Costing for family planning social and behavior change—Slide deck

Breakthrough RESEARCH

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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

- **4th** and final 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 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

1. 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
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Costing for Family Planning SBC

- Synthesize Existing Evidence
- Generate New Evidence
- Foster Evidence Generation by Others
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.
Documenting the Costs of SBC Interventions for Health in Low- and Middle-income Countries
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

<table>
<thead>
<tr>
<th>Cost Elements Included in the Database:</th>
<th>A. General Study Information</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B. Intervention Details</td>
</tr>
<tr>
<td></td>
<td>C. Contextual Information</td>
</tr>
<tr>
<td></td>
<td>D. Cost Information &amp; Cost per Output</td>
</tr>
<tr>
<td></td>
<td>E. CEA Results (where applicable)</td>
</tr>
<tr>
<td></td>
<td>F. Cost Measurement Details</td>
</tr>
</tbody>
</table>
Welcome to the SBC Cost Data Repository

The SBC Cost Data Repository was funded by USAID and developed by Breakthrough RESEARCH. The repository is a centralized database that contains social and behavior change (SBC) cost data from 197 studies in the peer review and grey literature, with data from 1973 to 2021. The repository was originally developed by Avenir Health as part of the Business Case for Investing in Social and Behavior Change for Family Planning.

SBC donors, implementers, and researchers can use this database to assist with planning and budgeting. The unit costs in this database can also be found in the Global Health Cost Consortium’s Unit Study Cost Repository at:

http://ghcosting.org/pages/data/user/app/live the “Guide” tab for further information on how to use the cost repository.

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Avenir Health
POPULATION COUNCIL
Breakthrough RESEARCH
FOR SOCIAL & BEHAVIOR CHANGE

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Version 2.0 released April 1, 2022

SBC Cost Repository
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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

• Synthesize literature on impact of SBC on modern contraceptive use
• Synthesize literature on SBC unit costs
• Build models that can examine the cost-effectiveness of family planning SBC interventions
• Apply model to country-specific illustrative investment scenarios
## The Business Case for Investing in SBC

### Results

<table>
<thead>
<tr>
<th>Results</th>
<th>Guinea</th>
<th>Niger</th>
<th>Togo</th>
<th>Zambia</th>
</tr>
</thead>
<tbody>
<tr>
<td>SBC investment over 5 years</td>
<td>$6.1 mil</td>
<td>$2.7 mil</td>
<td>$3.2 mil</td>
<td>$38 mil</td>
</tr>
<tr>
<td>Percentage point increase in mCPR</td>
<td>2.3</td>
<td>1.4</td>
<td>6.1</td>
<td>5.0</td>
</tr>
<tr>
<td>Additional family planning users by year 5</td>
<td>83,000</td>
<td>86,000</td>
<td>139,000</td>
<td>535,900</td>
</tr>
<tr>
<td>Cumulative unintended pregnancies averted</td>
<td>66,000</td>
<td>81,000</td>
<td>127,000</td>
<td>578,800</td>
</tr>
<tr>
<td>Cumulative disability-adjusted life years (DALYs) averted</td>
<td>7,000</td>
<td>5,000</td>
<td>7,000</td>
<td>46,400</td>
</tr>
<tr>
<td>Cost per additional family planning user year</td>
<td>$33</td>
<td>$19</td>
<td>$14</td>
<td>$30</td>
</tr>
<tr>
<td>Cost per unintended pregnancy averted</td>
<td>$104</td>
<td>$49</td>
<td>$39</td>
<td>$84</td>
</tr>
<tr>
<td>Cost per DALY averted</td>
<td>$946</td>
<td>$737</td>
<td>$656</td>
<td>$2,278</td>
</tr>
</tbody>
</table>

**Cost-effectiveness determination based on national GDP per capita thresholds**

- Highly cost-effective
- Cost-effective
- Highly cost-effective
- Cost-effective
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 cost-effectiveness of these interventions.
SBC Business Case Model Tool

- Select country and time frame and review model parameters
- Review SBC effectiveness odds ratios
- Review unit costs
- Specify intervention reach each year
- Sense check intervention reach
- Review results

OR = 2.0

Tools You Can Use

Foster Evidence Generation

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

1. Population, fertility intentions, mCPR
2. Method mix
3. Intermediate outcomes of family planning use (e.g., partner communication)
4. Data related to maternal deaths and cost-effectiveness calculations
5. Media ownership and use (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

Program

National

Start year *(required)*  End year

2023  2027
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.
Review Results: Impact

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
Review Results: Cost-effectiveness

<table>
<thead>
<tr>
<th>Impact results</th>
<th>Cost-effectiveness results</th>
</tr>
</thead>
</table>

Select benchmark:

- National

Cost-effectiveness determination:

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Threshold for &quot;highly cost-effective&quot; (1 X GDP per capita)</td>
<td>$2,254</td>
</tr>
<tr>
<td>Threshold for &quot;cost-effective&quot; (3 X GDP per capita)</td>
<td>$6,762</td>
</tr>
<tr>
<td>Cost-effectiveness determination:</td>
<td>highly cost-effective</td>
</tr>
</tbody>
</table>

Graph showing cost per maternal DALY averted.
SBC Business Case Model Tool

Tools You Can Use
Foster Evidence Generation

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

Throughout the tool, you can click on the symbol for more information.

Effectiveness of SBC Interventions
Cost of Interventions
Impact Modelling
Increase in Demand and Contraceptive Use

USER GUIDE
The Social and Behavior Change Business Case Model for Family Planning: Web Application

SEPTEMBER 2022
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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

Cost analyst
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:

- Study Design Principles 1–5
- Resource Use Management Principles 6–10
- Pricing and Valuation Principles 11–14
- Analyzing and Presenting Results Principles 15–17
Guidelines for Costing of Social and Behavior Change Health Interventions
Exploring Pathways to SBC Impact
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
The image shows a network diagram illustrating the relationship between starting mCPR, favorable attitudes and communications, and the level of intervention scale-up. The diagram includes nodes for mass media, interpersonal communication, and SBC packages, linking to nodes for approval of family planning (FP), perception of benefits, safety, and effectiveness of FP, intention and self-efficacy, attitudes about men's role in FP, communication with partner, and communication with others.

Key points:
- Increase in mCPR: 9% points (4-14% points)
- The network shows connections and overlaps between different factors affecting mCPR.

The diagram is a visual representation of how various factors contribute to the scale-up of mCPR interventions.
Exploring Pathways to SBC Impact

Tools You Can Use

Foster Evidence Generation
SBC Costing Tool
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

1. Use the dropdown menus to select SBC intervention characteristics

2. Review estimated unit costs

3. Enter in estimated reach

4. Adjust unit costs, if necessary

5. Copy row above into table below - paste values

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.
Welcome to the SBC Costing Tool

The SBC Costing Tool was funded by USAID and developed by Breakthrough RESEARCH. The costing tool is based on analyses of 157 SBC unit cost observations from studies in the peer reviewed and grey literature. SBC donors, implementers, and researchers can use this tool to assist with planning and budgeting. The estimates generated in this tool are best estimates based on the literature; however, actual unit costs may vary depending on external factors. See the “Guide” tab for further information on how to use the tool.

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Fostering an SBC Costing Community of Practice
Fostering a Community of Practice

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.
Fostering a Community of Practice

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.

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

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.
Fostering a Community of Practice


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

IN REVIEW

1. Establish the research question.
2. Specify the overall study design.
3. Calculate program costs.
4. Calculate program impact.
5. Examine the ICER.
6. Conduct sensitivity analysis.
7. Communicate the results.
Fostering a Community of Practice

Tools You Can Use

Foster Evidence Generation
Mentimeter

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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
Mentimeter

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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.
Costing for Family Planning
Social and Behavior Change Programming

APRIL 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.

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