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Social and Behavior Change and the Enabling Environment for Family Planning—Slide deck

Breakthrough RESEARCH

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Social and Behavior Change and the Enabling Environment for Family Planning
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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

• 3\textsuperscript{rd} 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 support a better understanding of the enabling environment for SBC and its application in improving family planning program design and implementation.
Roadmap for Today

1. SBC and the Enabling Environment
2. Breakthrough RESEARCH’s State-of-the-art Evidence
3. Call to Action
4. Discussion and Q&A
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The Enabling Environment

• SBC approaches can support family planning programs to reach their goals when contextual factors are clear.

• An enabling environment for voluntary, rights-based family planning brings together three interrelated groups of practices: policies, legislation, and financing; institutions, governance, and management; and social and economic factors.

Family Planning High Impact Practices

- Policies, legislation, and financing
  - HIP Briefs: Policy
  - HIP Briefs: Galvanizing commitment
  - HIP Briefs: Domestic resource mobilization

- Institutions, collaborative governance, and management
  - HIP Briefs: Leaders and managers
  - HIP Briefs: Supply chain management
  - HIP Briefs: Strategic social accountability

- Social and economic factors
  - HIP Briefs: Girls education
The enabling environment can act on SBC approaches in a way that facilitates or creates barriers.

SBC approaches can identify areas where the enabling environment could be strengthened and then work to create a more supportive environment.
SBC approaches can best support family planning programs to achieve their goals when the context of the enabling environment is clearly defined and measured, better elucidating the pathways by which behavioral determinants influence health outcomes.
Research and Learning Agendas
Breakthrough RESEARCH developed a consensus-driven research and learning agendas (RLAs) for integrated SBC programming.

The RLA for Advancing Integrated SBC Programming lays out a set of questions to prompt the generation of knowledge that can help focus the global SBC community, development partners, and donors on the most important questions related to the effectiveness and efficiency of integrated SBC programs.

- Four themes: Implementing in an Enabling Environment, Intervention Content and Programmatic Model, Effectiveness of Integrated SBC Programming, Cost Effectiveness
ADVERSING PROVIDER BEHAVIOR CHANGE PROGRAMMING

The importance of advancing provider behavior change in health care delivery systems. This section outlines the evidence base for provider behavior change, the theoretical models and learning agendas associated with this change, and the impact on health outcomes.

1. Theoretical models of behavior change
2. Learning agendas and evidence-based strategies
3. Case studies of successful behavior change initiatives

State-of-the-art Evidence

Research and Learning Agendas
Evidence to Inform Integrated SBC in the Sahel
• Governments and donors in the Sahel recognize the need for strengthening state and local institutions and governance, increasing sustained economic well-being, and improving health and nutrition.

• Interest has grown in the viability of building upon existing humanitarian and development assistance to cohesively address more than one health or development issue within integrated programs.
Evidence to Inform Integrated SBC in the Sahel

The Enabling Environment

• Persistent knowledge gaps, myths, misperceptions, and norms continue to influence health behaviors.

• Many of the health behaviors included in the review are practiced by women but are influenced by their parents, husbands, friends, and community leaders.

• Need to know how these influence can be engaged to support adoption of priority behaviors and how information is shared within communities, including which sources of information are most frequently accessed and trusted.
LITERATURE REVIEW

Evidence to Inform an Integrated Social and Behavior Change Strategy in the Sahel

FEBRUARY 2020
An enabling environment for sustainable SBC in family planning programs promotes and incorporates structural, community, and individual drivers of change for a more complete understanding of the pathway from knowledge to behavior.
Understanding Family Planning Outcomes in Northwest Nigeria
Understanding Family Planning Outcomes in Northwest Nigeria

• Breakthrough RESEARCH conducted a three-year evaluation in northwest Nigeria of the Breakthrough ACTION/Nigeria project, an integrated SBC program targeting family planning, malaria, and maternal, newborn, and child health and nutrition.

• Northwestern Nigeria is a region with high fertility and low contraceptive use, driven in large part by high-fertility norms, pro-natal cultural and religious beliefs, misconceptions about contraceptive methods, and gender inequalities.

• SBC programs often try to shift drivers of high fertility through multiple channels including mass and social media, as well as community-level group, and interpersonal activities.
# Understanding Family Planning Outcomes in Northwest Nigeria

**Behavioral Sentinel Surveillance (BSS) Survey**

<table>
<thead>
<tr>
<th><strong>Study population</strong></th>
<th>Women with children under 2 living within Breakthrough ACTION/Nigeria program areas in Kebbi, Sokoto and Zamfara states (<em>not representative at state level</em>)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Study design</strong></td>
<td>Cross-sectional</td>
</tr>
<tr>
<td><strong>Sample size</strong></td>
<td>3,043 women</td>
</tr>
</tbody>
</table>
| **Sampling method**  | 90 wards in Breakthrough ACTION/Nigeria program areas  
Random selection of women with children under 2 years                                                                                     |
| **Data analysis**    | Multivariate regression analysis                                                                                                                |
Understanding Family Planning Outcomes in Northwest Nigeria

Potential Effects on Family Planning from Ideational Factors

- **Values**, specifically approval of family planning, appeared to have the largest impacts in general.
- Achieving ideal knowledge, dispelling contraceptive myths, and positive social influences could also be largely impactful.
- A supportive enabling environment is needed to achieve this impact.
Behavioral Sentinel Surveillance Survey in Nigeria

Understanding family planning outcomes in northwestern Nigeria: analysis and modeling of social and behavior change factors

Abstract

Introduction: Family planning rights have an impact on the fertility of a female in the community. This study aimed to assess the impact of high fertility on the quality of life in rural and urban areas in Nigeria. The study was conducted using a mixed-methodological approach. The data was collected from a random sample of 1,200 households in three rural and urban communities in northwestern Nigeria. The data was analyzed using statistical and modeling techniques to understand the relationship between family planning and fertility outcomes.

Methods: The study was conducted in three rural and urban communities in northwestern Nigeria. The data was collected using a combination of qualitative and quantitative research methods. The qualitative data was collected through in-depth interviews and focus group discussions with women of reproductive age. The quantitative data was collected through a household survey. The data was analyzed using statistical and modeling techniques to understand the relationship between family planning and fertility outcomes.

Results: The results showed that higher levels of family planning were associated with lower levels of fertility. The study also found that higher levels of education and higher levels of economic empowerment were associated with higher levels of family planning.

Conclusion: The study highlights the importance of family planning in reducing fertility outcomes. The results suggest that interventions aimed at increasing family planning awareness and improving economic empowerment of women are likely to have a positive impact on fertility outcomes.

Keywords: Family planning, fertility, rural, urban, Nigeria.
Exploring the Intersection of Individual, Community, and Institutional Influences in Northwest Nigeria
Exploring the Intersection of Individual, Community, and Institutional Influences in Northwest Nigeria

To complement the BSS evaluation of individual behaviors and behavioral ideations and influences:

- Developed a set of qualitative studies that aimed to help answer the RLA questions about the conditions that enable or hinder effective SBC programming.
- Explored the multiple pathways of drivers—structural, community, and individual—that intersect to affect behavior change, including for family planning programming.

Diagram:

- SBC effectiveness evaluation (integrated versus malaria-only)
- Program costing and cost-effectiveness
- Common Research Questions
- Community Capacity Strengthening Model (qualitative evaluation)
- Advocacy Core Group Model (qualitative evaluation)
- Public Sector Capacity Strengthening Model (qualitative evaluation)
- Program monitoring data trends
Breakthrough ACTION/Nigeria’s ACG Model: formalized structure of social groups (religious, women, traditional, and youth) that work through key opinion leaders and influences to affect community-level health norms and individual behaviors.

| Responsibilities of SBC ACG members at all levels | 
|--------------------------------------------------|---|
| Address barriers, wrongful beliefs and misconceptions on reproductive, maternal, newborn, and child health plus nutrition (RMNCH+N) interventions | Facilitate dissemination of correct information on RMNCH+N interventions, including childbirth spacing through mass media |
| Support demand creation for MNCH interventions, including childbirth spacing | Advocate to governments, communities, non-governmental organizations, relevant institutions and other stakeholders for resources and support |
| Engage with community, traditional, key opinion and influential leaders in the LGAs and communities | Advocate with government and implementing partners on establishment and provision of accessible and quality RMNCH+N services |
| Facilitate discussions aimed at reducing barriers and increasing access to RMNCH+N interventions | Contribute to development and implementation of RMNCH+N and childbirth spacing programs in the states. |
| Support efforts to ensure messages used for demand creation are culturally appropriate and acceptable | |
Enabling Environment Findings

• Although social norms are entrenched in certain health areas, norms around child spacing are shifting, with a recognition of the benefits to mothers’ and children’s health.

• Women, however, do not have the agency to make health decisions and independently take action to seek care in family planning, pregnancy, childbirth, and childcare.

• ACGs appear to be fulfilling their responsibilities by actively discussing and encouraging shared decision-making on health matters.
Influencers of Health-seeking Behaviors

Influencers in maternal and child care (Bauchi)

- **Child nutrition**: 2 Spouse, 8 Religious leaders, 5 Traditional leaders, 39 Family, 24 Health, 2 Other
- **Child illnesses**: 29 Spouse, 2 Religious leaders, 2 Traditional leaders, 35 Family, 27 Health, 6 Other
- **ANC and immunization**: 17 Spouse, 11 Religious leaders, 7 Traditional leaders, 39 Family, 25 Health, 1 Other
- **Child spacing**: 46 Spouse, 14 Religious leaders, 5 Traditional leaders, 26 Family, 8 Health, 8 Other

State-of-the-art Evidence
Promising Areas for Potential Impact

- **Skills-building in community engagement and community liaison:** receiving supportive training on how to mobilize communities

- **Combining mid- and mass media:** work has been bolstered by radio broadcasters transmitting similar SBC messages, lending credibility and support to their own work, reinforcing health messaging, and reaching broader audiences

- **Motivating participation and leadership:** The structure of the ACG model, based on close liaison and social support from government leaders at all levels to mobilize and reach communities of interest, provides a source of intrinsic motivation to ACG members, in spite of the lack of financial remuneration
TECHNICAL REPORT

Qualitative Research on Breakthrough ACTION’s Advocacy Core Group Model for Integrated Social Behavior Change Programming in Nigeria

MARCH 2023
Instructions

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Breakthrough ACTION/Nigeria’s CCS approach has 3 specific objectives:

1. Help communities to identify priority health areas and behaviors in family planning, MNCH+N and malaria, and demand appropriate and quality health services;

2. Empower communities to mobilize resources, enhance participation in health services, and address underlying barriers to improved health, including gender biases and norms; and

3. Increase community ownership and sustainability by developing systems to ensure continued community involvement and participation.
Early Successes

• **Perceived self-efficacy**: all participants place great importance on “committees” and their role in fundraising and leadership.

• **Cohesion**: evidence of social cohesion among and between community committees.

• **Leadership, trust, accountability and transparency**: key elements of perceived capacity and community cohesion.

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“We are all united, we’ve become like a broom tied together. Everyone has a role to play. When we hear any [health] news, we’ll look for this party and that other party…we CVs won’t be enough, WDCs won’t be enough…when we joined hands, we’ve been having progress through Breakthrough.”

—Sokoto, Female Community Volunteer
Challenges to Sustainability

1. **Financial**: members can collectively solve social and health problems up to a certain extent, but there are limits when a project has out-of-pocket financial demands.

2. **Logistical**: community volunteers experience logistical issues, particularly in hard to reach and remote settings, or due to poor roads and weather conditions.

3. **Human resource constraints**: perceived potential for waning motivation because volunteers had little incentive beyond their initial enthusiasm and commitment to improving the community’s health.
Key Recommendations

1. Support the diversification of fund generation strategies.

2. Strengthen capacity for addressing a wider range of behavior influences sustaining change, including practicing holding government and other stakeholders accountable to their commitments to support community health and advocacy.

3. Further promote female participation in ward development committees and community structure leadership.
Qualitative Evaluation of Breakthrough ACTION/Nigeria's Community Capacity Strengthening Approach to Sustaining Integrated Social and Behavior Change Programming: Phase I
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Public Sector Capacity Strengthening Approach

Breakthrough ACTION/Nigeria’s Public Sector Capacity Strengthening (PSCS) approach has four strategic objectives:

1. **Support key MOH units** to strengthen coordination, planning, and quality assurance for SBC at the national and sub-national levels.

2. **Strengthen public sector systems for oversight and coordination** of SBC at the national and sub-national levels.

3. **Improve the quality and impact of SBC activities** across the public sector by establishing improved systems and data use for coordination and joint planning.

4. **Develop mechanisms for ensuring SBC quality assurance and establishing consensus agendas.**
Key Findings

1. **Individual-level outcomes** comprised initial actions to develop health messages and adapt national guidelines.

2. **Organization-level outcomes** were related to training and facilitation, community mobilization, and design and monitoring.

3. **System-level outcomes** were focused on coordination and guideline adherence.

4. Challenges in implementing the knowledge and skills acquired include illiteracy, resistance to change, financial and mobility issues, a lack of data collection equipment, and conflicting work plans.
Recommendations

1. Investigate and address limiting factors that could lead to slow implementation of SBC PSCS activities.

2. Increase coordination efforts to ensure even greater synergy between different State Ministries of Health and related ministries, departments, and agencies.

3. Focus on individual and systemic efforts to create balance and optimal achievement of strategic goals.
Public Sector Capacity Strengthening Study

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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.
Understanding and Overcoming Barriers to Reaching Target Audiences
Understanding and Overcoming Barriers to Reach Target Audiences

- Understanding which channels to use to reach target audiences and how structural barriers in the enabling environment may impact exposure are important for adaptive management to inform SBC campaigns in support of family planning programs.

- Breakthrough RESEARCH has taken several approaches as part of evaluations of SBC programming to inform the campaigns in reaching target audiences.
Understanding and Overcoming Barriers to Reaching Target Audiences

Niger

Low levels of access to television but higher access to radio and mobile phones, though overall, still low in all study areas. There were also gendered differences: two-thirds of women had not listened to the radio compared to one-fifth of men.

Nigeria

Radio listenership among women was found to be varied across the different study sites but ranged from 24% to 38% (exposure to other forms of media was much lower). Awareness of the intervention radio program was lower among respondents in the poorest households (12%) than in wealthiest households (42%).

Using Social Listening

Skew in audience reach – 72% of the audience was male, and yet the target audience for the SBC campaign was both males and females.
Understanding and Overcoming Barriers to Reaching Target Audiences

Behavioral Sentinel Surveillance Survey in Nigeria

Evaluation of RISE II Integrated Social and Behavior Change Activities in Niger

Using Social Listening to Inform Integrated Social and Behavior Change Programs in Burkina Faso
Employing SBC Strategies to Engage Men in Family Planning
Employing SBC Strategies to Engage Men in Niger and Nigeria

• In both Niger and Nigeria, gender dynamics influence decision-making about health behaviors and outcomes.

• Social norms and women’s lack of agency in decision-making challenge efforts to meet women’s family planning needs in the region.

• Baseline findings from Breakthrough RESEARCH evaluations in both countries suggested potential differential exposure to campaign content based on access to things like radio and TV and the need to employ approaches that reach husbands and wives to encourage spousal communication around healthcare decision-making.
Employing SBC Strategies to Engage Men in Niger

RISE II partners used a variety of SBC approaches:

• community engagement, radio, interpersonal communication (IPC) through peer group activities, including husbands' schools.

The husbands’ schools brought together married men, health workers, and cultural and religious leaders to discuss the importance of male involvement in household responsibilities, and improved couples’ communication and joint decision-making related to maternal and child health.
Health issues are discussed at almost every moment between my wife and me, especially when we are trained on a new topic at the husband school. The most recent example is that of a delivery that she made at home... And I was very unhappy about this [home delivery] because my friends from the husband school had asked me why.

—Man from Maradi, Niger
Employing SBC Strategies to Engage Men in Nigeria

In Nigeria, the SBC campaign, Albishirin Ku!, aims to shift the drivers of high fertility through multiple channels including mass, social, and digital media, as well as community-level events and home-visits by community volunteers.
Is Exposure to *Albishirin Ku!* Related to Approval of Contraception for Birth Spacing?

- Approval of FP is generally higher with exposure to *Albishirin Ku!* but ....
- Only husband’s exposure to *Albishirin Ku!* matters: both for his own approval of FP and for his wife’s
- A wife’s exposure to *Albishirin Ku!* matters only if her husband is also exposed

Approval of family planning, husbands and wives

<table>
<thead>
<tr>
<th>Wife’s approval</th>
<th>Husband’s approval</th>
</tr>
</thead>
<tbody>
<tr>
<td>34</td>
<td>15</td>
</tr>
<tr>
<td>31</td>
<td>17</td>
</tr>
<tr>
<td>42</td>
<td>30</td>
</tr>
<tr>
<td>39</td>
<td>26</td>
</tr>
</tbody>
</table>

- No one exposed
- Only wife
- Only husband
- Both exposed

** p<.01  * p<.05
How does the approval of contraception by husbands & wives relate to family planning use?

- A wife’s approval is a necessary condition for contraceptive use while a husband’s approval alone is insufficient.
- Modern contraceptive use is highest if both partners approve of contraception.

<table>
<thead>
<tr>
<th>Who Supports Contraceptive Use</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No one approves</td>
<td>4</td>
</tr>
<tr>
<td>Only husband approves</td>
<td>5</td>
</tr>
<tr>
<td>Only wife approves</td>
<td>21**</td>
</tr>
<tr>
<td>Both approve</td>
<td>31**</td>
</tr>
</tbody>
</table>

** p<.01  * p<.05
Employing SBC Strategies to Engage Men in Niger and Nigeria

Comparing the Attitudes, Norms, and Beliefs of Husbands and Wives for Reproductive, Maternal, and Child Health

In many locations of Niger, evidence suggests that economic, political, and social factors influence the health and well-being of men and women. The evidence also indicates that behavioral change is essential to improving maternal, reproductive, and child health outcomes. This study aimed to compare the attitudes, norms, and beliefs of husbands and wives regarding reproductive, maternal, and child health in five Niger states.

The research employed qualitative methods, including interviews and focus group discussions. The findings revealed significant differences in the attitudes and beliefs of men and women regarding reproductive health. Men were generally more likely to prioritize their own health and well-being, while women were more likely to prioritize their children's health. This indicates a need for targeted interventions to address gendered attitudes and beliefs.

Breakthrough Systems Change (BSCC) was commissioned by USAID to develop and implement scale-up strategies for the Sustainable Health Care Systems (SHCS) project in Niger. BSCC’s men’s and women’s health strategy is designed to engage men in reproductive, maternal, and child health. The strategy includes focusing on key men’s behaviors; providing men with healthcare information; promoting the use of contraceptives; and encouraging fathers to participate in child feeding, vaccinations, and other health practices.

In conclusion, the study highlights the importance of understanding and addressing gendered attitudes and beliefs in reproductive, maternal, and child health programs in Niger. Efforts to engage men in these programs are critical to improving overall health outcomes.
Discussion and Q&A
What’s Needed Next

Stakeholders, including communities, need to be engaged in the design and coordination of SBC approaches in family planning programs, and investments made in long-term evaluations, to ensure collaboration with the enabling environment, promote accountability, and sustain positive change.
What’s Needed Next for SBC and the Enabling Environment?

1. Community capacity strengthening approaches appear to yield positive outcomes. Yet, to fully understand their impact, support for investments into long-term evaluations are needed.

2. A clear threat to the sustainability of SBC approaches that engage communities and other local stakeholders and actors is sustained financing for these efforts.

3. Agency and empowerment are undermeasured intermediate determinants but a key link along the pathway from knowledge to behavior.

4. As the focus on integration continues to grow, the evidence gaps identified in the RLA for Integrated SBC Programming remain relevant.
Reflecting on What’s Needed Next:
Foyeke Oyedokun-Adebagbo, USAID|Nigeria
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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.
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
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.