

Advocating for Social and Behavior Change in Family Planning Programs

A MESSAGE FRAMEWORK





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INTRODUCTION

About This Resource

This message framework is intended to be used by social and behavior change (SBC) practitioners to advocate with influential organizations, coordinating bodies, and individuals to increase support for SBC in family planning and reproductive health (FP/RH). The framework provides guidance on messages to use with stakeholders who may be unaware or skeptical of the benefits of SBC in the FP/RH arena or have limitations in their ability to include SBC in their portfolio. This resource provides concrete talking points including evidence of SBC impact on FP/RH outcomes to make the case for investment in SBC.

How Was This Resource Developed?

In 2017–2018, Breakthrough ACTION, with support from the United States Agency for International Development (USAID), conducted a landscape analysis of SBC in FP/RH. The focus of that effort was to define the goals and key changes required to elevate the importance of SBC in global FP strategies and agendas. The analysis included:

- A review of publicly available information on the relative importance of SBC in FP/RH-related strategies, funding, and programming.
- Interviews with key stakeholders.
- Validation with FP and SBC experts.

The findings were then used to develop this message framework to inspire key decision makers and influencers to elevate SBC programming within their portfolios and prioritize SBC as part of their FP investments and planning.

This message framework was updated in 2020 to include new resources and research.

ADVOCATING FOR SOCIAL AND BEHAVIOR CHANGE IN FAMILY PLANNING

Why Do We Need to Advocate for SBC in FP?

The findings from the landscape analysis demonstrated that SBC is an essential component in achieving global development goals. The Social and Behavior Change in Family Planning Programming: Global Influence Strategy notes that, “Increasing the quality and quantity of SBC investments in FP programming will be critical for the FP sector to reach its high-level goals—the FP2020 goal of ensuring 120 million additional contraceptive users by 2020 and the third Sustainable Development Goal of ensuring universal access to sexual and reproductive health services and rights by 2030. Studies have shown that complementing investments in commodities and supplies with strong SBC campaigns yield higher usage.”¹

The Business Case for Investing in SBC for FP shows that SBC increases the use of FP, provides a strong return on investment, and costs less than \$200 per disability-adjusted life years averted.²

This message framework builds on all these inputs and charts the course for SBC practitioners to make the case for investments in SBC for FP/RH.

Describing Social and Behavior Change

It is important to note that while the acronym SBC is used in this resource for brevity, SBC practitioners are cautioned against using “SBC” when talking to those who may be unaware or skeptical of the benefits of SBC. Avoiding the use of jargon and talking about relevant examples of SBC instead (e.g., advocacy, demand generation to increase client use of services/products, capacity building to improve interpersonal communication and counseling skills and/or address provider biases, etc.) can be much more effective in persuading a stakeholder of the value and importance of investing in an area of SBC for FP. This is particularly important to remember when considering the messages to use with a stakeholder to gain their support.

¹ Social and Behavior Change in Family Planning Programming: Global Influence Strategy. Johns Hopkins Center for Communication Program and Camber Collective. 2018.

² Rosen, J.E., Bellows, N., Bollinger, L., DeCormier Plosky, W., and Weinberger, M. 2019. *The Business Case for Investing in Social and Behavior Change for Family Planning*. Breakthrough RESEARCH. Washington DC: Population Council.

WHY A MESSAGE FRAMEWORK?

Why Use This Message Framework

SBC practitioners are likely to come across key stakeholders who support or do not support investment in, and use of, SBC. In theory, stakeholders may agree to the need for greater inclusion of SBC in programming to achieve FP goals. However, not all stakeholders will agree with that opinion. Their reasons may include insufficient funding, disagreement on the value for money, questioning time to impact, or misunderstanding what SBC entails. Some stakeholders may feel it is not their role to engage in this area or may be unaware of the evidence that exists around the impact that SBC programming has on FP uptake.³ This message framework can help SBC practitioners identify their stakeholder's motivations and priorities and strategize how to get their support for SBC in FP.

Essential Elements in Advocating for SBC in FP

- 1 Know who your stakeholder is.** It is important to know who has the decision-making power, who controls investments and what that person knows, thinks, and feels about SBC in FP.
- 2 Understand the barriers and opportunities facing your stakeholder.** What internal and external challenges do stakeholders face in investing in SBC? What opportunities exist that may facilitate greater investment in SBC?
- 3 Determine overarching messages that will appeal to your stakeholder.** Based on your understanding of the barriers and opportunities facing your stakeholder, what messages are likely to resonate that will influence your stakeholder's decision making?

³ Social and Behavior Change in Family Planning Programming: Global Influence Strategy. Johns Hopkins Center for Communication Program and Camber Collective. 2018.

KEY MESSAGING PILLARS FOR INVESTMENT IN SBC FOR FP

The global influence strategy identified common barriers and opportunities faced by many stakeholders:



These informed the development of three key messaging pillars to use when advocating for investment in SBC for FP. The messaging pillars provide strong and persuasive message points to use with stakeholders as well as supportive statements that respond to questions or counter-arguments that may arise.

KEY MESSAGING PILLARS FOR INVESTMENT IN SBC FOR FP



Key Messaging Pillars

1

SBC approaches complement service delivery

Supporting Points

- SBC includes a range of approaches that can, and should, be applied **across FP programming**—not just demand
- Investing in SBC **increases effectiveness** of clinical investments, services
- Informed by local needs, necessary for achieving country priorities, often developed with **community collaboration**



2

SBC is rooted in global evidence and best practices

- SBC has **clear evidence of increasing successful outcomes in FP interventions**
- Strong SBC investments have been **refined over 30 years based on high impact best practices**
- **Local evidence/data** is used to inform SBC programming; examples available from all regions



3

SBC demonstrates a high return on investment in both the short and long-term

- SBC **maximizes FP investments** across contexts and makes use of a variety of affordable approaches
- Strategic SBC uses a variety of **affordable approaches to generate demand**
- **Both short-term and long-term** results are reached and measured with effective evaluation



KEY STAKEHOLDERS



STAKEHOLDER CATEGORIES

At a high level, there are five categories of actors, all with their own roles, needs, barriers, and opportunities. Decision makers at the country and donor level are the highest priority to influence; they have strong influence over priorities at a country level and make critical decisions about investments. Other actors, such as implementing partners and coordinating bodies, can play a pivotal role in helping influence the decisions of the donors and countries themselves.³ For the purposes of this resource and the agenda of advocating for increased funds for SBC, the illustrative profiles that follow focus on country- and donor-level decision makers.



³ Social and Behavior Change in Family Planning Programming: Global Influence Strategy. Johns Hopkins Center for Communication Program and Camber Collective. 2018.

COUNTRY DECISION MAKERS

ROLE: Develop, oversee national plans, programming, and policy; and influence donors and implementing partners

NEEDS: Show results in FP uptake

BARRIERS: Over-burdened, multiple priorities

OPPORTUNITIES: Interested to meet commitments to FP2020 and improve country economy and health

IMPLEMENTING PARTNERS

ROLE: Implement FP interventions and programming and influence the design of key policies and plans

NEEDS: Good working relationships with donor/country decision makers, funding

BARRIERS: Funding tied to specific scope of works and outcomes

OPPORTUNITIES: Vehicle for cross-fertilization of ideas, opportunity to show meaningful impact



COORDINATING BODIES

ROLE: Set high-level goals and provide processes and tools for enabling better coordination among the actors

NEEDS: Evidence-based tools, donor/country approval

BARRIERS: Reliance on other players to really move things forward; limited technical capacity in SBC

OPPORTUNITIES: Well-recognized; able to bring players together under common goals

DONORS (FIELD)

ROLE: Directly fund programming in-country and coordinate with country governments/officials and stakeholders

NEEDS: Show results for continued funding from headquarters, in-country government support

BARRIERS: Investments need to be directly linked to uptake in FP, need results quickly

OPPORTUNITIES: Increased funding and recognition with demonstrated success

DONORS (HEADQUARTERS)

ROLE: Set high level policies and objectives for the field offices and develop tools/processes in support of field office work

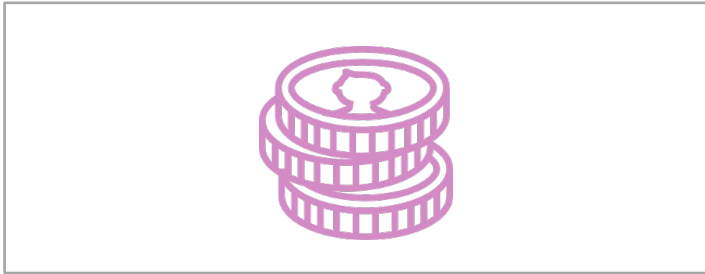
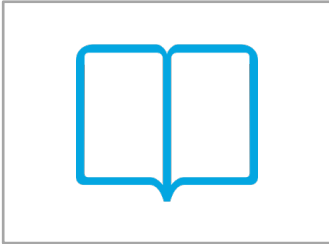
NEEDS: Need to show value for money, measurable outputs

BARRIERS: Limited funds, short timelines to demonstrate success

OPPORTUNITIES: Eager to show impact, and get recognition globally

INFLUENCING STAKEHOLDERS

Whether you want to influence implementing partners, country decision makers, coordinating bodies, or donors in the field or at headquarters level, it is essential to know and respond to the unique mindset and motivations for each stakeholder, which may differ from others within the same category. Opinions and attitudes towards SBC may cut across organizational affiliations, therefore, the message framework divides these stakeholders into four different segments: unaware, skeptical, restricted, and under-resourced.



STAKEHOLDER SEGMENTS



Unaware

Definition

Stakeholders are unaware of how important and effective SBC is

Illustrative Quotes

"If you [stock] it, they will come...the default is to think about supply"



Skeptical

Stakeholders are skeptical of whether SBC works and if it is worth the cost

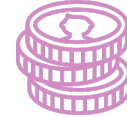
"I haven't seen the evidence that SBC really works, and it is too expensive."



Restricted

Stakeholders are restricted in what they can spend tight budgets on and need to link investments to concrete outputs

"My board just wants to know how many condoms we've purchased."



Under-resourced

Stakeholders do not think they have funds to implement SBC so do it half-heartedly or forego it altogether

"I don't see many lower income countries prioritize SBC from their own domestic revenues...their top priority is always supplies."

KNOWING YOUR STAKEHOLDERS

The better you know your stakeholder, the easier it will be to find the right messaging approach and tailor your messaging to them. Put yourself in the stakeholder's shoes and adapt your strategy to her or his priorities for maximum effectiveness.

Consider the environment in which they operate and how you would answer the following questions:

- What is most important to them when programming for FP?
 - How important is it that programs are cost-effective?
 - How much do they value the use of evidence to show effectiveness?
 - What influence do personal experiences or stories have?
- Are they able to make decisions about how money is spent? Who are they accountable to for those funds?
- What has been their experience with SBC in the past? Both in FP and in other health sectors. Are they knowledgeable about different SBC approaches?

Find out as much as you can about your stakeholder. Do not assume you know them; talk to people who know the stakeholder well so that your assessment is as accurate as possible.⁴



⁴ Adapted from AFP Advocacy Portfolio, *Develop a Strategy*. AFP SMART: A Guide to Quick Wins—Build Consensus, Focus Efforts, Achieve Change. 2013.



CREATING STAKEHOLDER PROFILES



USING THE STAKEHOLDER PROFILE TEMPLATE

You can use the stakeholder profile template to build your own applied messaging framework.

The **General Overview** section describes who your stakeholder is—their role and decision-making power, their views on SBC, and the barriers and drivers they face when making decisions about the use of SBC.

The **SBC Engagement** section describes your goal for them in relation to SBC engagement and allows room for any notes on conversations you have had with them in the past about SBC.

The **Applied Messaging Framework** section considers the inputs in the previous two sections and includes support points from the appropriate message pillar to strengthen the case for investment in SBC based on your stakeholder's needs and motivations. This section helps you to hone in on prioritized supporting points and provides additional key evidence to help strengthen your main message. You can also find links to the key evidence in the References and Supporting Assets section of this document.

Finally, the **Ask** section provides space for you to create a specific request of your stakeholder.



General Overview

Stakeholder: Enter stakeholder type here

Organization: Enter organization name here

Role and Key Decision Rights

Information on the person, including their role, and assumed ability to influence decisions

Current SBC Views

Review of both the person's and the organization's views on SBC

Barriers/Drivers

Specific barriers to implementing SBC, or drivers for their decision making in general

Audience Segment

Based on the information above, select your audience segment: Unaware, Skeptical, Restricted, or Under-resourced. This selection will inform your inputs below.

SBC Engagement

Goals

How you want this person to engage in SBC

Notes on Previous Conversations

Information on the previous conversations, confidential interviews, and input to influence strategy

Pillar



Choose 1:

- SBC approaches complement service delivery
- SBC is rooted in global evidence and best practices
- SBC consists of high-impact practices for short- and long-term wins

Applied Messaging Framework

Prioritized Supporting Points

Enter first supporting point here

Enter second supporting point here

Enter third supporting point here

Additional Key Evidence

Identify key evidence points to keep in mind for the stakeholders

Identify key evidence points to keep in mind for the stakeholders

Identify key evidence points to keep in mind for the stakeholders

Ask

What will you ask the stakeholder to do?



ILLUSTRATIVE STAKEHOLDER PROFILES

These illustrative profiles demonstrate the method for determining specific messages to use with different stakeholders.



Organization: Foundation

General Overview

Role and Key Decision Rights

John has a clinical background and has spent three years at a senior level with the foundation, overseeing service delivery programs in southern Africa. Has decision-making power over his program but reports to his board and needs their approval for programmatic shifts.

Current SBC Views

He has little knowledge of SBC, is too busy to learn about it and thinks it is something that USAID does. He does not believe SBC is a priority for his foundation and it is not his area of expertise. He does not understand its impact in supporting his service-side investments.

Barriers/Drivers

He is driven to show results (e.g., uptake in contraceptive use among priority populations) and has not considered SBC as an investment.

Audience Segment: Unaware

SBC Engagement

Goals

Increase his understanding of what SBC is (e.g., advocacy, interpersonal communication, etc.), of the value of SBC, and how to budget effectively for SBC

Notes on Previous Conversations

General conversations about FP in the past but thus far unable to engage in discussions on SBC for FP of any substance



Pillar: SBC approaches complement service delivery

Applied Messaging Framework

Prioritized Supporting Points

SBC requires a small portion of a supply program budget but can greatly increase the return on investment

There is compelling evidence and data that SBC is necessary for maximum impact on FP uptake and can be used to inform programming

Investing in SBC can help improve counseling by enhancing provider skills and preparing clients to be engaged participants

Additional Key Evidence*

The Business Case for Investing in SBC for FP ⁽²³⁾
Domestic Public Financing High Impact Practices (HIP) Brief ⁽¹⁷⁾

Senegal Urban Reproductive Health Initiative ⁽¹⁾
Nigeria Urban Reproductive Health Initiative ⁽²⁾

Improving counseling to increase the use of long-acting reversible contraceptives (LARC) ⁽³⁾
Improving client participation in FP counseling in Indonesia ⁽⁴⁾

Ask: Will you consider investing in an SBC-focused program that complements your service-side investments?


* Numbered references correspond to document links in the References and Supporting Assets section.

Organization: Donor

General Overview

<p>Role and Key Decision Rights</p> <p>Jane is a mid-level authority reporting to the Director of Health Programs for final decisions. She does not feel comfortable supporting activities unless somebody more senior in the agency is already supportive.</p>	<p>Current SBC Views</p> <p>She doubts the effectiveness of SBC and its ability to generate quick wins that she can report to her superiors. Without rigorous evidence that SBC is cost effective, she is unlikely to support it.</p>	<p>Barriers/Drivers</p> <p>She needs proof and must show evidence that SBC activities are effective in increasing use of FP to convince the final decision makers of its return on investment.</p>
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SBC Engagement

Audience Segment: Skeptical	
<p>Goals</p> <p>Increase her belief that SBC is a worthwhile investment and has impact</p>	<p>Notes on Previous Conversations</p> <p>Expressed skepticism for SBC for FP and said that her organization expects proof of impact before investing</p>
<p> Pillar: SBC demonstrates a high return on investment in both the short and long-term</p>	

Applied Messaging Framework

<p>Prioritized Supporting Points</p>	<p>Investing in SBC can help increase your program impact and there is evidence from the last 30 years to support this claim to share with your superiors</p>	<p>There is evidence from various countries that support the cost-effectiveness and impact of SBC</p>	<p>A small investment in SBC can further strengthen and complement your service delivery investments</p>
<p>Additional Key Evidence*</p>	<p>SBC Evidence Database ⁽¹⁰⁾ Global review of SBC interventions ⁽¹¹⁾</p>	<p>Investing in SBC is cost-effective: Zambia and Guinea ^(24,25)</p>	<p>Using SBC to enhance service delivery in Rwanda ⁽¹³⁾ Community health workers and social marketing: Evidence from Ethiopia ⁽¹⁴⁾</p>

Ask: Will you consider investing in an SBC-focused program that complements your service-side investments?


* Numbered references correspond to document links in the References and Supporting Assets section.

Organization: Coordination Network

General Overview

<p>Role and Key Decision Rights</p> <p>Mary is a skilled diplomat who has a great deal of influence through the coordination body she works for though she has no funding for programming per se.</p>	<p>Current SBC Views</p> <p>She is open to SBC though knows advocacy is needed for it to gain traction and that measurement must be aligned to inform SBC investments.</p>	<p>Barriers/Drivers</p> <p>She must balance multiple priorities and agendas given her coordination role and has little SBC expertise in her network.</p>
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SBC Engagement

Audience Segment: Restricted	
<p>Goals</p> <p>Increase her prioritization of SBC within the broader FP context and use her position to influence funding decisions</p>	<p>Notes on Previous Conversations</p> <p>She is open to SBC and understands that it should play a larger role across investments in country-level programming recognizing it might be hard sell for some in her network</p>
<p> Pillar: SBC is rooted in global evidence and best practices</p>	

Applied Messaging Framework

<p>Prioritized Supporting Points</p>	<p>Countries that have placed emphasis on SBC have made significant strides in reaching their global goals</p>	<p>Coordinated technical assistance and applied best practices can elevate SBC and support countries in more efficiently increasing FP uptake</p>	<p>SBC expertise exists and can help those in your network apply it strategically to programming to reach their country-level FP goals</p>
<p>Additional Key Evidence*</p>	<p>SBC Evidence Database ⁽¹⁰⁾ Using SBC to complement service delivery for LARC improvement ⁽⁵⁾</p>	<p>FP HIP Briefs ⁽¹⁶⁾ Mass Media HIP Brief ⁽¹⁸⁾</p>	<p>SBC How-to Guides ⁽¹⁵⁾ Service Communication Implementation Kit ⁽⁶⁾ Provider Behavior Change Implementation Kit ⁽⁷⁾</p>

Ask: Will you work closely with us to ensure technically sound SBC programming is supported in the countries in your network?

* Numbered references correspond to document links in the References and Supporting Assets section.




Organization: Ouagadougou Partnership Country

General Overview

<p>Role and Key Decision Rights</p> <p>Dosso has the ear of the Minister of Health. While he does not have decision-making power himself, he does have influence and longstanding relationships with those who do.</p>	<p>Current SBC Views</p> <p>He has focused more on contraceptive security and, while open to SBC programming within the Costed Implementation Plan (CIP) process for his country, knows that decision makers in the government do not prioritize SBC.</p>	<p>Barriers/Drivers</p> <p>He does not know enough about SBC to understand how best to include it in the CIP or believe the decision makers in the government value SBC enough to include it in a meaningful way.</p>
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SBC Engagement

Audience Segment: Under-resourced	
<p>Goals</p> <p>Help him understand that SBC does not have to be expensive and will not compete with—or take away from—simultaneously ensuring contraceptive security</p>	<p>Notes on Previous Conversations</p> <p>He lacks the technical skills in SBC programming and is not as confident in this arena as with supplies though is starting to think that more should be done on the demand side</p>
<p> Pillar: SBC demonstrates a high return on investment in both the short- and long-term</p>	

Applied Messaging Framework

Prioritized Supporting Points	SBC does not have to be prohibitively expensive and can be used in settings where resources are scarce and country governments have limited budgets.	Technical support is available for your country when implementing SBC components outlined in your CIP.	Your country will have a better chance of realizing the demographic dividend if demand-side investments are more closely coupled with those on the supply side.
Additional Key Evidence*	The Business Case for Investing in SBC for FP ⁽²³⁾ Galvanizing commitment for SBC ⁽²⁶⁾	Guidelines for costing SBC interventions ⁽²⁷⁾ The added value of costing SBC ⁽²⁸⁾	Communication's role in powering global health ⁽¹²⁾ SBC HIP Brief ⁽¹⁹⁾


Ask: Will you talk with the Minister of Health about ensuring that SBC appears prominently in the country's CIP with a sound implementation plan in place?

* Numbered references correspond to document links in the References and Supporting Assets section.



SUPPORTING ASSETS

Many stakeholders will want to see evidence demonstrating that SBC works. This table provides suggestions for evidence, articles and case studies that can be used to strengthen your message.



Pillar

Supporting Points

References and Supporting Assets

1

SBC approaches complement service delivery

SBC includes a range of approaches that can, and should, be applied **across FP programming**—not just demand

Investing in SBC **increases effectiveness** of clinical investments, services

Informed by local needs, necessary for achieving country priorities, often developed with community collaboration

Service Delivery

1. [Senegal Urban Reproductive Health Initiative](#)
2. [Nigeria Urban Reproductive Health Initiative](#)
3. [Improving counseling to increase the use of LARCs](#)
4. [Improving client participation in FP counseling in Indonesia](#)
5. [Using SBC to complement service delivery for LARC improvement](#)
6. [Service Communication Implementation Kit](#)
7. [Provider Behavior Change Implementation Kit](#)
8. [Demand Generation Implementation Kit](#)
9. [Enhancing Family Planning Service Delivery through SBC](#)

2

SBC is rooted in global evidence and best practices

SBC has **clear evidence of increasing successful outcomes in FP interventions**

Strong SBC investments have been **refined over 30 years based on best practices**

Local evidence/data is used to inform SBC programming; examples available from all regions

Evidence and High Impact Practices

10. [SBC Evidence Database](#)
11. [Global review of SBC interventions](#)
12. [Communication's role in powering global health](#)
13. [Using SBC to enhance service delivery in Rwanda](#)
14. [Community health workers and social marketing: Evidence from Ethiopia](#)
15. [SBC How-to Guides](#)
16. [FP HIP Briefs](#)
17. [Domestic Public Financing HIP Brief](#)
18. [Mass Media HIP Brief](#)
19. [SBC HIP Brief](#)
20. [An evidence map of social, behavioural, and community engagement interventions for RMNCH](#)
21. [Accelerating FP demand through advanced audience segmentation](#)
22. [What is social and behavior change communication?](#)

3

SBC demonstrates a high return on investment in both the short and long-term

SBC **maximizes FP investments** across contexts and makes use of a variety of affordable approaches

Strategic SBC uses a variety of **affordable approaches** to generate demand

Both short-term and long-term results can be reached and measured with effective evaluation

Cost-effectiveness and Return on Investment

23. [The Business Case for Investing in SBC for FP](#)
24. [Investing in SBC is cost-effective: Zambia](#)
25. [Investing in SBC is cost-effective: Guinea](#)
26. [Galvanizing commitment for SBC](#)
27. [Guidelines for costing SBC interventions](#)
28. [The added value of costing SBC](#)