Investing in social and behavior change is cost-effective for increasing modern contraceptive use in Guinea

Social and behavior change (SBC) interventions are generally considered an essential part of high-quality health services, yet gaps in information on the cost and impact of SBC means decision-makers have under-appreciated and under-funded SBC. To address this, Breakthrough RESEARCH has taken a new approach to link evidence to potential investment decisions with their recently published Business Case for Investing in Social and Behavior Change for Family Planning that leveraged evidence from 130 studies on SBC impact and 53 studies on SBC cost. Collectively, this evidence showed that:

1. **SBC IS EFFECTIVE IN INCREASING MODERN CONTRACEPTIVE USE.**
   Studies show that SBC positively influences intermediate outcomes that impact modern contraceptive use, such as attitudes, partner communication and others. The strength of impact varies depending on the type of intervention and which intermediate outcome is targeted (Figure 1).

2. **RESULTS INDICATE SBC IS A HIGHLY COST-EFFECTIVE INTERVENTION.**
   Cost per disability adjusted life year (DALY)$^1$ averted is a common metric for assessing cost-effectiveness. This analysis found that the cost per DALY averted for family planning SBC was US$468 in Egypt, $591 in the Philippines, $1,051 in Zambia, and $438 in Guinea. These results fall below World Health Organization thresholds for being considered a highly cost-effective intervention.$^2$

3. **SBC CAN GENERATE POSITIVE RETURNS ON INVESTMENT.**
   The Breakthrough RESEARCH business case modeling in Zambia found that every $1 invested in scaling-up SBC saves between $2.40 and $5.30 when accounting for direct health care costs and productivity losses. In Guinea, $1 invested in SBC generates between $2.30 and $6.10 in savings.

*Figure 1: SBC Impact Pathways to Increased Modern Contraceptive Use*
SBC FOR FAMILY PLANNING: A COST-EFFECTIVE INVESTMENT FOR GUINEA

The Breakthrough RESEARCH Business Case modeled SBC cost-effectiveness and return on investment in Guinea, combining the evidence on the cost and effectiveness of SBC with Guinea-specific data on its current context and planned SBC scale-up aligned to the National Budgeted Action Plan for Family Planning (2019–2023).

IMPACT
Over five years (2019–2023), SBC investments in line with national strategies are estimated to contribute:

- 166,500 additional modern contraceptive users by 2023
- 3 percentage point increase in modern contraceptive prevalence rate by 2023
- 135,700 averted unintended pregnancies cumulatively
- 34,800 DALYs saved cumulatively

RETURN ON INVESTMENT
Every $1 invested in SBC in Guinea can save $2 to $6 in direct health care costs (related to pregnancy and childbirth) and productivity losses (from reduced maternal mortality and morbidity).

Cost per DALY Averted
$438

Guinea Gross Domestic Product per Capita
$822

COST
Achieving these impacts would require a 5-year investment in SBC interventions estimated at $12.2 million. An additional $3m would be needed for direct service delivery costs related to additional users taking up services.

COST-EFFECTIVENESS
The SBC intervention scale-up scenario is considered highly cost-effective based on the World Health Organization standard of less than one times gross domestic product per capita.

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