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Social and behavior change and the enabling environment for family planning

Breakthrough RESEARCH

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SOCIAL AND BEHAVIOR CHANGE AND THE ENABLING ENVIRONMENT FOR FAMILY PLANNING

MARCH 2023
Breakthrough RESEARCH is USAID’s flagship social and behavior change (SBC) research and evaluation project to drive the generation, packaging, and use of innovative SBC research to inform programming. A six-year project (2017–2023), Breakthrough RESEARCH was 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. Our approach was to foster collaboration and shared learning, ensure SBC programs are based in “what works,” elevate the impact of evidence-based SBC programs, and put evidence into practice. Breakthrough RESEARCH did this by assessing the evidence, identifying priority research questions, designing and implementing research studies to fill evidence gaps and strengthen programs, and synthesizing and packaging evidence for use.

Within the breadth of our research portfolio, Breakthrough RESEARCH had four main project legacy areas: provider behavior change (PBC); integrated SBC; advancing SBC measurement; and costing and cost-effectiveness of SBC. For each of these legacy areas, Breakthrough RESEARCH curated a legacy resource highlighting the state-of-the-art evidence and the tools and guidance produced by the project over the past six years to advance evidence-based SBC programming.

This legacy resource highlights evidence, insights, and learnings over the past six years from Breakthrough RESEARCH’s work to advance SBC and the enabling environment for family planning programming and fill critical evidence gaps. This is a compilation of selected resources that do not represent evidence-based SBC programming.

The family planning programs are often faced with the challenge of transferring knowledge into behavior. A wide variety of contextual factors influence the effectiveness of action (past and new actions). An enabling environment for voluntary, rights-based family planning brings together three interrelated groups of factors: personal, societal, and environmental factors. Given the link between individual and community-level beliefs in myths and misconceptions that can impact the use of modern contraception, a supportive enabling environment is needed to elevate the impact of evidence-based SBC programs and put evidence into practice.

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Within the enabling environment for family planning, beliefs are defined and measured, better elucidating the pathways by which behavioral determinants influence health outcomes.

For more information on Breakthrough RESEARCH’s work on SBC and the enabling environment, including integrated SBC, visit https://breakthroughactionandresearch.org/br-legacy-area-enabling-environment-sbc/.
Evidence to inform integrated SBC in the Sahel

Breakthrough Action in Nutrition and Family Health (BAN) conducted a review of the Literature on SBC programming in the Sahel that summarized the evidence to support an multisectoral approach integrating SBC programming in the region for family planning. This review was designed to inform integrated programming addressing multiple health or development issues or outcomes under the same program.

The review revealed that persistent knowledge gaps, myths, misperceptions, and barriers continue to influence health behaviors, including the use of family planning, in the Sahel. Addressing these knowledge gaps and shifting the myths and misperceptions is an essential component of creating a health environment that encourages people and shifts social and gender norms. One avenue for addressing behavioral determinants included in the review was the role of influencers, who influenced by their family, peers, friends, and community leaders. Influencers functioning as programmatically identified to address family planning in the Sahel, including through integrated programming addressing multiple health behaviors, need to determine how information is shared within communities, including which sources of information can most frequently and trusted, and how these figures of influence can be engaged to support adoption of healthy behaviors such as use of family planning.

Integrated SBC programs aim to address factors such as knowledge, attitudes, and norms pertaining to health behaviors, including the use of family planning, in the Sahel. Addressing these knowledge gaps and shifting the myths and misperceptions is an essential component of creating a health environment that encourages people and shifts social and gender norms. One avenue for addressing behavioral determinants included in the review was the role of influencers, who influence by their family, peers, friends, and community leaders. Influencers functioning as programmatically identified to address family planning in the Sahel, including through integrated programming addressing multiple health behaviors, need to determine how information is shared within communities, including which sources of information can most frequently and trusted, and how these figures of influence can be engaged to support adoption of healthy behaviors such as use of family planning.

Research and Learning Agenda for Advancing Integrated SBC Programming

Breakthrough RESEARCH developed a Research and Learning Agenda (RLA) for Advancing integrated SBC Programming to identify cross-cutting knowledge gaps, and key research questions with broad applicability across global, regional, and national levels across health sectors. The goal of developing this RLA is to help guide decision making across sectors, stakeholder collaboration, resource allocation of efforts, and maximize the impact of research and programmatic investments. In recent years, there has been a shift away from a vertical programming approach, focusing on one health or development topic, to integrated programming approaches, which include family planning. 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. Integrated programs that include family planning have the potential to reduce duplication, lower costs, avoid missed opportunities, and provide the right services and information to the right clients at the right time. In this RLA, experts identified implementing an enabling environment as a key evidence gap and articulated two primary research and learning questions:

1. What are the conditions (for instance, political and donor support, timing, capacity, coordination with other areas, and the availability and feasibility of interventions) that enable or hinder design for appropriate and feasible implementation of integrated SBC programming?

2. What are the conditions that enable effective adoption by and sustainability of integrated SBC programs?

Lessons generated from research and learning to fill these evidence gaps about the enabling environment have the potential to reduce duplication, lower costs, avoid missed opportunities, and provide the right services and information to the right clients at the right time. In this RLA, experts identified implementing an enabling environment as a key evidence gap and articulated two primary research and learning questions:

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2. What are the conditions that enable effective adoption by and sustainability of integrated SBC programs?

Over the past six years, Breakthrough RESEARCH conducted a number of reviews of the Literature on SBC programming in the Sahel that summarized the evidence to support an multisectoral approach integrating SBC programming in the region for family planning and its application in improving family planning program planning and implementation. These learnings that address evidence gaps identified in the RISII project and other reviews. The Enhanced (RISE) II project, the lessons emerged and adapted for the innovative, evidence-based ways identified in the review to reach women and men, such as through community outreach using solar-powered technology to disseminate messages that use accessible knowledge gaps and engage myths, promoting a more supportive enabling environment to improve health behaviors such as use of family planning.

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Exploring the Interaction of Individual, Community, and Institutional Influences in Northwest Nigeria

To complement the full evaluation of individual and behavioral intentions and behaviors, Breakthrough ACTION developed and piloted qualitative studies aimed to further the full RLA questions about the characteristics of enabling and enabling factors programming and the impact of religious and cultural contexts on individual and individuals that affect family behavior change. These studies explored the conditions that promote or hinder pathway to low contraceptive use, driven in large part by high-fertility norms, pro-natal cultural and religious beliefs, and low contraceptive use, driven in large part by high-fertility norms, pro-natal cultural and religious beliefs. SBC programs often try to shift drivers of high fertility through multiple approaches, and gender inequalities. SBC programs often try to shift drivers of high fertility through multiple approaches, and gender inequalities. SBC programs often try to shift drivers of high fertility through multiple approaches, and gender inequalities. SBC programs often try to shift drivers of high fertility through multiple approaches, and gender inequalities. SBC programs often try to shift drivers of high fertility through multiple approaches, and gender inequalities. SBC programs often try to shift drivers of high fertility through multiple approaches, and gender inequalities.

The use of qualitative methods to explore the pathways leading to fertility reduction allows for understanding of three core components: 1) local context to understand the social, political, and economic influences of the family planning environment, 2) engagement of community members, through focused interviews and community-level activities, and 3) the identification of key targets and populations, and 3) complementary integrated SBC messaging through radio, SMS, and mobile phones.

As part of the intervention, a behavioral social and cognitive systems (BSCS) survey was designed using an individual-level framework of behavior that addressed the psychosocial influences of behavior and its relationship to family planning outcomes. A better understanding of these psychosocial factors can be useful in designing where to engage mobilization activities that support family planning uptake. To improve the social acceptance of family planning and demand elicitation, the use of SBC approaches for increased community engagement in SBC approaches. Religious and cultural norms, limited education, and behavioral ideation and influences, Breakthrough ACTION/Nigeria's SBC program also implemented capacity strengthening activities to health care workers. Throughout the evaluation, enabling facilitators of change, social influencers (husbands, family members), and health care providers are important to help improve the social acceptance of family planning and demand elicitation. Breaking down emotional and behavioral barriers and enabling the environment to promote pathways to low contraceptive use, driven in large part by high-fertility norms, pro-natal cultural and religious beliefs, and low contraceptive use, driven in large part by high-fertility norms, pro-natal cultural and religious beliefs.

Breakthrough ACTION/Nigeria's SBC program also implemented several capacity-strengthening efforts. One was focused on engaging existing community leaders and structures to increase community self-efficacy, coordination, and behavioral ideation and influences, Breakthrough ACTION/Nigeria's SBC program also implemented several capacity-strengthening efforts. One was focused on engaging existing community leaders and structures to increase community self-efficacy, coordination, and behavioral ideation and influences. These efforts included SBC activities at the national and subnational levels. Focus for Breaking Through RESEARCH’s evaluation of the public sector capacity-strengthening measures was strengthened health behaviors is important but not always consistent across different health behaviors (see figure). For example, women in rural Haiti, stated that “I am doing the best I can for my children,” reflecting positive value judgments. The influence of others on healthy behaviors is reported to be consistent across different health behaviors (see figure). For example, women in rural Haiti, stated that “I am doing the best I can for my children,” reflecting positive value judgments. The influence of others on healthy behaviors is reported to be consistent across different health behaviors (see figure). For example, women in rural Haiti, stated that “I am doing the best I can for my children,” reflecting positive value judgments. The influence of others on healthy behaviors is reported to be consistent across different health behaviors (see figure). For example, women in rural Haiti, stated that “I am doing the best I can for my children,” reflecting positive value judgments.
SBC approaches that address barriers that can result in differential exposure to SBC activities can employ more effective and inclusive engagement strategies to foster empowered family planning decision-making for women, couples, and youth.

Understandingwhichchallengesareusedtoimaginativeengage-
to identify któryprzeprowadź malarstwo w formie graficznej, odciski, kolorowe sztukę, malarstwo z materiałów, a także grafiki do nauki. Jakie są te wyzwania i jakie są metody, które mogą pomóc w stworzeniu takich ortografii?

Kto jest odpowiedzialny za utrzymanie i rozwijanie języka w języku i literaturze dla dorosłych? Jakie są główne cele działania w zakresie edukacji i sztuki, a także sztuki i grafiki?

Na podstawie informacji i zdań można zdecydować, które strategie są najbardziej efektywne w warunkach konkretnej edukacji i sztuki. Jakie są główne problemy, które mogą powstrzymywać rozwój języka i literatury w języku i literaturze dla dorosłych? Jakie są główne cele działania w zakresie edukacji i sztuki, a także sztuki i grafiki?
Meeting the Needs of Adolescents: Examining health identities and empowerment

A brief focus on adolescent females enumerates empowerment. Empowerment of female adolescents, at the individual level, is thought to be an important factor associated with norms and health, but until the current study, the female empowerment literature has not been a useful explore empowerment is related to specific health behaviors or traits. The study is a cross-sectional design intended to measure progress in the multi-dimensional aspect of women’s empowerment, such as agency, power, leadership, and similar constructs. The findings indicate that women were highly empowered at the time of individual study, whereas the methods of family planning include those in the group and engage in healthy behaviors such as having ANC, PMTCT, and from a formal source for childhood health.

The use of the Female Empowerment Index in this analysis highlights the need to promote structural changes to the context in which individuals experience agency. For example, female adolescents may not necessarily have a strong voice in the design and coordination of health policies, or engage in the policies that affect them. This voice could be strengthened through community engagement, education, and incentives for empowerment.

The enabling environment is not monolithic and requires continued efforts to improve health services and health knowledge among adolescents. The focus on adolescent empowerment is critical for advancing the enabling environment, promoting accountability, and the importance of integrating and collaborating with the enabling environment. Additionally, the calls to action highlight the need for more research on the relationships between adolescent empowerment and health behaviors.

The investment case for family planning and reproductive health can be more intentional. Investments should pay equal attention to SBC and demand generation, service delivery, commodity logistics and supply, capacity building, and the enabling environment. A more holistic approach to balancing out financing through the available resources.

-Foyintey Oyeyinka-Adadeji, USAID Nigeria

CALLS TO ACTION

Stakeholders, including communities, need to be engaged in the design and coordination of SBC approaches in family planning programs, and investments in long-term evaluations, to ensure effective collaboration with the enabling environment, promote accountability, and sustain positive change.

The enabling environment is an enabling environment and requires continued attention, in order to build and strengthen the enabling environment. In this context, the enabling environment is vital.


The concept of the enabling environment refers to the complex array of factors that can influence the success of interventions. This includes policies, regulations, and other social determinants of health that can create barriers or enablers for the use of family planning. Clear definitions of the terms “enabling environment” and “enabling environments” are necessary, as they help to understand the potential impact of these factors on the adoption and use of family planning. Continued and strengthened engagement of the stakeholders and the influence of the enabling environment on different health behaviors, and the potential unintended positive and negative unintended consequences of integration, will provide a better understanding of the enabling environment for one behavior influences the other behaviors.

The enabling environment is a complex system that influences health outcomes. It encompasses social, economic, and political factors that interact to create barriers or enablers for the use of family planning.

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