

Population Council Knowledge Commons

4-19-2023

Costing for family planning social and behavior change—Slide deck

Breakthrough RESEARCH

Follow this and additional works at: https://knowledgecommons.popcouncil.org/focus_sexual-healthrepro-choice How does access to this work benefit you? Click here to let us know!

Recommended Citation

Breakthrough RESEARCH. 2023. "Costing for family planning social and behavior change—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

April 19, 2023

Costing for Family Planning Social and Behavior Change







Select Your Preferred Language: Desktop computer

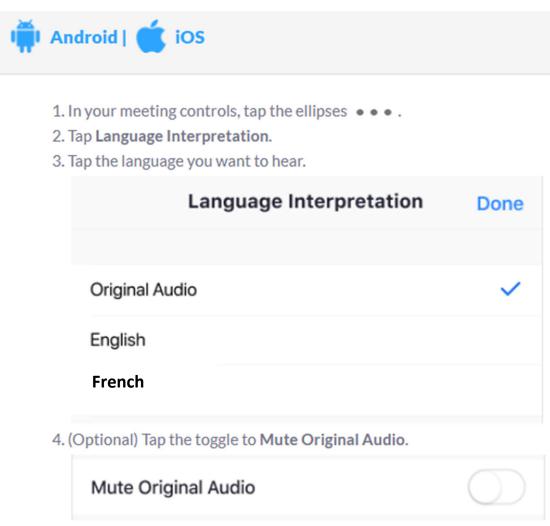
🐉 Windows 📹 macOS		
 ✓ Off English French 		
Mute Original Audio		
Interpretation		

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.

5. Click Done.

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

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.

Logistics for today



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!

5

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

Published 27 articles in peerreviewed journals to date

Cited 94 times in

grey and peerreviewed literature to date





Conducted 53 research studies

Webinar objectives

• 4th and final of 4 complementary legacy and learning webinars

- I. Provider Behavior Change: SBC Approaches 3. SBC and the Enabling to Quality of Care in Family Planning
- 2. Advancing SBC Measurement for Family Planning

- **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 gather, analyze, and share evidence on the costs and impacts of SBC interventions, making the case that investing in SBC is crucial for improving health, including family planning outcomes.



Roadmap for today

- I. Costing for Family Planning SBC
- 2. Breakthrough RESEARCH's State-of-the-art Evidence
- 3. Breakthrough RESEARCH's Costing Tools You Can Use
- 4. Call to Action
- 5. Discussion and Q&A

. .



Go to www.menti.com and use the code 5571 6972

Instructions

Go to www.menti.com

Enter the code

5571 6972



Or use QR code

🞽 Mentimeter



Costing for Family Planning SBC

Synthesize Existing **Evidence**

Generate New **Evidence**

Foster **Evidence** Generation by Others

Key Message

Understanding and measuring project costs is important for developing a consistent evidence base for SBC programs to support family planning programs, inform adaptive management, and ensure continued investments in evidence-based, cost-effective **SBC** approaches.

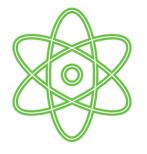


Documenting the Costs of SBC Interventions for Health in Low- and Middle-income Countries



Documenting the Costs of SBC Interventions

Identified 197 studies on SBC costs, methodological shortcomings, and knowledge gaps



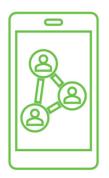
Greatest proportion of SBC costing studies are in HIV and family planning



SBC costing literature from Latin America and the Caribbean, Eastern Europe, and the Middle East and North Africa was scarce



Lack of studies costing SBC interventions targeting adolescents and young adults, and key populations



Significant shortage of cost information on newer and rapidly changing forms of SBC, such as social media and other digital technologies





Many were outdated, with more than half of the studies published prior to 2010



Key Findings

- SBC unit costs (or the cost per person exposed, for example) vary substantially both within and between intervention types.
- SBC cost studies vary substantially in their reporting of SBC interventions, costing methodologies, and cost data, with important implications for comparing results.
- There are relevant and meaningful cost patterns both between and within SBC interventions consistent with expectations.

Breakthrough RESEARCH

POPULATION COUNCIL Ideas. Evidence. Impact.

TECHNICAL REPORT

Documenting the Costs of Social Behavior Change Interventions for Health in Low- and Middle-income Countries

> Avenir Health

Documenting the Costs of SBC Interventions



AUGUST 2021

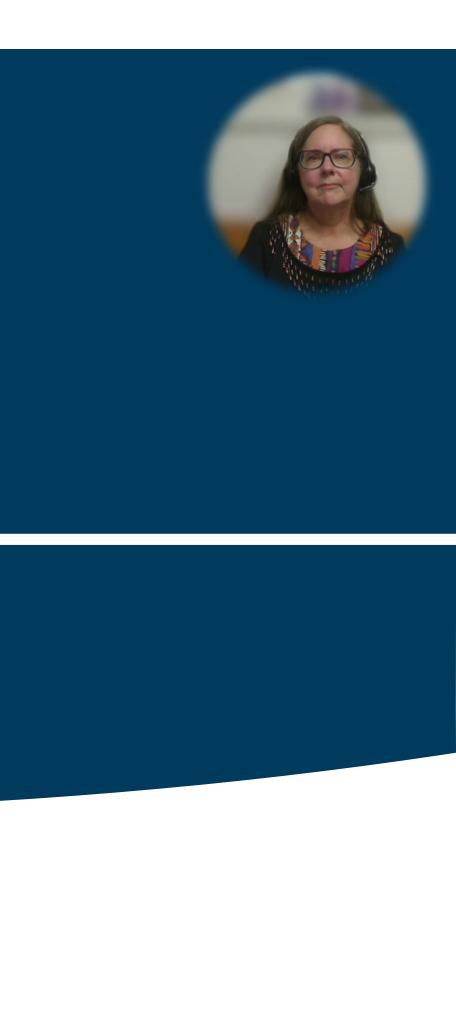






16

SBC Cost Repository



SBC Cost Repository

- Centralized database that contains SBC intervention cost data
- 197 studies in peer reviewed and grey literature
- Donors, implementers, and researchers can use this database to assist with planning and budgeting
- Available in Excel workbook with all costs; unit costs are also searchable in the Unit Cost Study Repository



Guide to the SBC Cost Data Repository

<section-header></section-header>	A. General Study Information
	B. Intervention Details
	C. Contextual Information
	D. Cost Information & Cost per Outp
	E. CEA Results (where applicable)
	F. Cost Measurement Details



Tools You Can Use

Synthesize Existing Evidence



Version 2.0 released April 1, 2022

SBC Cost Repository







Go to www.menti.com and use the code 5571 6972

Instructions

Go to www.menti.com

Enter the code

5571 6972



Or use QR code

🞽 Mentimeter



Key Message

Investments in SBC for family planning are cost-effective.



The Business Case for Investing in Social and Behavior Change for Family Planning



The Business Case for Investing in SBC

OBJECTIVES

- Leverage prior SBC research to make the case for SBC investments in family planning.
- Synthesize the literature on SBC costs and impact to estimate the cost-effectiveness of SBC investments in family planning, such as:
 - Mass and mid-media
 - Mobile/SMS interventions
 - Different types of interpersonal communication (e.g., group, individual, with/without community engagement)

RESEARCH PROCESS

- costs
- **SBC** interventions

Synthesize literature on impact of SBC on modern contraceptive use Synthesize literature on SBC unit

Build models that can examine the cost-effectiveness of family planning

Apply model to country-specific illustrative investment scenarios

The Business Case for Investing in SBC

Results	Guinea	Niger	Togo	Zambia
SBC investment over 5 years	\$6.1 mil	\$2.7 mil	\$3.2 mil	\$38 mil
Percentage point increase in mCPR	2.3	1.4	6.1	5.0
Additional family planning users by year 5	83,000	86,000	139,000	535,900
Cumulative unintended pregnancies averted	66,000	81,000	127,000	578,800
Cumulative disability-adjusted life years (DALYs) averted	7,000	5,000	7,000	46,400
Cost per additional family planning user year	\$33	\$19	\$14	\$30
Cost per unintended pregnancy averted	\$104	\$49	\$39	\$84
Cost per DALY averted	\$946	\$737	\$656	\$2,278
Cost-effectiveness determination based on national GDP per capita thresholds	Highly cost- effective	Cost- effective	Highly cost- effective	Cost- effective

State-of-the-art Evidence

Synthesize Existing Evidence



r change is cost-effective otive use in Zambia 2. RESULTS INDICATE SBC IS A HIGHLY COST-EFFECTIVE INTERVENTION. Jisability adjusted life year (DALY)¹ averted is a stric for assessing cost-effectiveness. This analy-Jund that the cost per DALY averted for family planning vas US\$468 in Egypt, \$591 in the Philippines, \$1,051 in a, and \$438 in Guinea. These results fall below World Prganization thresholds for being considered a high-

ioderne au Togo

une mesure corrigée de l'incane mesure courante pour évaluirios d'investi Niger, au Togo et en Zambie. Dans AVCI évitée qui en résulte indique pour la PF sont très rentables anisation Mondi

ients FP CSC permet aux itre l'équité et de s'attaquer aux ation de la cr CIP), les activ rne et étaient toujour

The Business Case for **Investing in SBC**

ns de changement social et comportemental

(Figure 1).

Les interventions de changement social et comportementai (CSC) sont généralement considérées comme un élément es-sentiel des services de santé de haute qualité, mais les lacunes sentiel des services de sante de naute quaire, mais les racuires dans les informations sur le coût et l'impact du CSC signifient

Les résultats in très rentables. pacité (AVCI)¹ e er la rentabili modélisés en chaque pays, que les invest la base des re (OMS).

The Business Case for Investing in Social and Behavior Change for Family Planning

FIGURE 1 : VOIES D'IMPACT DU CSC VERS UNE UTILISATION ACCR JOUR)

cation familial Conclusions générales

aans les informations sur le cout et l'impact du CSC signifient que les décideurs ont sous-estimé la valeur de la CSC pour contribuer à l'amélioration des résultats de la santé. Pour récontribuer à l'amelioration des resultats de la sante. Pour ré-soudre ce problème, Breakthrough RESEARCH a tiré parti des soudre ce probleme, breaktillough research a une para des évidences de 153 études sur l'impact de la planification familenuenues ue 100 enues sur i impact de la pratimication ramme iale (PF) CSC et de 70 études sur les coûts du CSC pour évaluer iale (PF) CSC et de 70 etudes sur les couts au CSC pour evaluer le rapport coût-efficacité de la programmation du CSC pour la program la color de consultant de consultinistica ou rinnerir PF dans le cadre de son analyse de rentabilisation pour investir dans le cadre de son analyse de rentabilisation pour investir dans le changer

USAID

Une revue de la littérature a révélé que le CSC augmente l'utilisation de la contraception moderne. Des études

ucinsation de la contraception novel ne. Des etudes montrent que le CSC influence positivement les déterminants

Avenir Health

Le doubler programm moderne

numrent que le CSC innuence positivement les determinan intermédiaires qui ont un impact sur l'utilisation de la con-tracentino moderne tels que les attitudes la communication

bilisation d'interver tion atter rentable intermenances qui one un impact sur i uninseriori de la communication traception moderne, tels que les attitudes, la communication traception moderne, tels que les attitudes, la communication avec les partenaires et autres. La force de l'impact varie selon

TIFS MODERNES (MISE À

1

OCTOBER 2019

Avenir Health

Breakthrough RESEARCH

mental est rentable on CSC et le résultat intermédiaire visé

RECHERCHE | DÉCEMBRE 2020

ROGRAMMATIC RESEARCH BRIEF | OCTOBER 2019

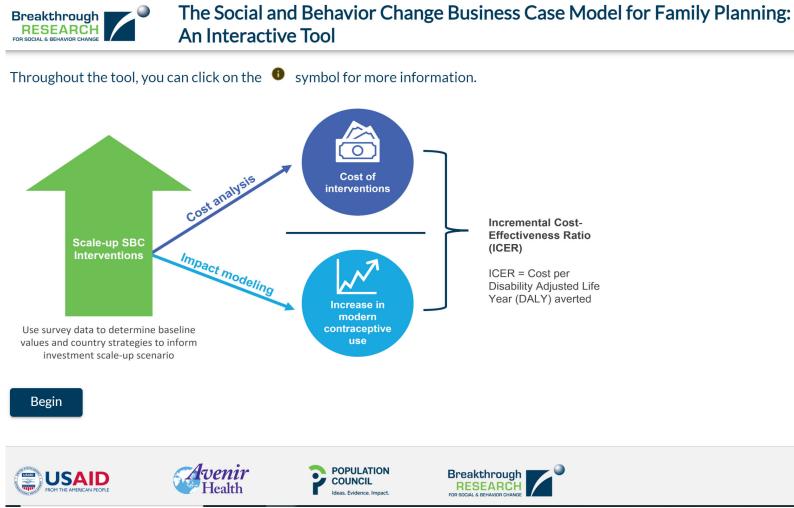


SBC Business Case Model: An Interactive Tool



SBC Business Case Model Tool

Helps you plan effective SBC programs by guiding you through a series of steps necessary to see how a potential set of SBC interventions might impact mCPR and the costs and costeffectiveness of these interventions





Effectiveness Ratio

Disability Adjusted Life Year (DALY) averted

SBC Business Case Model Tool



Select country and time frame and review model

parameters



each year



Review SBC

effectiveness odds ratios



Review unit costs



reach



Review results



Specify intervention reach

Sense check intervention

Built in Data

For the 31 family planning priority countries included in the tool, country-specific model inputs are embedded for the following:



Population, fertility intentions, mCPR



Method mix



Intermediate outcomes of family planning use (e.g., partner communication)





Media ownership and use



Data related to maternal deaths and cost-effectiveness calculations

(radio, tv, and mobile phone)

Setting and Reviewing Model Parameters



The Social and Behavior Change Business Case Model for Family Planning: An Interactive Tool



Set and Review Model Parameters

In this step, make the following selections:

- Select your country
- Select whether you are conducting a national versus sub-national application.

- For sub-national applications, specify the proportion of women of reproductive age (WRA) in the country living in the sub-national area.

- Select your start year for the five-year investment scenario.

Select country *(required)

Ghana			•
Drogram			
Program National			-
			•
Start year <i>*(required)</i>		End year	
2023	•	2027	





31

Specifying SBC Intervention Reach

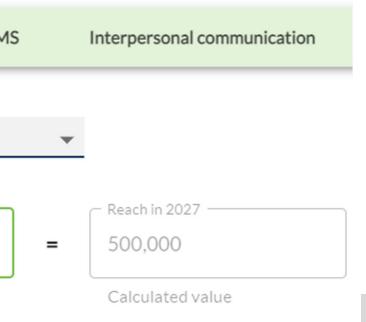
The main user input to the tool is to specify the number of women reached by SBC interventions, where users can input reach as:

- Annual reach for each of the five years, or
- Expected reach in the final year, or
- Cumulative reach over five years

Assistance is built in to help determine your reach for different interventions

Mass media	Mid	Idle media Phone/SM
Interventions Radio	•	Calculation options By number of media spots
Media spots aired in 2027	x	Women listeners per ad 10,000
Please enter number		Please enter number





Review Results: Impact

 Impact results
 Cost-effectiveness results

 SBC investments from 2023 to 2027 are estimated to yield the following cumulative outcomes:

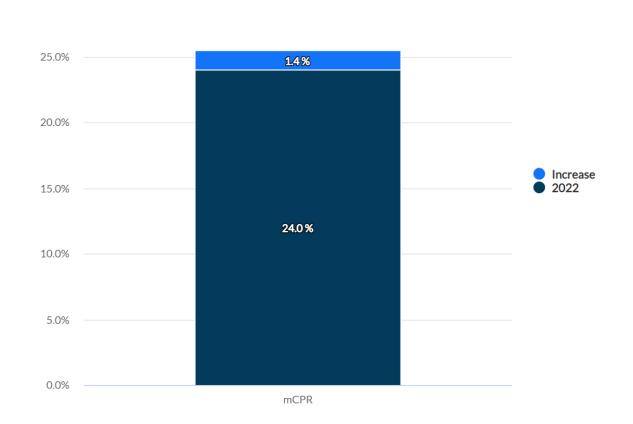
 1.4 percentage point increase in mCPR

129,000 additional FP users by 2027

- 124,000 unintended pregnancies averted (cumulatively over 5 years)
 - 7,000 maternal disability-adjusted life years (DALYs) averted (cumulatively over 5 years)

Projected increase in mCPR

30.0%





Review Results: Cost-effectiveness

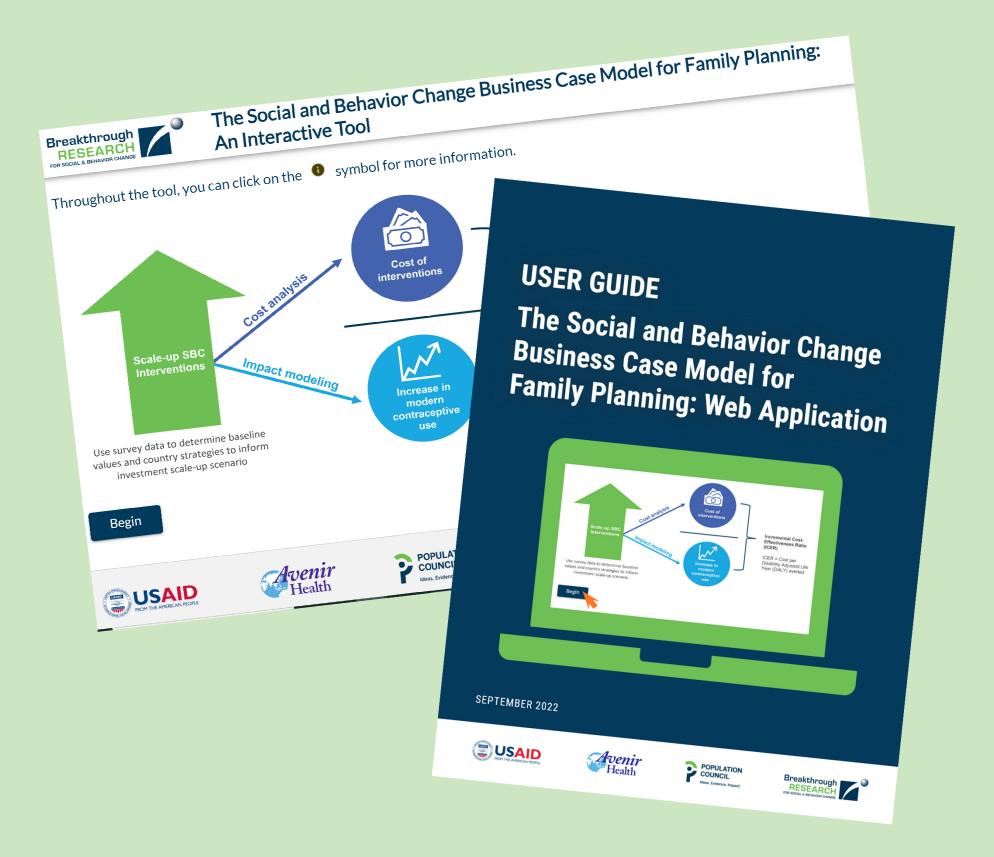
Impact results Cost-effectiveness results	esults	
Select benchmark:		Cost per maternal DALY averted \$7,500
National	0	\$7,000
		\$6,500 \$6,000
Cost-effectiveness determination		\$5,500 \$5,000
Threshold for "highly cost-effective" (1 X GDP Threshold for "cost-effective" (3 X GDP per cap		\$4,500
Cost-effectiveness determination:	highly cost-effective	\$3,500
		\$3,000 \$2,500
		\$2,000
		\$1,000 \$1,076
		\$0 Cost per Maternal DALY Averted







Tools You Can Use



SBC Business Case Model Tool







Go to www.menti.com and use the code 5571 6972

Instructions

Go to www.menti.com

Enter the code

5571 6972



Or use QR code

🞽 Mentimeter



Key Message

Costing and cost-effectiveness analyses are doable and resources on methodologies and tools you can use are available.



Breakthrough RESARCH's Tools





Guidelines for Costing SBC Health Interventions Pathways to SBC Impact SBC Costing Tool



SBC Costing Community of Practice



Guidelines for Costing SBC Health Interventions



Guidelines for Costing SBC

These guidelines:

- Provide a framework for estimating the costs of interventions for SBC
- Outline use cases for different types of audiences







Implementing an SBC intervention





Donor supporting, or considering supporting, costing studies SBC program manager or funder using cost estimates generated from other settings

Journal editor reviewing an SBC costing study

Guidelines for Costing SBC

Methodological Principles of **SBC Costing**

The guidelines include 17 principles that cover the full range of a costing exercise. These are grouped into four sections:



Resource Use Management Principles 6-10

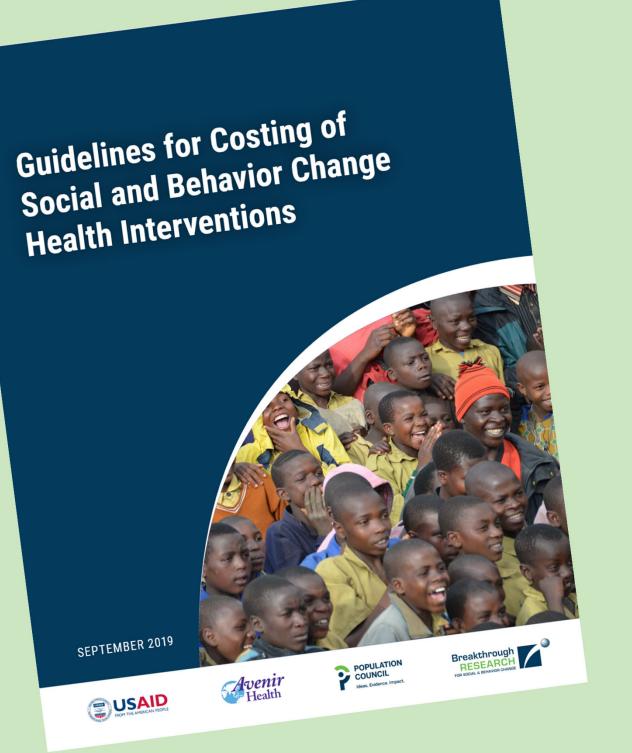


Pricing and Valuation Principles 11-14



Analyzing and Presenting **Results** Principles 15-17



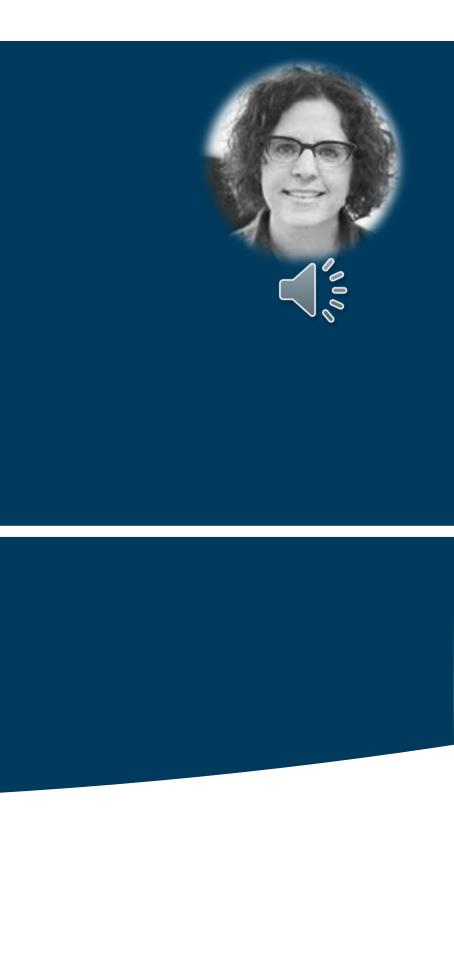


Guidelines for Costing SBC







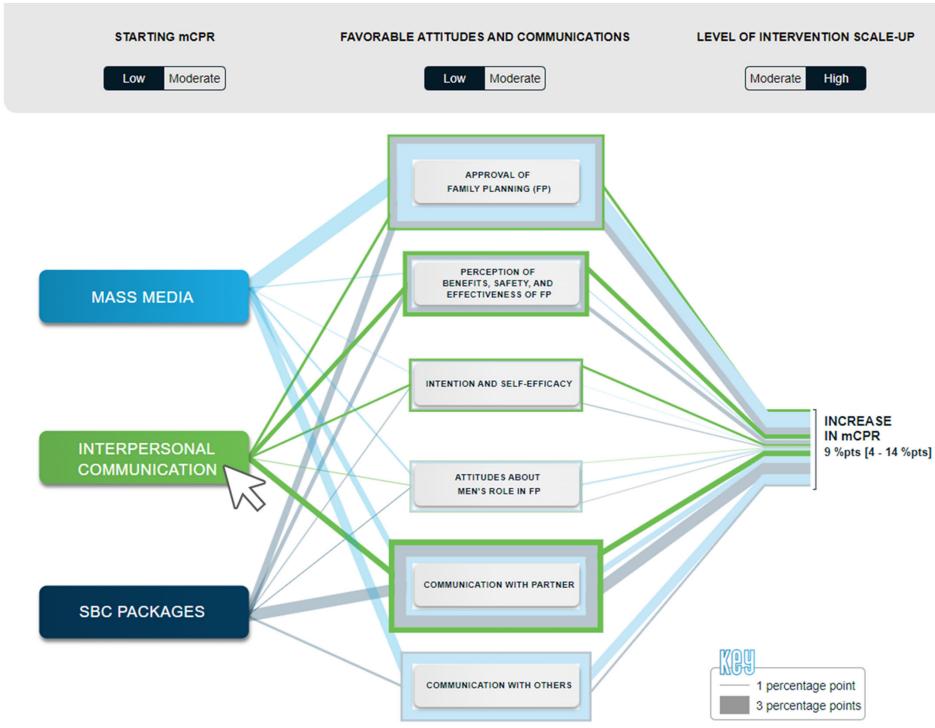


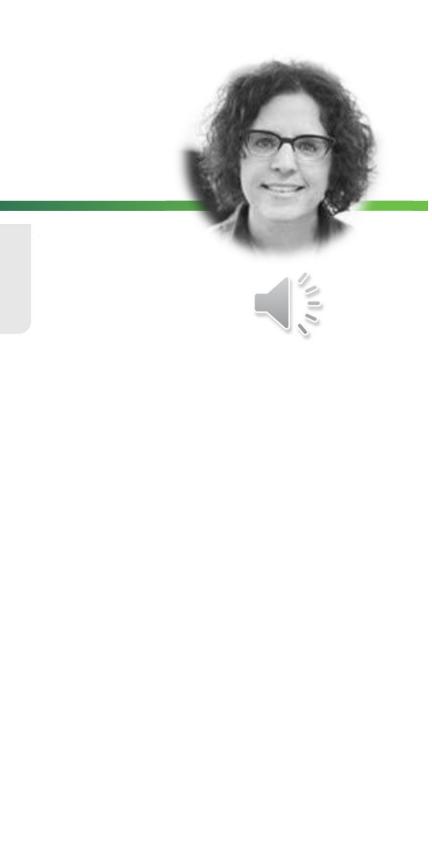
Exploring Pathways to SBC Impact

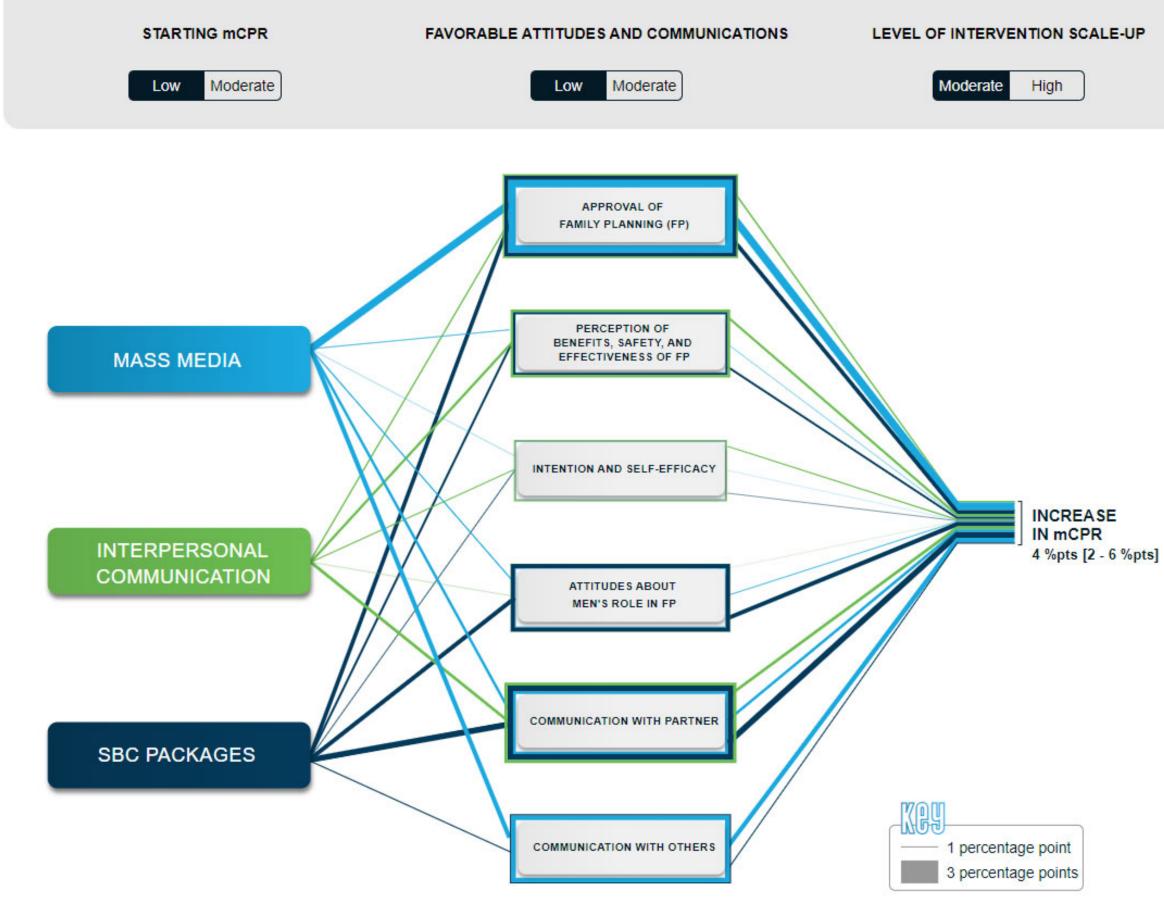
- Interactive graphic explores the pathways through which different types of SBC interventions can increase modern contraceptive use.
- The graphic can be used to advocate for increased investments in SBC, and to start conversations about the need to prioritize SBC investments based on country context.

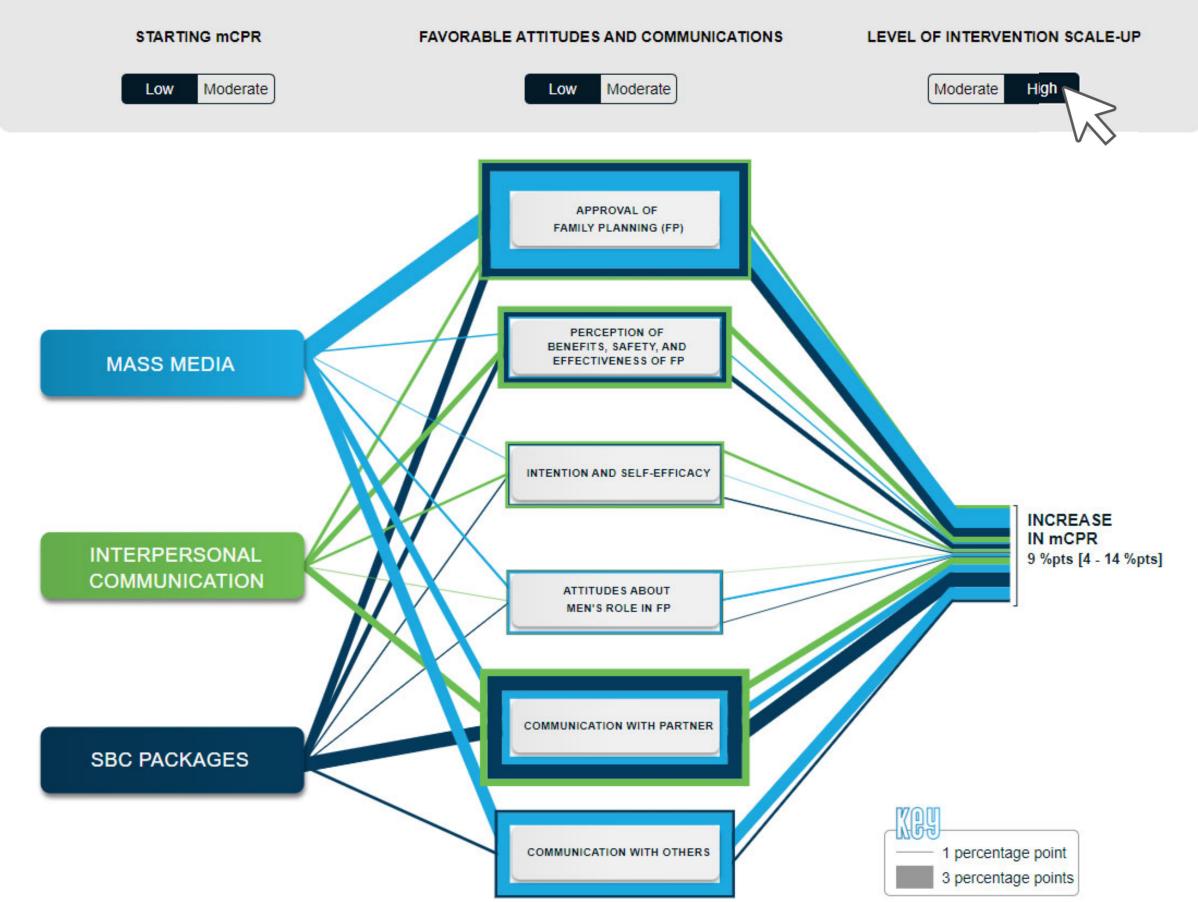


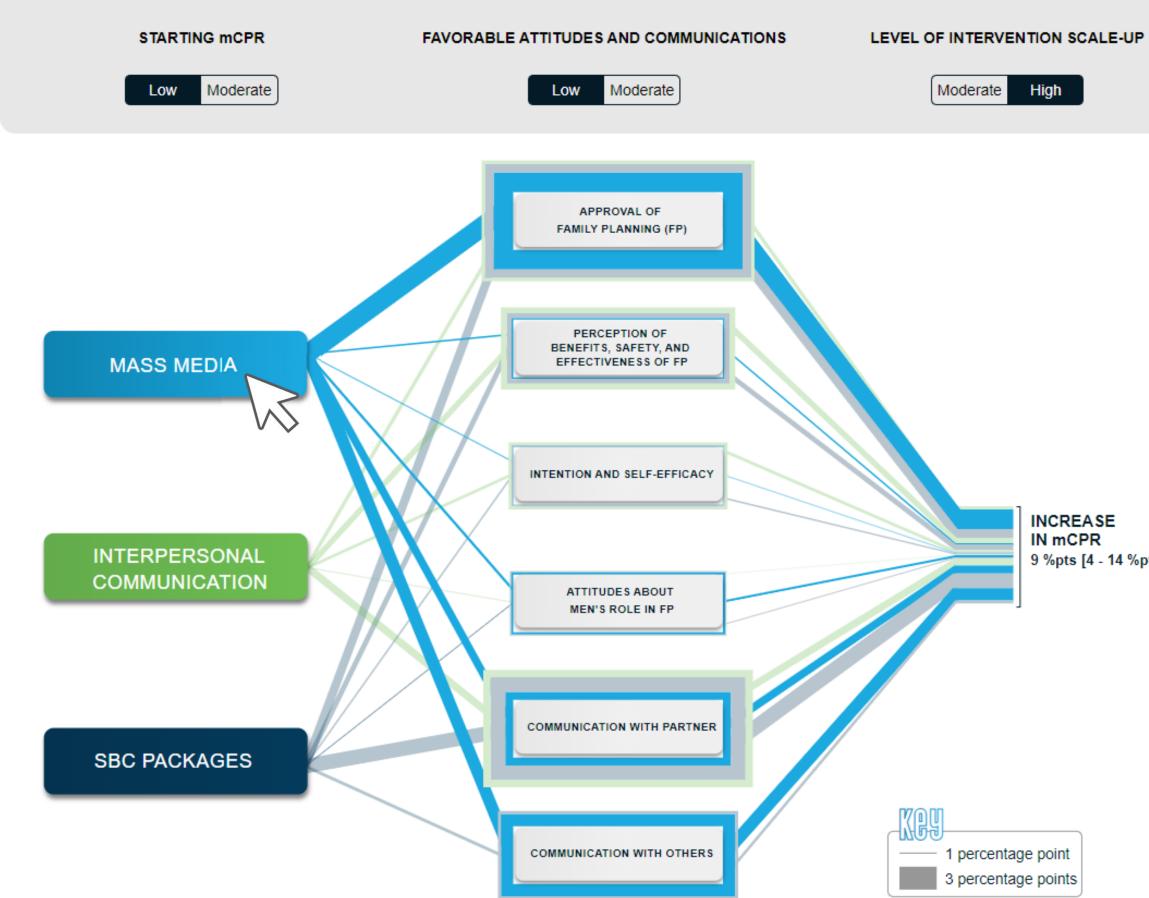
Exploring Pathways to SBC Impact



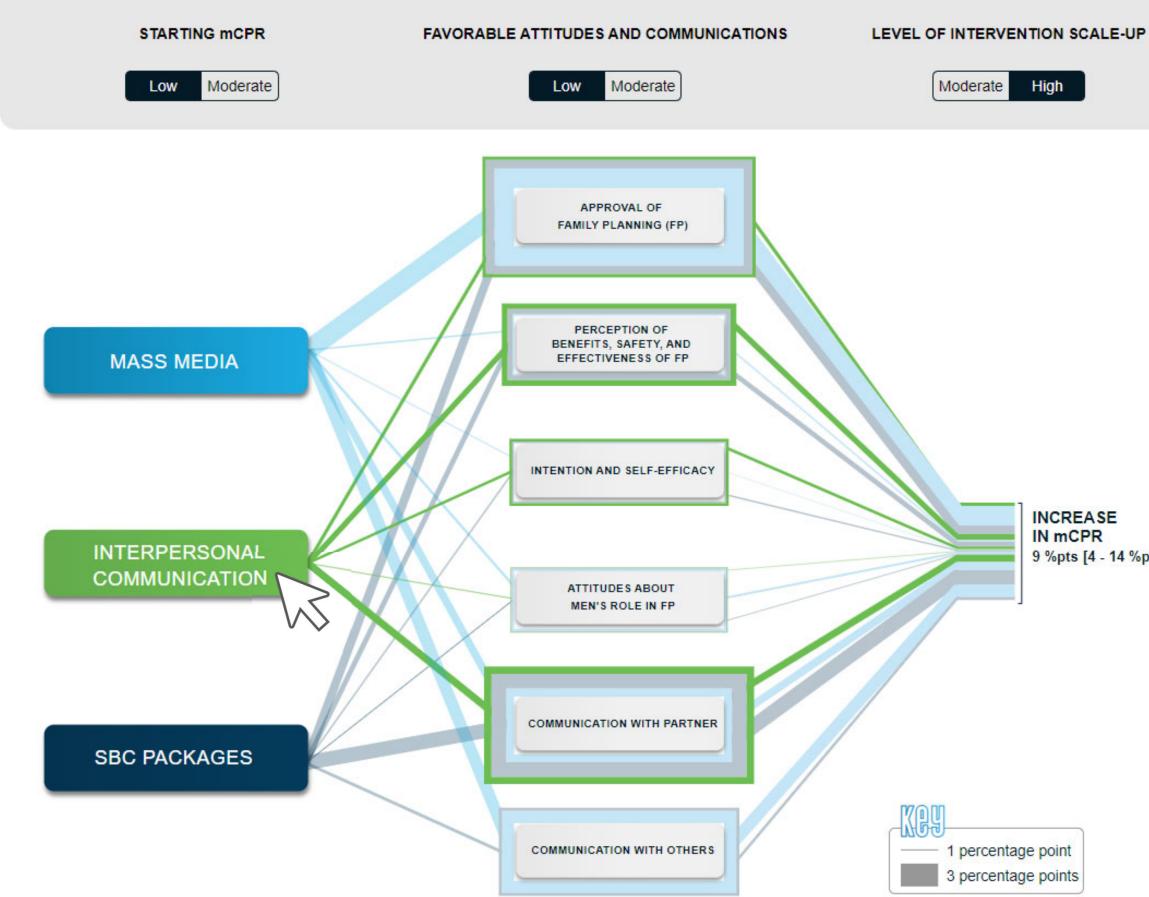






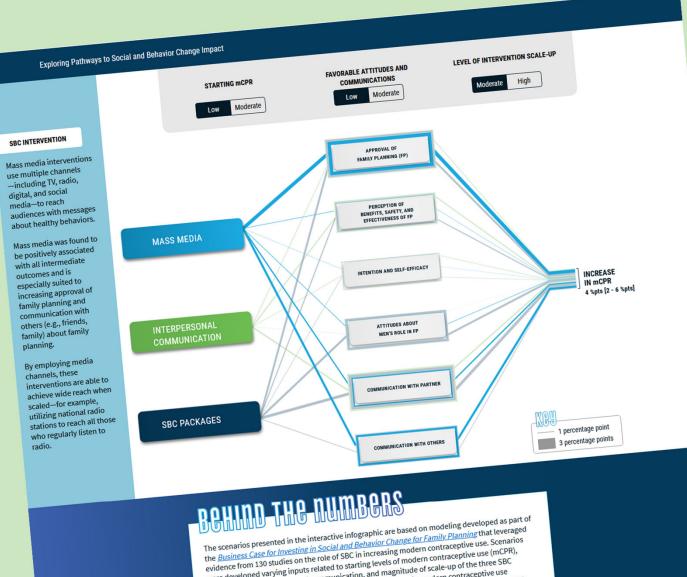


IN mCPR 9 %pts [4 - 14 %pts]



INCREASE IN mCPR 9 %pts [4 - 14 %pts]

Tools You Can Use



Exploring Pathways to SBC Impact



evidence from 130 studies on the role of SBC in increasing mouern contraceptive use, scenarios were developed varying inputs related to starting levels of modern contraceptive use (mCPR), were developed varying inputs related to starting levels of modern contraceptive use (mCPR), starting levels of attitudes and communication, and magnitude of scale-up of the three SBC starting levels of attitudes and communication, and magnitude of scale-up of the three SBC interventions. Results indicate the percentage point increase in modern contraceptive use interventions, results indicate the percentage point increase in modern contraceptive use projected as a result of scaling up SBC over a five-year period. This modeling assumes that SBC projected as a result of scaling up SBC over a five-year period. This modeling assumes that SBC scale-up would result in changes to intermediate outcomes and contraceptive use that mirror the scale-up would result in changes to intermediate outcomes and contraceptive use that mirror median impact seen in the literature, and that family planning services and commodities are median impact seen in the interature, and that family planning services and commodities are accessible so that the projected gains can be realized. See Appendix 4 of the Business Case for more

These results are only meant to be illustrative and do not include the additional mCPR increases I nese results are only meant to be illustrative and do not include the additional mCPR increases due to intermediate outcomes not represented here. Contact <u>Breakthrough RESEARCH</u> to find out

about developing country-specific modeling results.

(Note: This interactive graphic is optimized for use in Google Chrome (version 81.0.4044.138) and Microsoft Edge (version 83.0.478.37) on your desktop or laptop computer.)





SBC Costing Tool

- Assists SBC implementers, donors, and researchers with planning and budgeting.
- Allows users to select the characteristics of an SBC intervention to generate a range of estimated unit costs that can then be used to either estimate the potential reach of an intervention based on a given budget or estimate an intervention budget based on an intended reach.
- The embedded user guide walks through five steps to use the tool and estimate intervention reach or estimate budget.







SBC Costing Tool

I. Use the dropdown menus to select SBC intervention characteristics

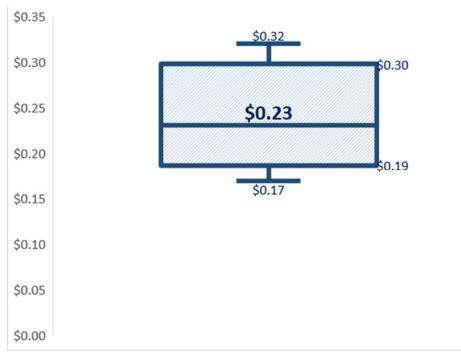
Country	Mali	
SBC intervention type	Print	Click here to review SBC intervention types
Intervention intensity	Low	Click here to review intervention intensity
Health area	FP/RH	Click here to review health areas
Ownership type	Public	Click here to review ownership
Scale	Regional	Click here to review scale

2. Review estimated unit costs

Estimated unit cost based on selections \$

0.23 per person exposed

Expected range of SBC costs for this intervention are shown in the chart below



Mali / Print / Low Intensity / FP/RH / Public Ownership

While the tool presents an estimated rate of unit costs, the overall range for different SBC interventions vary substantially. Further details on reported unit costs can be found in the SBC Cost Repository.

3. Enter in estimated reach		4.
Enter reach	1,000,000	Enter
Median unit cost	\$0.23	
Lower estimate	\$0.17	
Higher estimate	\$0.32	

Intervention	Reach	M	ledian cost	Low cost		High cost
Print	1,000,000	\$	230,000.00	\$ 170,000.00	\$	320,000.00

5. Copy row above into table below - paste values

Intervention	Reach	м	edian cost		Low cost	- 1	High cost
Group IPC	200,000	\$	1,896,000	\$	1,292,000	\$	3,068,000
Individual IPC	50,000	\$	484,500	\$	330,000	\$	783,500
Radio	1,000,000	\$	350,000	\$	260.000	\$	490,000
Kadio	1,000,000	3	350,000	>	200,000	3	470,000
Print	1,000,000	\$	230,000	\$	170,000	\$	320,000
		-					
TOTAL	2,250,000	\$	2,960,500	\$	2,052,000	\$	4,661,500

SBC Costing Tool Estimate Intervention Budget





Tool

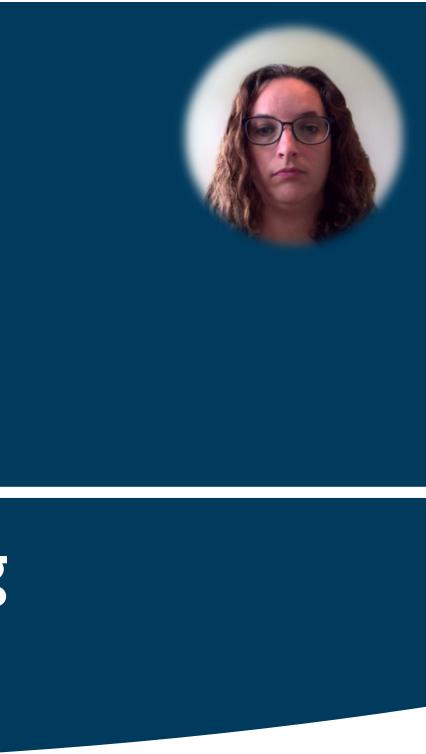




SBC Costing







To help to fill evidence gaps and support implementing partners and others working on costing of SBC approaches, including those supporting family planning programs, Breakthrough RESEARCH initiated and nurtured a Community of Practice around SBC costing, including a series of briefs that highlight important issues and practices for SBC costing.



1) Costing Social and Behavior Change Programming—The Role of the Denominator

> Explains how costs can be linked to denominators for comparisons with other interventions.

Program outputs	Health behaviors	Health impact
Woman of reproductive age	Person seeking family	Unintended pregnancies
Family planning user	planning services	averted
Person exposed	New family planning adopter	Pregnancy complications averted
Person informed	Continuation of family	Maternal lives saved
Person attended/	planning	
participating	Couple year protection by family planning	Healthy life years (HLYs) saved
Person campaign recall	Person adopting a specific	Deaths averted
SMS sent	family planning method	Disability-adjusted life years
Provider trained		(DALYS) averted
Group session		
School or class participating		



Understanding the Costs of **SBC Social Media Interventions**

How to consider the appropriate denominator and what costs need to be considered that may be unique to delivering SBC using social media.



Reach—the number of individuals

exposed to SBC content via a social media platform, which can be further segmented into "paid reach" if the reach was due to social media advertising promoting the content (e.g., Facebook ads) and "organic reach" if the content was due to being part of a regular social media feed.



Engagement—the number of times people engaged with content through reactions, comments, shares, mentions, likes, etc.

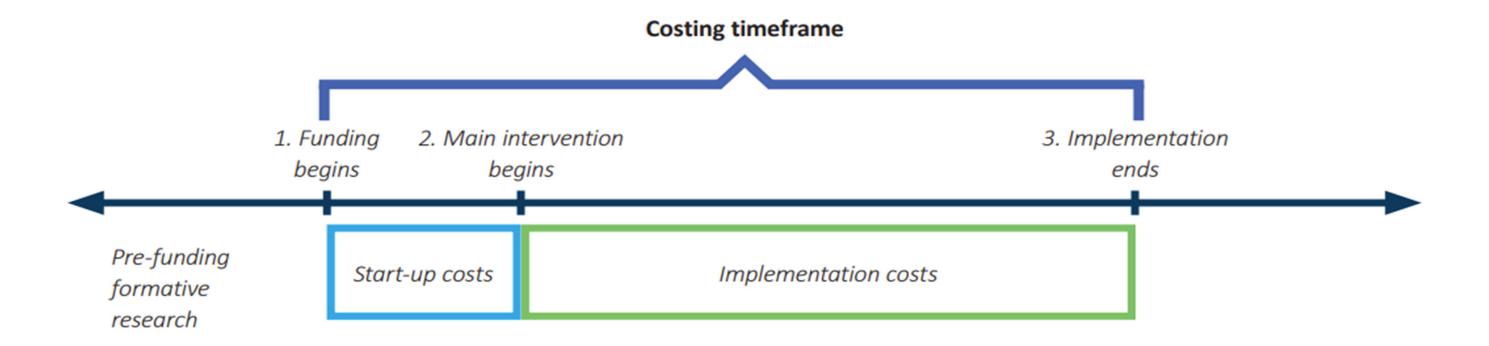


Views—for videos shared on social media, the number of times the video was viewed, which can be further subdivided based on the amount of time spent viewing the content (e.g., at least 30 seconds, complete view).



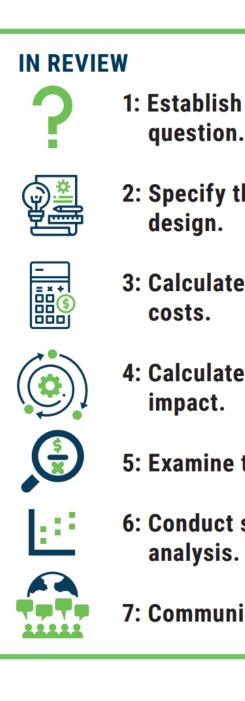
Capturing the Start-up Costs Associated with Social and **Behavior Change Interventions**

How to capture these initial costs separately and allocate them appropriately over the life of the intervention.



Are Integrated Social and Behavior Change Interventions Costeffective? A methodological approach

> Outlines steps to examine the cost-effectiveness of integrated SBC programs that can be used for future cost-effectiveness analyses.





1: Establish the research

2: Specify the overall study

3: Calculate program

4: Calculate program

5: Examine the ICER.

6: Conduct sensitivity

7: Communicate the results.

Tools You Can Use





Fostering a **Community of Practice**





Go to www.menti.com and use the code 5571 6972

Instructions

Go to www.menti.com

Enter the code

5571 6972



Or use QR code

🞽 Mentimeter



Calls to Action



Calls to action

PROGRAMS: During the program planning stage, determine at the outset if a cost-effectiveness analysis is planned, which necessitate including costing in your program.

RESEARCHERS/M&E: Work toward improving the capture of program impact data that allow for cost-effectiveness analysis of integrated programs, but also recognize that not all the benefits from SBC interventions may be easily captured in a common denominator.

DONORS: Provide programs with specific requirements for how costing should be done, using the Guidelines for Costing of Social and Behavior Change Health Interventions.

DONORS: Be realistic about what cost-effectiveness questions currently can and cannot be answered, and exercise caution about benchmarking.

DONORS: When considering support for programs, work toward building local organizational capacity for managing expenditure reporting, and champion efforts to improve the reporting of SBC expenditures among all implementing organizations.



Reflecting on the Calls to Action: Julianne Weis, USAID





Go to www.menti.com and use the code 5571 6972

Instructions

Go to www.menti.com

Enter the code

5571 6972



Or use QR code

🞽 Mentimeter



Discussion and Q&A



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.

APRIL 2023

USAID NOT THE AND REAL

Ø

兽

Costing for Family Planning Social and Behavior Change Programming

> POPULATION COUNCIL Ideas. Evidence. Impact.

Breakthrough RESEARCH Legacy and Learning Series

> Breakthr BESE/





THANK YOU



BreakthroughAR

@Breakthrough AR



(in)

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.









Breakthrough_AR