advance SBC measurement to support and strengthen family planning (FP) programs
- Share resources and evidence-based, practical tools you can use to strengthen SBC measurement, evaluation, and research



# Roadmap for Today

---

1. SBC Measurement in FP
2. Breakthrough RESEARCH's State-of-the-art Evidence and SBC Measurement Tools You Can Use
3. Call to Action
4. Discussion and Q&A

# Mentimeter

Go to [www.menti.com](https://www.menti.com) and use the code 2298 6328



## Instructions

Go to  
**[www.menti.com](https://www.menti.com)**

Enter the code  
**2298 6328**



Or use QR code



# Why SBC Measurement for Family Planning Programs?



- SBC interventions can improve FP/reproductive health (RH) outcomes, through pathways that address intermediate determinants such as attitudes around FP.
- Yet, barriers still exist to the inclusion of SBC in FP investments.
- Some SBC interventions are more effective than others, and the estimated effectiveness of SBC interventions varies depending on the measures we use to assess them.
- The measurement of SBC interventions and SBC implementation science approaches can also be important in addressing implementation questions around scale-up and program replication.





## Key Message

**SBC approaches can support family planning programs and the standardized measurement of these approaches guided by a defined theory of change is critical to understanding their effectiveness and contributing to their success.**



---

# Research and Learning Agendas

# Research and Learning Agendas (RLAs)



**Reaching consensus through collaboration and by building on previous efforts**

- Breakthrough RESEARCH took a multi-pronged approach to develop global SBC RLAs

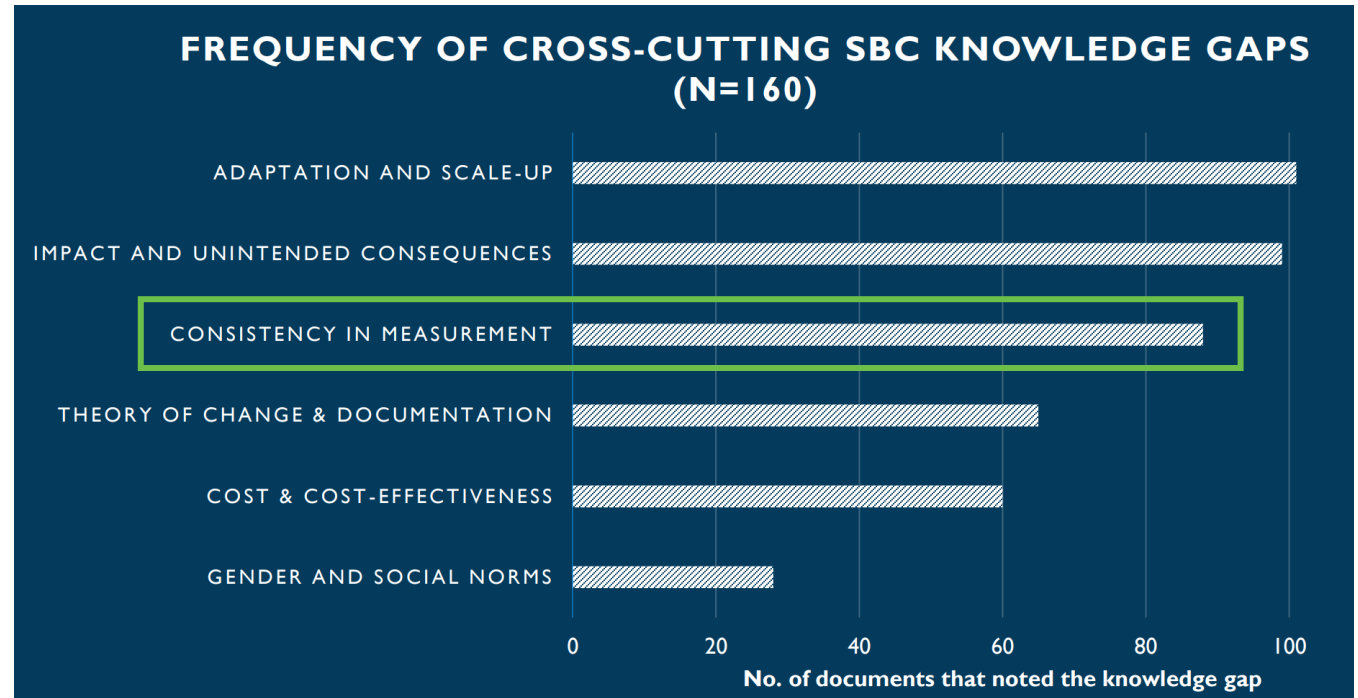




# Research and Learning Agendas



The desk review revealed 6 cross-cutting knowledge gaps related to SBC programs across health areas and geographic regions.



# Research and Learning Agendas



## Effectiveness of Integrated SBC Programming (Relative to Vertical SBC Programming)

- When a norm (or other determinant) influences multiple behaviors, how and to what extent does addressing it yield desired change for multiple behaviors?
- Under which conditions (such as social structures or health systems structures) is integrated SBC programming more effective than vertical SBC programming?
- What are the potential unintended (positive and negative) consequences at the individual, household, community, and health-systems level for integrated compared to vertical SBC programming?
- How and to what extent do differences in the integration program model (for instance, umbrella brand with nested vertical components, phased introduction of content, add-on) impact outcomes among different audiences? Which integration program models are most effective and what models still need to be explored (such as multisectoral integration of FP and economic growth) with specific audiences?
- How can we utilize more participatory approaches to improve the design, monitoring, and evaluation of integrated SBC programming?

## Effectiveness

- Does improving the behaviors/practices of health providers influence the quality of care provided?
  - What are the most effective SBC approaches to enable/motivate/facilitate (different cadres of) providers to provide respectful, client-centered care (such as staff recognition through incentives to provide postpartum FP counseling)?
  - What are the most effective non-communication-based SBC interventions to improve provider behaviors (for instance, a suitable waiting room)?
- How does addressing the factors that influence provider behavior (normative, structural, behavioral) lead to improved health outcomes?

## Measurement

- How can we best assess/measure the quality of client-provider interactions from client and provider perspectives?
- How can we best measure provider attitudes, norms, and biases that influence their performance and adherence to timely and respectful client-centered care practices?



# Research and Learning Agendas



RESEARCH AND LEARNING AGENDA AUGUST 2019

## ADVANCING PROVIDER BEHAVIOR CHANGE PROGRAMMING

**THIS RESEARCH AND LEARNING AGENDA HIGHLIGHTS:**

- The importance of addressing provider behavior to improve health outcomes.
- Gaps in the existing evidence base for provider behavior change programming.
- The priority research and learning questions and the consensus-driven process used to derive them.
- The roles of key stakeholders for putting the research and learning agenda into action.

Service providers play a fundamental role in health promotion and disease prevention, care, and overall well-being of their clients and communities. Effective client-provider interaction is pivotal for consistent demand and uptake of health services. Evidence shows that poor client-provider interactions can have a negative influence on use of health care. For example, unsatisfactory interactions with health care providers, such as lack of respectful care, can discourage future choices to deliver a child at a facility, seek prompt care, or ask important questions.<sup>1</sup> The quality of client-provider interaction can be influenced by the type or setting of provider (community-based, facility-based, private), their knowledge, attitudes, and biases, as well as social norms and structural factors like privacy and confidentiality.

Various approaches such as training, supportive supervision and financial incentives have been used to address these factors with mixed results. For example, a random evaluation in Nigeria found that use of a supervisory checklist for facility-based providers resulted in improved provider knowledge of malaria and appropriate prescription practices.<sup>2</sup> However, supportive supervision by providers significantly associated with correct prescription by providers in other studies in Tanzania<sup>3</sup> and Malawi.<sup>4</sup> Providers' biases can also discourage the use of particular interventions especially among certain populations, for instance, intrauterine devices for nulliparous women.

While integrated SBC programming can be complex, some clear examples highlight the potential of these approaches. For instance, combined implementation of nutrition and water, sanitation, and hygiene SBC interventions have had a stronger impact on reducing stunting among children under age 2 than each intervention alone.<sup>5</sup> In Ghana, the GoodLife Campaign is an integrated umbrella SBC approach that promotes a range of positive health behaviors (such as maternal and child health, and malaria prevention and treatment) through multimedia channels. The campaign has reached a broad base and achieved substantial impact across health areas. For instance, sales of zinc tablets increased 280 percent after the GoodLife media campaign, and 80 percent of women exposed to GoodLife slept under bed nets to guard against mosquitoes that transmit malaria.<sup>6</sup> Most of the existing documentation around integration, however, focuses on service delivery or comprehensive interventions.<sup>7</sup>

Research must still answer key questions related to integrated SBC programming, such as "What works in a particular context or target audience?," "How can it work best?," "How much does it cost?," "Is it cost-effective?," and "How can it be replicated, scaled, and sustained locally?" The current


RESEARCH AND LEARNING AGENDA AUGUST 2019

## ADVANCING INTEGRATED SOCIAL AND BEHAVIOR CHANGE PROGRAMMING

**THIS RESEARCH AND LEARNING AGENDA HIGHLIGHTS:**

- The importance of integrated social and behavior change (SBC) programming for improving behavioral and health outcomes.
- Gaps in existing evidence on integrated SBC programming.
- The priority research and learning questions and the consensus-driven process used to derive them.
- The roles of key stakeholders for putting the research and learning agenda into action.

In recent years, social and behavior change (SBC) programming has experienced a notable shift away from a vertical approach focusing on one health or development topic to integrated approaches concerning multiple health or development issues or outcomes under the same program.<sup>1</sup> Integrated SBC programs aim to address factors such as knowledge, attitudes, and norms pertaining to multiple health areas or development sectors in a coordinated and intentional way that influence multiple health outcomes (see Box). They have the potential to reduce duplication, lower costs, avoid missed opportunities, provide the right services and information to the right clients at the right time, and achieve better success.<sup>2</sup> Such integration is already happening across many health areas/sectors, yet the evidence base to support this is limited.



While integrated SBC programming can be complex, some clear examples highlight the potential of these approaches. For instance, combined implementation of nutrition and water, sanitation, and hygiene SBC interventions have had a stronger impact on reducing stunting among children under age 2 than each intervention alone.<sup>5</sup> In Ghana, the GoodLife Campaign is an integrated umbrella SBC approach that promotes a range of positive health behaviors (such as maternal and child health, and malaria prevention and treatment) through multimedia channels. The campaign has reached a broad base and achieved substantial impact across health areas. For instance, sales of zinc tablets increased 280 percent after the GoodLife media campaign, and 80 percent of women exposed to GoodLife slept under bed nets to guard against mosquitoes that transmit malaria.<sup>6</sup> Most of the existing documentation around integration, however, focuses on service delivery or comprehensive interventions.<sup>7</sup>

Research must still answer key questions related to integrated SBC programming, such as "What works in a particular context or target audience?," "How can it work best?," "How much does it cost?," "Is it cost-effective?," and "How can it be replicated, scaled, and sustained locally?" The current

USAID  
POPULATION COUNCIL  
PRB  
Breakthrough RESEARCH



## Key Message

**Applying tools to understand who SBC programs are reaching, how they are reaching them, with what content, and what changes they are producing is critical for effective measurement of SBC in family planning programs.**



---

# SBC Measurement Tools You Can Use





---

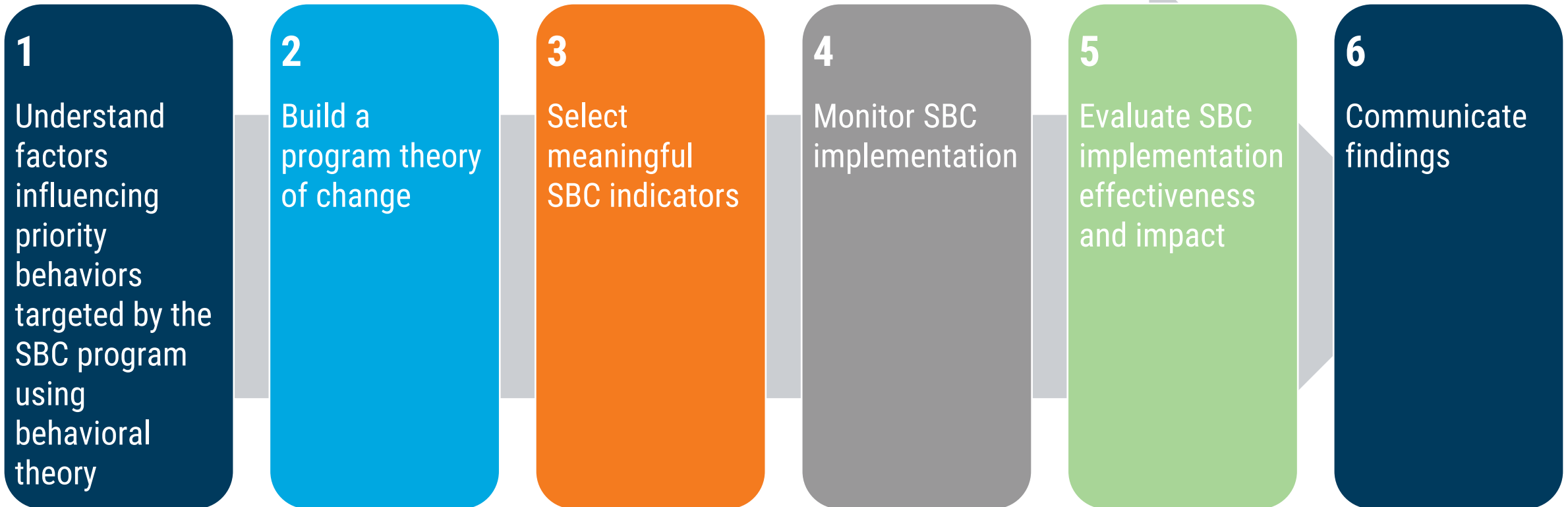
# How to Use a Theory of Change to Monitor and Evaluate SBC Programs

## How to Use a Theory of Change to Monitor and Evaluate SBC Programs

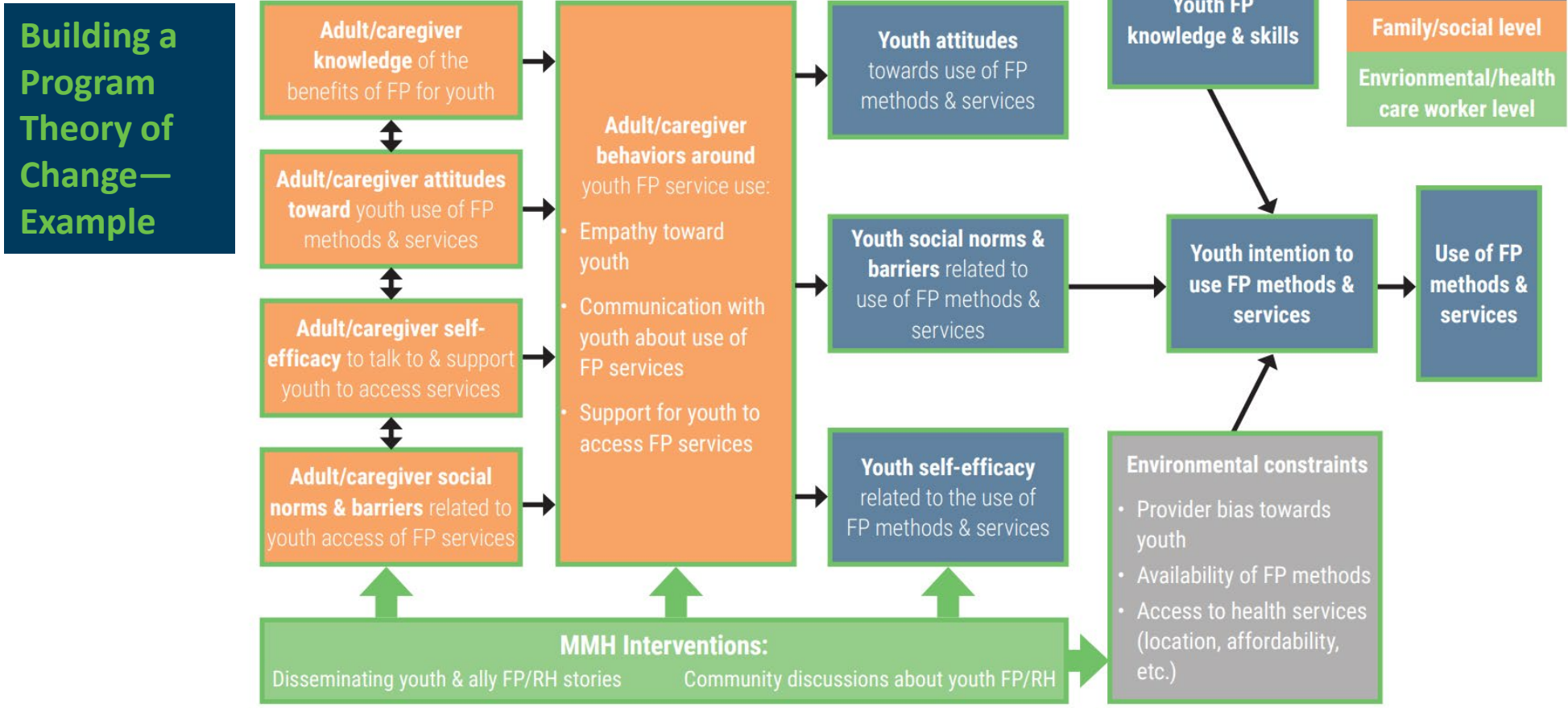


- Behavior change theory should be incorporated into an SBC program's theory of change to illustrate **how or why a desired change is expected to occur**.
- Behavior change theory also provides guidance on the **behavioral determinants that influence program goals** and objectives to measure.
- Breakthrough RESEARCH's guide is intended to help managers support research, monitoring, and evaluation staff and ensure they have the **programmatic data required to track results**, and it will ensure the **program is guided by robust theory-driven evidence**.

# How to Use a Theory of Change to Monitor and Evaluate SBC Programs



# How to Use a Theory of Change to Monitor and Evaluate SBC Programs



Source: <https://ccp.jhu.edu/2020/03/30/youth-reproductive-health-heroes-francophone>

# How to Use a Theory of Change to Monitor and Evaluate SBC Programs



## Using a Program Theory of Change to Identify Intended Outcomes to Measure— Example

Behavior	Knowledge	Attitude	Self-efficacy	Intent	Norms
Parent/adult ally speaks to youth about FP/RH	Parent/adult ally recognizes that youth are/can be sexually active	Parents/adult allies accepts/tolerates that youth are sexually active			Parent/adult ally believes other parents accept that youth are/ may be sexually active
	Parent/adult ally knows to talk to youth about FP/RH	Parents/adult allies believes they should speak to youth about FP/RH	Parent/adult ally believes they can speak to youth about FP/RH	Parents/adult allies intend to talk to youth about FP/RH	Parent/adult ally believes other parents in the community speak to youth about FP/RH
	Parent/adult ally knows that youth need guidance	Parents/adult allies approve of youth using FP	Parent/adult ally believes they can speak to youth about FP		Parent/adult ally believes other parents in the community approve of youth using FP
	Parent/adult ally knows that FP can help youth achieve life goals	Parents/adult allies have a favorable attitude toward young people's use of FP to help them achieve life goals			
Youth speak to adults about FP/RH	Youth know that there are adults they can trust to talk about FP/RH	Youth believe they should speak with adults about FP/RH	Youth believe they can speak to adults about FP/RH	Youth intend to speak to adults about FP/RH	Youth believe that other youth speak to adults about FP/RH
Youth use FP if sexually active	Youth know about the FP methods	Youth believe they should use FP if sexually active	Youth believe they can use FP if sexually active	Youth intend to use FP if sexually active	Youth believe that other youth use FP if sexually active

## How to Use a Theory of Change to Monitor and Evaluate SBC Programs



To effectively integrate a theory of change into a monitoring and evaluation (M&E) plan, SBC programs should:

- **Use a theory of change process at the design stage** and identify the important behavioral determinants that should be addressed with SBC programs.
- Select indicators for SBC M&E plans that consider **measures that assess exposure to the program, determinants of behavior, and the behavioral outcome.**
- Introduce qualitative studies such as in-depth interviews or focus group discussions to **complement routine monitoring and help explain how the program is working.**
- **Share evidence** on what works and how interventions can be improved.



BREAKTHROUGH RESEARCH

HOW-TO GUIDE | JULY 2022

## How to Use a Theory of Change to Monitor and Evaluate Social and Behavior Change Programs

Developed by Breakthrough RESEARCH, this guide will help managers support research, guide monitoring, and evaluation (RME) staff and ensure they have the programmatic data needed to track results, and it will ensure the program is guided by robust theory-driven evidence with results tracked over time and at program completion. While the steps presented include examples specific to family planning (FP) programs, they can be used for any social and behavior change (SBC) program.

This guide is one of a series of Compass SBC how-to guides that provide step-by-step instructions on how to perform core SBC tasks. From formative research through monitoring and evaluation (M&E), these guides cover each step of the SBC process, offer useful hints, and include important resources and references. This guide is also available on the Compass website.

### Introduction

#### Why use behavioral theories when developing a theory of change to monitor and evaluate SBC programs?

Behavior change theory is used to explain people's behavior and the determinants that make it easier or harder to change those behaviors. Behavior change theory should be incorporated into the SBC program theory of change to illustrate how or why a desired change is expected to occur (i.e., the change pathway) and therefore provide guidance on how to measure behavioral determinants that influence program goals and objectives. For more on how to develop a theory of change, see the resources available from the [Center for the Theory of Change](#).

The change pathways reflected in the theory of change should guide development of the M&E plan. An M&E plan for an SBC program outlines a) indicators to measure progress for an SBC program following the change pathways, b) methods and results following the change pathways, and c) plans for how data will be collected and monitored, and d) plans for how data will be analyzed and results will be communicated. An M&E plan for an SBC program helps ensure that data will be used efficiently to improve the program and report on results at various intervals.

#### Who should develop the theory of change for the SBC M&E plan?

The program staff involved in designing and implementing the program should develop the theory of change in collaboration with the RME staff. The RME staff should then use the theory of change to guide development of the SBC M&E plan in consultation with the program staff.

USAID  
POPULATION COUNCIL  
Breakthrough RESEARCH



BREAKTHROUGH RESEARCH

GUIDE PRATIQUE | FÉVRIER 2022

## Comment utiliser une théorie du changement pour assurer le suivi des programmes de changement social et comportemental et les évaluer

Développé par Breakthrough RESEARCH, ce guide aidera les responsables à appuyer le personnel de recherche, suivi et évaluation et contribuera à ce qu'il dispose des données programmatiques requises pour assurer le suivi des résultats. De plus, le programme pourra être orienté grâce aux résultats solides, basés sur la théorie, et les résultats seront l'objet d'un suivi au fil du temps et à l'issue du programme. Bien que les étapes présentées comprennent des exemples spécifiques aux programmes de planification familiale (PF), ils peuvent être utilisés pour toute sorte de programmes de changement social et comportemental (CSC).

Ce guide figure parmi les guides pratiques de Compass SBC qui fournissent des instructions sur les modalités des tâches essentielles du CSC. Des IS&E, ces guides couvrent chaque étape du processus de CSC, ils offrent des conseils utiles et contiennent des ressources et des références majeures.

### Introduction

#### Pourquoi utiliser des théories comportementales quand vous définissez une théorie du changement pour suivre et évaluer les programmes CSC?

La théorie du changement comportemental est utilisée pour expliquer les comportements ou compliquer les changements de comportements. La théorie du changement comportemental aide à intégrer dans la théorie du changement du programme de CSC pour illustrer les modalités et les raisons pour lesquelles un changement (et par conséquent, le parcours de changement) se produira. Pour mesurer les déterminants comportementaux qui influencent les buts et les objectifs du programme, plus d'éléments sur la manière de définir une théorie du changement, voir les ressources mises à disposition par le [Center for the Theory of Change](#).

Les parcours de changement pris en compte dans le cadre de la théorie du changement doivent guider le développement de S&E. Un plan de S&E de programme de CSC présente a) les indicateurs visant à mesurer les progrès et résultats suivant les parcours de changement, b) leurs méthodes de collecte et de suivi, et c) les plans déterminant les modalités d'analyse et de communication des résultats. Un plan de données S&E de programme de CSC permet de faire en sorte que les données soient utilisées de manière efficace pour améliorer le programme et le compte rendu des résultats à différents moments.

#### Qui doit développer la théorie du changement destinée au plan de S&E du CSC?

Le personnel de programme impliqué dans la conception et la mise en œuvre du programme doit développer la théorie du changement en collaboration avec le personnel de recherche, suivi et évaluation. Le personnel de recherche, suivi et évaluation doit ensuite appuyer sur la théorie du changement pour définir le plan de S&E du CSC en consultation avec le personnel de programme.

USAID  
POPULATION COUNCIL  
Breakthrough RESEARCH



# How to Use a Theory of Change to Monitor and Evaluate SBC Programs

# Mentimeter

Go to [www.menti.com](https://www.menti.com) and use the code 2298 6328



## Instructions

Go to  
**[www.menti.com](https://www.menti.com)**

Enter the code  
**2298 6328**



Or use QR code







---

# Twelve Recommended SBC Indicators for Family Planning

# 12 Recommended SBC Indicators for Family Planning



SBC measurement enables programs to:

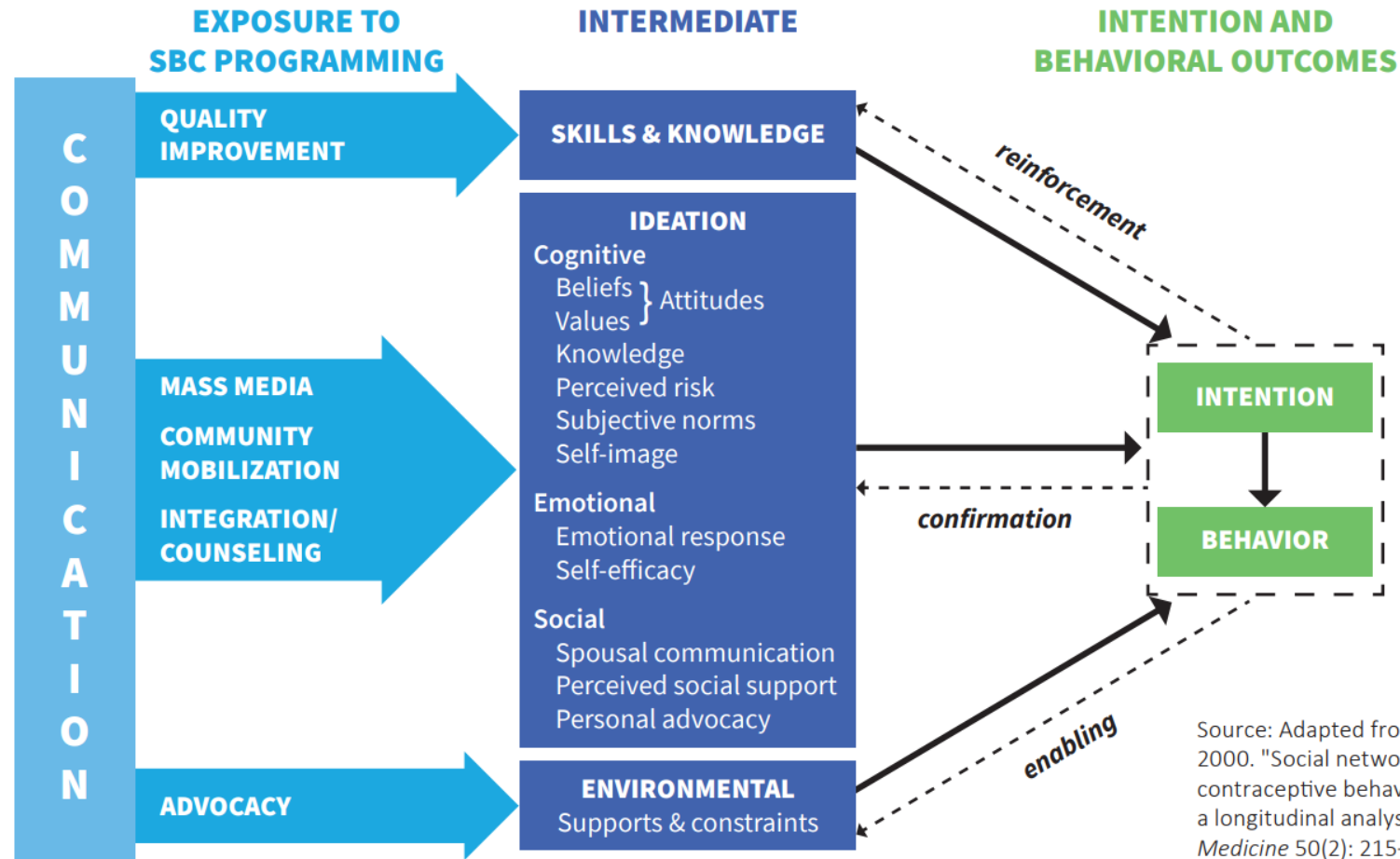
- engage in continuous learning and improvement;
- demonstrate how SBC interventions improve desired outcomes; and
- provide evidence of SBC's effectiveness that can be used to mobilize further investment.

We propose 12 SBC indicators that programs can consider adopting to monitor and evaluate SBC programs.

# 12 Recommended SBC Indicators for Family Planning

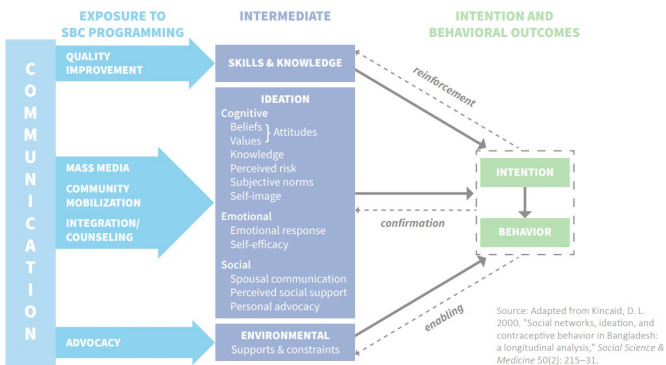


## Ideational Model of SBC Interventions



Source: Adapted from Kincaid, D. L. 2000. "Social networks, ideation, and contraceptive behavior in Bangladesh: a longitudinal analysis," *Social Science & Medicine* 50(2): 215–31.

# 12 Recommended SBC Indicators for Family Planning



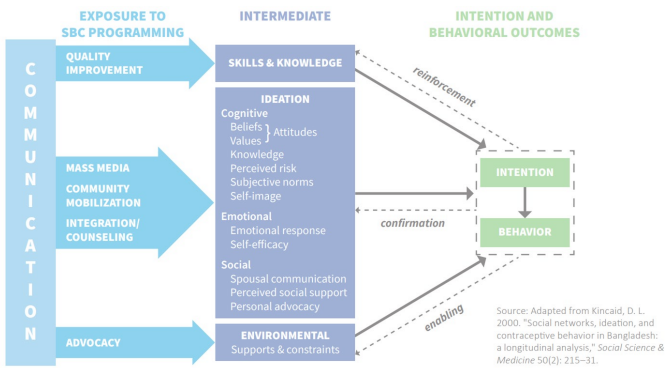
**Exposure to SBC programming** enables us to understand the extent to which beneficiaries are exposed to SBC approaches.

**Indicator 1:** Number of decision-makers reached with SBC FP advocacy activities.

**Indicator 2:** Percent of target audience that recalls hearing or seeing a FP message, campaign, or communication initiative.

**Indicator 3:** Number of service providers trained in interpersonal communication for FP counseling.

# 12 Recommended SBC Indicators for Family Planning



## INTERMEDIATE

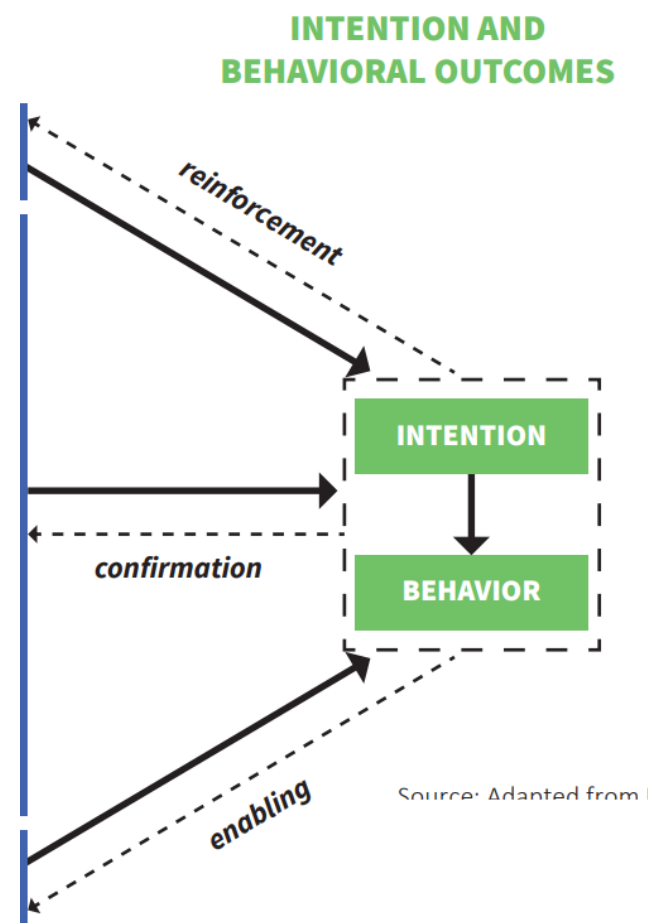
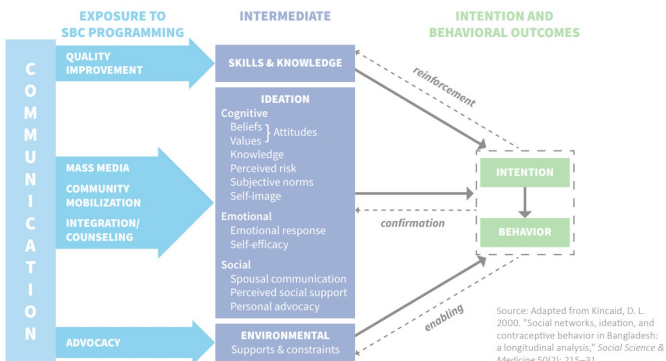
- SKILLS & KNOWLEDGE**
- IDEATION**
  - Cognitive
    - Beliefs } Attitudes
    - Values }
    - Knowledge
    - Perceived risk
    - Subjective norms
    - Self-image
  - Emotional
    - Emotional response
    - Self-efficacy
  - Social
    - Spousal communication
    - Perceived social support
    - Personal advocacy
- ENVIRONMENTAL**
  - Supports & constraints



**Intermediate** enables us to understand the factors contributing to behavioral outcomes.

- Indicator 4:** Percent of target audience that knows of at least three modern FP methods.
- Indicator 5:** Percent of target audience with favorable attitudes of modern FP methods.
- Indicator 6:** Percent of target audience that believes most people in their community approve of people like them using FP.
- Indicator 7:** Percent of target audience confident in its ability to use FP.
- Indicator 8:** Percent of target audience that discussed FP with spouse or partner.

# 12 Recommended SBC Indicators for Family Planning



**Intention & behavioral outcomes** enables us to determine if behavior has changed.

**Indicator 9:** Percent of non-users intending to adopt a modern FP method in the future.

**Indicator 10:** Percent of target audience currently using a modern FP method.

**Indicator 11:** Percent of modern FP users intending modern FP method continuation.



**Cost** enables us to understand the resources used/ needed to reach a target audience.

**Indicator 12:** Cost per person reached by SBC activities.





# 12 Recommended SBC Indicators for Family Planning

**Twelve Recommended SBC Indicators for Family Planning**  
 PROGRAMMATIC RESEARCH BRIEF | JULY 2020

**Doze indicateurs CSC recommandés pour la planification familiale**  
 NOTE DE RECHERCHE PROGRAMMATIQUE | SEPT 2020

**Doze indicadores del CSC recomendados para la planificación familiar: Fichas de referencia de los indicadores**  
 NOTE DE RECHERCHE PROGRAMMATIQUE | NOVEMBRE 2020

**Figure 1. Ideational Model of SBC**

**Figure 1. Modèle représentatif des interventions en matière de CSC**

**Figure 1. Modelo representativo de las intervenciones en materia de CSC**

**PRINCIPAUX MESSAGES**

- La maîtrise du CSC permet aux programmes de cibler dans un apprentissage et des améliorations continues et de démontrer en quoi les investissements continus et de démontrer en quoi les investissements continus ont prouvé l'efficacité du CSC dans la planification de futurs investissements.
- Les pays et les programmes doivent envisager d'adopter des indicateurs alignés sur leurs processus d'investissement préalable au comportement.
- Nous proposons 12 indicateurs que les programmes peuvent éventuellement adopter pour le suivi et l'évaluation de leurs programmes de planification familiale (PF), les indicateurs recommandés peuvent aider les pays, les donateurs et les partenaires d'exécution à mieux mesurer le CSC et à accroître la performance de leurs programmes.

**INTENTION ET RÉSULTATS COMPORTEMENTAUX**

**Additional resources:**

- USAID Performance Indicator Reference Sheet (PIRS) Guidance & Template
- Compass for SBC how-to guides: How to develop indicators
- The Family Planning and Reproductive Health Indicators Database: Measure Evaluation
- Croft, Trevor N. et al. 2018. Guide to DHS Statistics. Rockville, Maryland, USA: ICF.



# Mentimeter

Go to [www.menti.com](https://www.menti.com) and use the code 2298 6328



## Instructions

Go to  
**[www.menti.com](https://www.menti.com)**

Enter the code  
**2298 6328**



Or use QR code







---

# SBC Measurement Learning Courses

# SBC Measurement Learning Courses



## M&E of SBC approaches

1. Building an SBC M&E theory of change
2. Selecting meaningful SBC indicators
3. Monitoring SBC implementation
4. Determining if the SBC program reached the desired outcome

## Measuring SBC program or campaign exposure

1. Understanding SBC program or campaign exposure
2. Examples of SBC exposure questions and data sources
3. Using exposure data to inform your SBC program or campaign



---

# Measuring SBC Program or Campaign Exposure

# Measuring SBC Program or Campaign Exposure:

## Understanding Exposure



SBC exposure	Description	Example questions
Reach	Measures the extent to which the program or campaign reaches the intended audience.	How many decisionmakers (i.e., local or religious leaders) participated in SBC program trainings?
Awareness: recall	Recall (Spontaneous) measures if the respondent is aware of the campaign or topic and can provide an affirmative response.	Do you recall hearing or seeing the “X campaign”?
Awareness: recognition	Recognition (Prompted) measures if the respondent can provide an affirmative response when prompted with a campaign element (i.e., chime or tag line).	Can you identify the campaign logo (from a group of logos)/Can you complete this campaign slogan: “X ...”?
Comprehension	Comprehension measures message elements related to information, or an idea being communicated.	Thinking about the radio commercials you heard about family planning; can you tell me one of the messages in these commercials?
Message reaction	Message reaction measures if a respondent agrees or disagrees with the message.	Did you agree or disagree with the message in the commercial?

# Measuring SBC Program or Campaign Exposure: Exposure Data Sources



Source of data	Pros	Cons
Routine program monitoring (e.g., # of household visits)	Low cost	Does not tell you whether people remember anything from this exposure
Project-tailored surveys (mobile and household)	Allows for construction of very specific measures	High cost
Estimates using existing large-scale surveys (i.e., DHS)	Low cost	Questions included are generic, only capturing exposure to messages in general by health topic and by channel
Client-provider observations (e.g., provider is observed using a job aid to discuss FP)	Does not rely on self-reported data	High cost; may be particularly subject to social desirability bias
Social media monitoring and listening	Low cost	Requires technical expertise
Qualitative interviews with community leaders and program participants	Useful to assess comprehension and message reaction in richer ways that may lead to program learning	Not generalizable to entire target population

# Measuring SBC Program or Campaign Exposure: Using Exposure Data to Inform Programs



SBC program or campaign exposure data can be used to:



Determine if the program reached the intended audience.



Assess audience reaction to the SBC program or campaign.



Determine how to budget for your SBC program based on the desired number of people reached.



Assess whether the program had an impact on the audience reached.



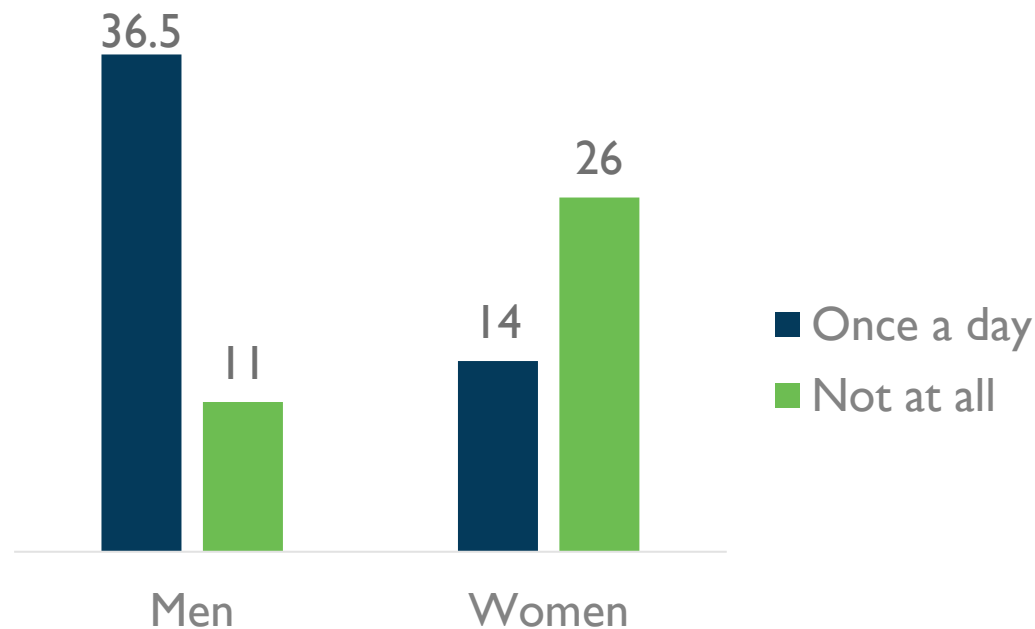
Assess whether the audience understood the program.

# Measuring SBC Program or Campaign Exposure: Using Exposure Data to Inform Programs



## Determine if the program reached the intended audience

Radio listenership from a mobile survey among men and women in Abidjan, October 2020



**Finding:** Radio listenership skewed male, with about a third of female survey respondents reporting not listening to the radio at all.

**Implication:** Findings suggest a multi-channel approach beyond radio is necessary to reach women of reproductive age.



## SBC Measurement Learning Courses





# Mentimeter

Go to [www.menti.com](https://www.menti.com) and use the code 2298 6328



## Instructions

Go to  
**[www.menti.com](https://www.menti.com)**

Enter the code  
**2298 6328**



Or use QR code





## Key Message

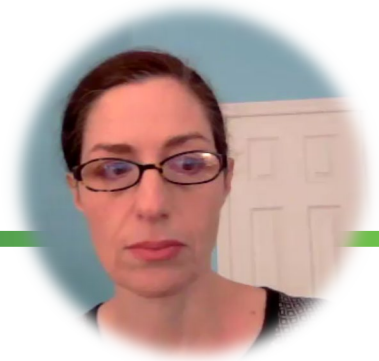
**Program designers and evaluators can benefit from SBC insights gained when tried-and-true research and evaluation methods have new applications in the family planning field.**



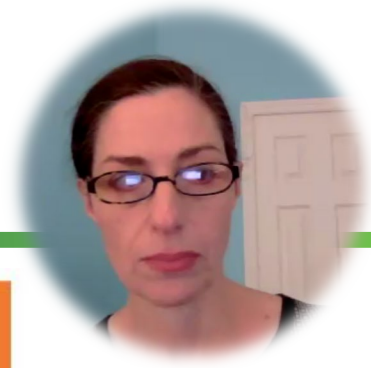
---

# Audience Segmentation

# Audience Segmentation



- Practice of dividing an audience into subgroups based on demographic, psychographic, and/or behavioral factors to develop tailored SBC approaches that are most likely to resonate with each audience subgroup.
- More recent applications of audience segmentation for FP has focused on segmentation by demographic characteristic.



# Using Audience Segmentation Approaches in Niger



- Knows that a woman must have at least 4 **ANC** visits for her health and that of her baby
- Knows that a woman should give **birth** in a health **facility**
- Has heard of at least 3 different **FP methods**



- Pregnant women only need **ANC** if they are sick
- Health care **facility** is the best place to give **birth**
- Acceptable for a couple to use **FP methods** such as condoms, the pill or injectables to delay or avoid pregnancy



- Most women in the community have 4 or more **ANC** visits
- Most women in this community deliver in a health **facility**
- Members of this community agree that a woman should use **FP methods**

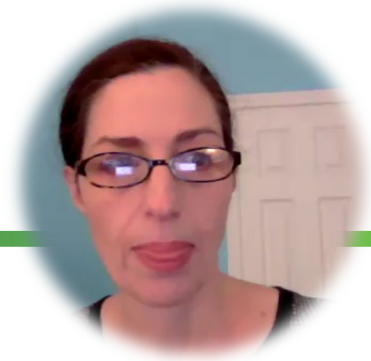


- Not at all difficult to go to a health facility for **ANC**
- Not at all difficult to go to a health **facility** to give **birth**
- Know where to go to get **FP methods**



- Not at all difficult to start a conversation with my partner about **ANC** visits
- Not at all difficult to start a conversation with my partner about giving **birth** in a health care **facility**
- Feel comfortable discussing **FP methods** with my partner

## Using Audience Segmentation Approaches in Niger



***AISSATOU is less likely to use ANC services than other women in Niger.*** Approximately, 29% of women interviewed were similar to Aissatou.



***BINTOU is more likely to use facility-based delivery services than other women in Niger.*** Approximately, 12% of women interviewed were similar to Bintou.



***FATOU is more likely to use family planning than other women in Niger.*** Approximately, 21% of women interviewed were similar to Fatou.



# Audience Segmentation

BREAKTHROUGH RESEARCH PROGRAMMATIC RESEARCH BRIEF | NOVEMBER 2022

## Using Audience Segmentation Approaches to Inform Integrated Family Planning and Maternal Health Programs in Niger



**KEY POINTS**

The study provides information on audience profiles that can inform strategies to increase the use of maternal and reproductive health services.

To help describe some of the audience profiles generated through the analysis, we created three personas (e.g., Aissatou, Bintou, and Fatou) which are fictional characters, but their analysis that represent different segments of the reproductive age in Niger that have different family planning (FP) and maternal health service needs in a similar way.

The overall lower scores relative to national norms for women similar to our persona Aissatou, suggest a need for more norm-based approaches for engaging with opinion leaders and community sentiment towards antenatal care (ANC) in this community.

For facility-based delivery, there is a need to focus on addressing the barriers to reach community norms to reach community norms to our persona Bintou.

To reach younger more mobile women with FP messages, SBC programs should consider a positive deviance approach encouraging young women like our persona Fatou to influence their peers who are more resistant to FP.

Understanding the specific behavioral determinants and barriers to health-seeking for reproductive and maternal health services is critical to developing social and behavior change (SBC) programs that can best address the needs of the community. Effective SBC interventions can incorporate audience segmentation, the practice of dividing an audience into subgroups based on demographic, psychographic, and/or behavioral factors to develop tailored SBC approaches that are most likely to resonate with each audience subgroup. This brief presents study results of audience profiles for women of reproductive age in Niger with a focus on three reproductive and maternal health behaviors. It is intended to inform integrated SBC activities implemented by the USAID-funded Resilience in the Sahel Enhanced (RISE II) partners to improve health outcomes.




## Finding the right fit: Using audience segmentation approaches to shape your social and behavior change programming

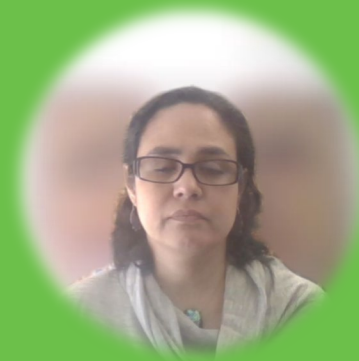
## Trouver la bonne personne : utiliser des approches de segmentation pour façonner votre programme de changement social et comportemental



9 February 2022





---

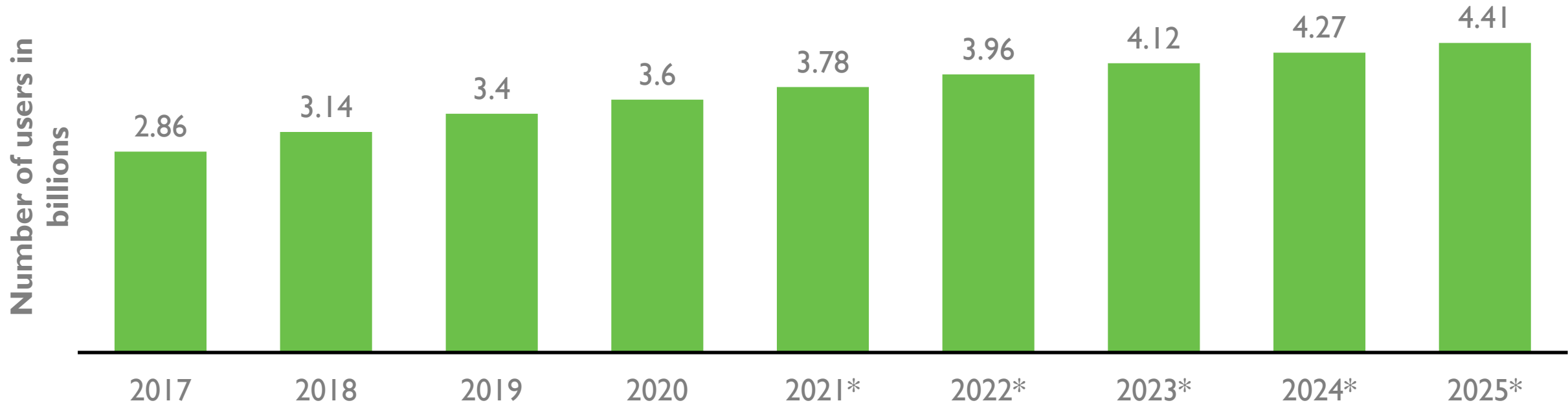
# Social Listening



# In 2020 there were over 3.6 billion social media users worldwide



**Social media:** Websites and applications that enable *users to create and share content* or to participate in social networking



Source: statista.com

# Using Social Listening and Social Media Monitoring for SBC Programs



## Social Listening

Can help you **qualitatively** understand:

- **Who** is messaging about topics of interest and what are they saying?
- **Where** are these topics of interest mentioned?
- What are the **attitudes & behaviors** of an audience to a specific topic?
- What **misinformation exists** about the topic?
- What **insights** can be learned about underlying attitudes or social norms expressed about a topic?

## Social Media Monitoring

Can answer questions **quantitatively** such as:

- What is the awareness and level of **engagement** (**# of likes, # of shares, etc.**) with a campaign or brand on social media platforms?
- What is the **volume of conversation** for key topics in a given location?
- What is the **sentiment** of conversations related to a campaign, brand, or topic?

## Using Social Listening and Social Media Monitoring for SBC Programs



- SBC programs and FP programs that incorporate SBC approaches can leverage social listening to gather insights related to people's health-related knowledge, attitudes, norms, and behaviors.
- Insights generated through social listening and social media monitoring can be used together with other monitoring and evaluation techniques to produce data-rich learning environments for program design and adaptation.



Just had an intimate conversation with my 15 years old son and wow!!! He confessed that he's already sexual active and already had sex 9 times with 4 different gals 💔💔💔 without condoms 🤔🤔🤔 effective last year.

I am not sure how I feel right now!!!  
[twitter.com/akreana\\_/statu...](https://twitter.com/akreana_/status...)



Replying to [redacted] Jul 3  
 At some point through our intimate session I had to laugh.

I asked the ages of the gals and he said 16 and 17, spoke about HIV, teenage pregnancy and rape.

I told him he must do himself a favor and go test.

I am defeated guys... Yuuuuu

19 77 306



[redacted] Jul 3  
 I asked so many questions and put him at ease so that he's free to tell me everything.

I was never ready guys 🤔🤔🤔...  
 When I spoke about pregnancy, he replied loop 🤔🤔 about HIV, he replied looks 🤔💔 when I spoke about rape, he just looked down...

13 65 282



[redacted] Jul 3  
 I am in disbelief...

18 30 169



[redacted] Jul 5  
 I didn't think this tweet would blow up like this, okay it did.

Thank you guys for words of wisdom and encouragement, it's really refreshing to know that I am not alone and the fears expressed by parents proved how important this tweet is.

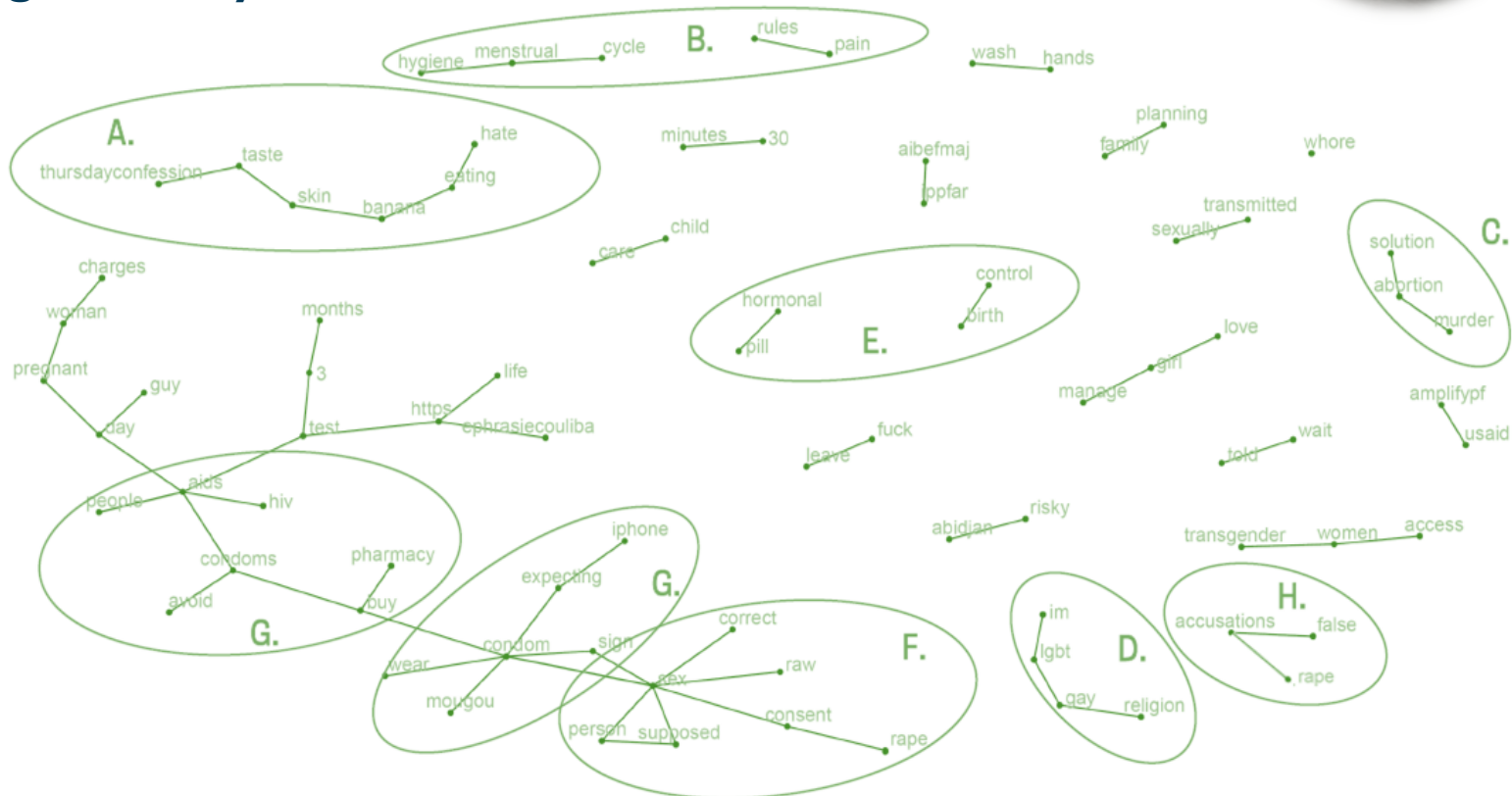
2 2 13



[redacted] Jul 4  
 Please create a very friendly environment for such topics... Behave as if you don't care about his activeness, be his best friend still maintaining boundaries though as far as respect is concerned, allow him to feel like he can tell you anything and trust you.

1 2 21

## Cote d'Ivoire "Family Planning & Sexual Attitudes" Bi-gram Analysis





BREAKTHROUGH RESEARCH HOW-TO GUIDE | OCTOBER 2022

# How to Leverage Social Listening to Inform Social and Behavior Change Programs



Developed by Breakthrough Research, this guide will provide practitioners with instructions on how to apply social media listening techniques to campaigns that monitor social media platforms and other digital resources, partner resources, and other resources needed.

## Introduction

Social media platforms can engage users in multidirectional communication and provide diverse audiences on which to inform and engage diverse audiences on a wide range of public health issues, as well as monitor opinions and behaviors on health topics.<sup>1,2</sup> Public health campaigns routinely feature social media advertisements, create fan pages, and promote conversations on social media around campaign topics, which makes social listening and social media monitoring useful tools for research and adaptive management of programs.<sup>2</sup> Social media monitoring refers to quantitatively tracking mentions and comments on social media regarding a specific topic, while social listening allows public health campaigns to better understand the context of online interactions by qualitatively tracking and analyzing conversation content.<sup>3</sup> The purpose of this how-to guide is to provide social and behavior change (SBC) program implementers, as well as monitoring, evaluation, and research practitioners with information needed to apply social media monitoring and social listening techniques to inform and evaluate campaigns that make use of social media platforms and other

Internet-based channels, and other external resources, partner resources, and other resources needed.



BREAKTHROUGH RESEARCH PROGRAMMATIC RESEARCH BRIEF | SEPTEMBER 2020



# Informing Social and Behavior Change Programs

## USING SOCIAL LISTENING AND SOCIAL MONITORING

This brief offers practical guidance on how to use social listening and social monitoring as tools to inform social and behavior change (SBC) programs. It is intended for global and regional SBC program implementers, evaluators, and donors in USAID priority countries. The brief provides an overview of social listening and social monitoring and explains how these methods can be important tools for collecting information about target audiences' knowledge and attitudes, as well as their exposure and responses to particular SBC interventions. Using applied examples in Francophone West Africa, it illustrates the steps undertaken in social listening and social monitoring, provides examples of lessons learned, and identifies how these methods can be applied to SBC programming.





# Mentimeter

Go to [www.menti.com](https://www.menti.com) and use the code 2298 6328



## Instructions

Go to  
**[www.menti.com](https://www.menti.com)**

Enter the code  
**2298 6328**



Or use QR code





---

# Discussion and Q&A



## Call to Action

**Future SBC approaches to strengthen family planning programs should commit to standardized, robust measurement to enable effectiveness evaluations that support continued investments in evidence-based SBC programs.**



# Call to action



**SBC PROGRAMS:** SBC programs can help fill the gaps in measurement by ensuring inclusion of standardized indicators of behavioral determinants and behaviors in their results framework, using a behavioral theory of change to guide their M&E efforts and going beyond a focus on output-level indicators.

**SERVICE DELIVERY PROGRAMS AND COMMUNITIES OF PRACTICE:** Voluntary FP efforts incorporating SBC approaches through programming or across community of practice platforms should promote the use of standardized SBC measures, and monitor and evaluate these SBC efforts using established measurement tools, such as the 12 Recommended SBC Indicators for FP.

**SBC RESEARCHERS:** Future researchers should continue to use existing SBC indicators and measurement tools and encourage the inclusion of modules that collect behavioral determinant data in surveys, including large-scale surveys, and build the capacity of implementers and policymakers for data use of behavioral determinant data.

**DONORS:** Donors should commit to requiring robust evaluation and standardized measurement of SBC approaches in FP programs and promote the routine collection of behavioral determinant data as a way to address global data equity issues and data gaps, so that scaled programs are informed by the evidence they need.

---

# **Reflecting on the Call to Action: Jason Bremner, FP2030**

# Mentimeter

Go to [www.menti.com](https://www.menti.com) and use the code 2298 6328



## Instructions

Go to  
**[www.menti.com](https://www.menti.com)**

Enter the code  
**2298 6328**



Or use QR code



# Discussion and Q&A

---

- Please post your questions in the chat.
- We will also discuss the implications from the Mentimeter results we've seen throughout the webinar.

 Breakthrough RESEARCH  
Legacy and Learning Series

# Advancing Social and Behavior Change Measurement in Family Planning

FEBRUARY 2023



Join Us  
For

4

# Breakthrough RESEARCH Legacy Webinars

We will reflect on what we have learned over the past 6 years about catalyzing social and behavior change (SBC) in family planning around the world with cutting-edge research and evaluation. Scan the code to access registration links for each webinar. Each webinar will be simultaneously interpreted in French.



**Provider Behavior Change and  
SBC Approaches to Quality of  
Care in Family Planning**

31 Jan 2023



**SBC and the Enabling  
Environment for Family Planning**

21 Mar 2023



**Advancing SBC Measurement for  
Family Planning**

28 Feb 2023



**Costing for Family  
Planning SBC**

19 Apr 2023



# THANK YOU



BreakthroughAR



@Breakthrough\_AR



Breakthrough ACTION + RESEARCH



Breakthrough\_AR

<https://breakthroughactionandresearch.org/>

Breakthrough RESEARCH catalyzes social and behavior change (SBC) by conducting state-of-the-art research and evaluation and promoting evidence-based solutions to improve health and development programs around the world. Breakthrough RESEARCH is a consortium led by the Population Council in partnership with Avenir Health, ideas42, Institute for Reproductive Health at Georgetown University, Population Reference Bureau, and Tulane University.

Breakthrough RESEARCH is made possible by the generous support of the American people through the United States Agency for International Development (USAID) under the terms of cooperative agreement no. AID-OAA-A-17-00018. The contents of this document are the sole responsibility of the Breakthrough RESEARCH and Population Council and do not necessarily reflect the views of USAID or the United States Government.

