

Breakthrough RESEARCH Legacy and Learning Event Series

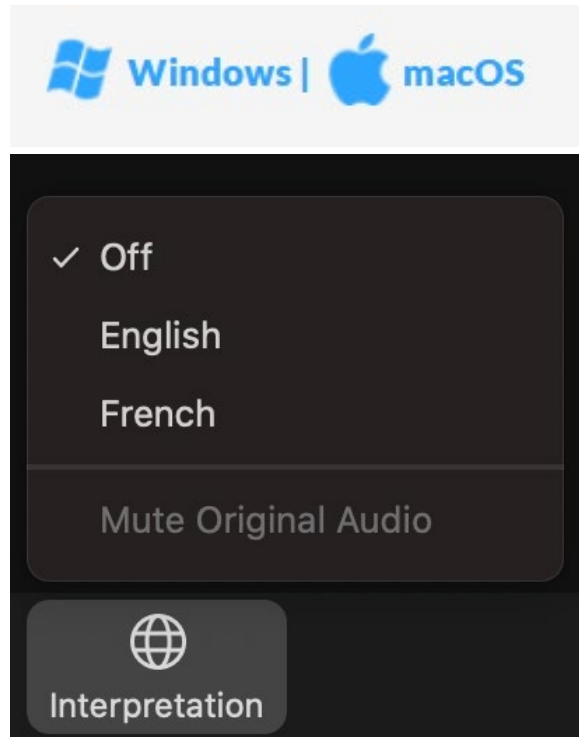
FEBRUARY 28, 2023

Advancing Social and Behavior Change Measurement for Family Planning



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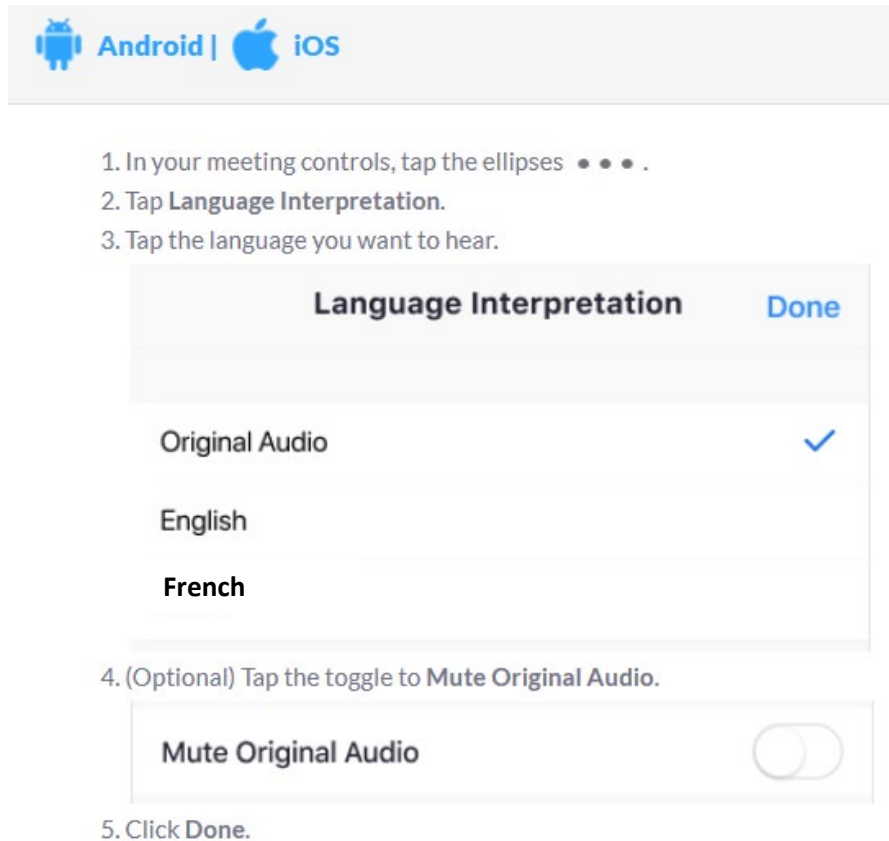
Click on the Interpretation icon on the bottom right of your screen and select your preferred language.

Cliquez sur l'icône Interprétation en bas à droite de votre écran et sélectionnez votre langue préférée.

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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.*

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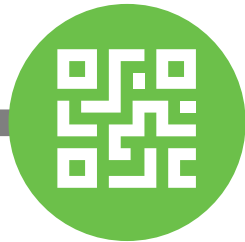
Logistics for today



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



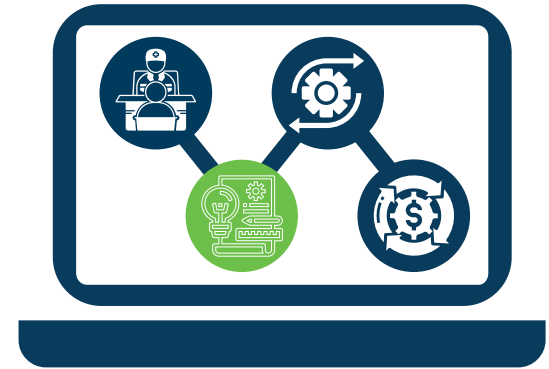
Published **27** articles
in peer-reviewed
journals to date



Cited **94** times in
grey and peer-reviewed
literature to date

Webinar Objectives

- **2nd** 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 advance SBC measurement to support and strengthen family planning (FP) programs
- Share resources and evidence-based, practical tools you can use to strengthen SBC measurement, evaluation, and research



Roadmap for Today

1. SBC Measurement in FP
2. Breakthrough RESEARCH's State-of-the-art Evidence and SBC Measurement Tools You Can Use
3. Call to Action
4. Discussion and Q&A

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Why SBC Measurement for Family Planning Programs?



- SBC interventions can improve FP/reproductive health (RH) outcomes, through pathways that address intermediate determinants such as attitudes around FP.
- Yet, barriers still exist to the inclusion of SBC in FP investments.
- Some SBC interventions are more effective than others, and the estimated effectiveness of SBC interventions varies depending on the measures we use to assess them.
- The measurement of SBC interventions and SBC implementation science approaches can also be important in addressing implementation questions around scale-up and program replication.



Key Message

SBC approaches can support family planning programs and the standardized measurement of these approaches guided by a defined theory of change is critical to understanding their effectiveness and contributing to their success.



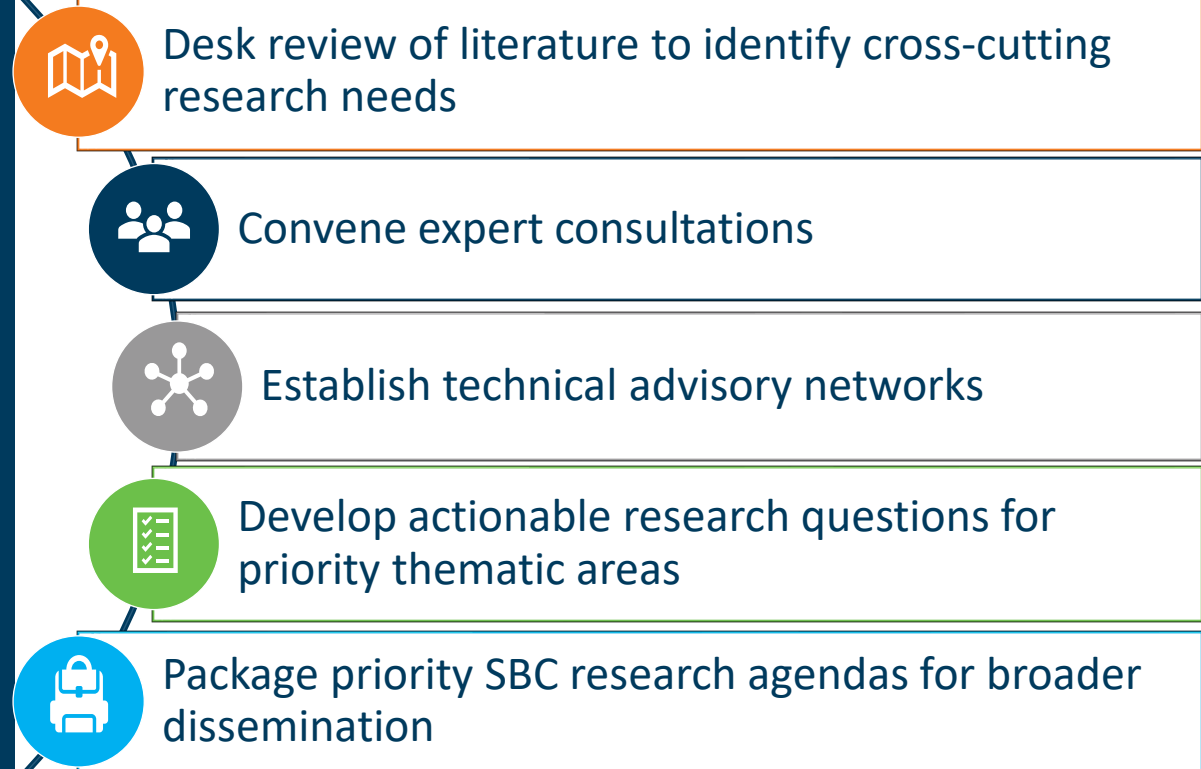
Research and Learning Agendas

Research and Learning Agendas (RLAs)



Reaching consensus through collaboration and by building on previous efforts

- Breakthrough RESEARCH took a multi-pronged approach to develop global SBC RLAs





Research and Learning Agendas

cost-effectiveness

sustainable

effectiveness

multi-component

gender

community-level

scale-up

multi-sectoral

indirect

social

structural

norms

feasibility

casual attribution

unintended consequences

measure

CHWs

systemic

level

effects

normative

systems

sustained

Cost

SBC

behavior change

programming

provider

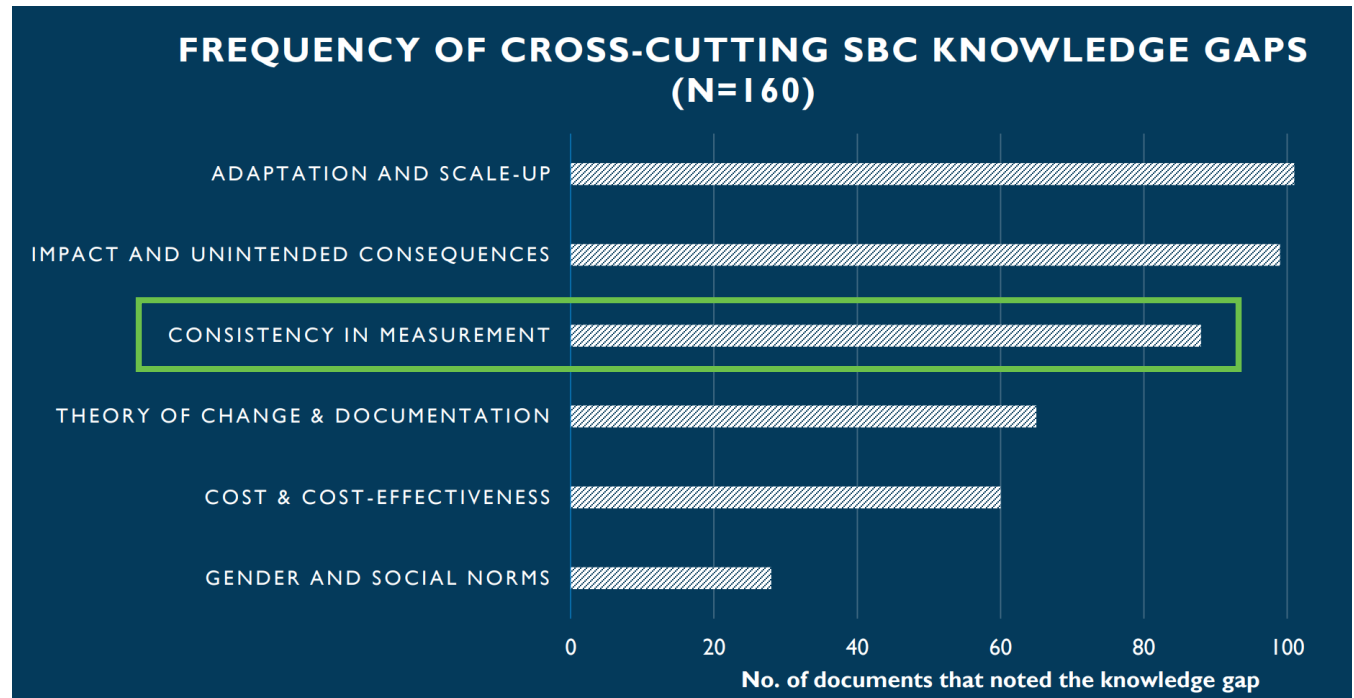
behavior change

interventions

Integrated programs

evidence

The desk review revealed 6 cross-cutting knowledge gaps related to SBC programs across health areas and geographic regions.



Research and Learning Agendas



Effectiveness of Integrated SBC Programming (Relative to Vertical SBC Programming)

- When a norm (or other determinant) influences multiple behaviors, how and to what extent does addressing it yield desired change for multiple behaviors?
- Under which conditions (such as social structures or health systems structures) is integrated SBC programming more effective than vertical SBC programming?
- What are the potential unintended (positive and negative) consequences at the individual, household, community, and health-systems level for integrated compared to vertical SBC programming?
- How and to what extent do differences in the integration program model (for instance, umbrella brand with nested vertical components, phased introduction of content, add-on) impact outcomes among different audiences? Which integration program models are most effective and what models still need to be explored (such as multisectoral integration of FP and economic growth) with specific audiences?
- How can we utilize more participatory approaches to improve the design, monitoring, and evaluation of integrated SBC programming?

Effectiveness

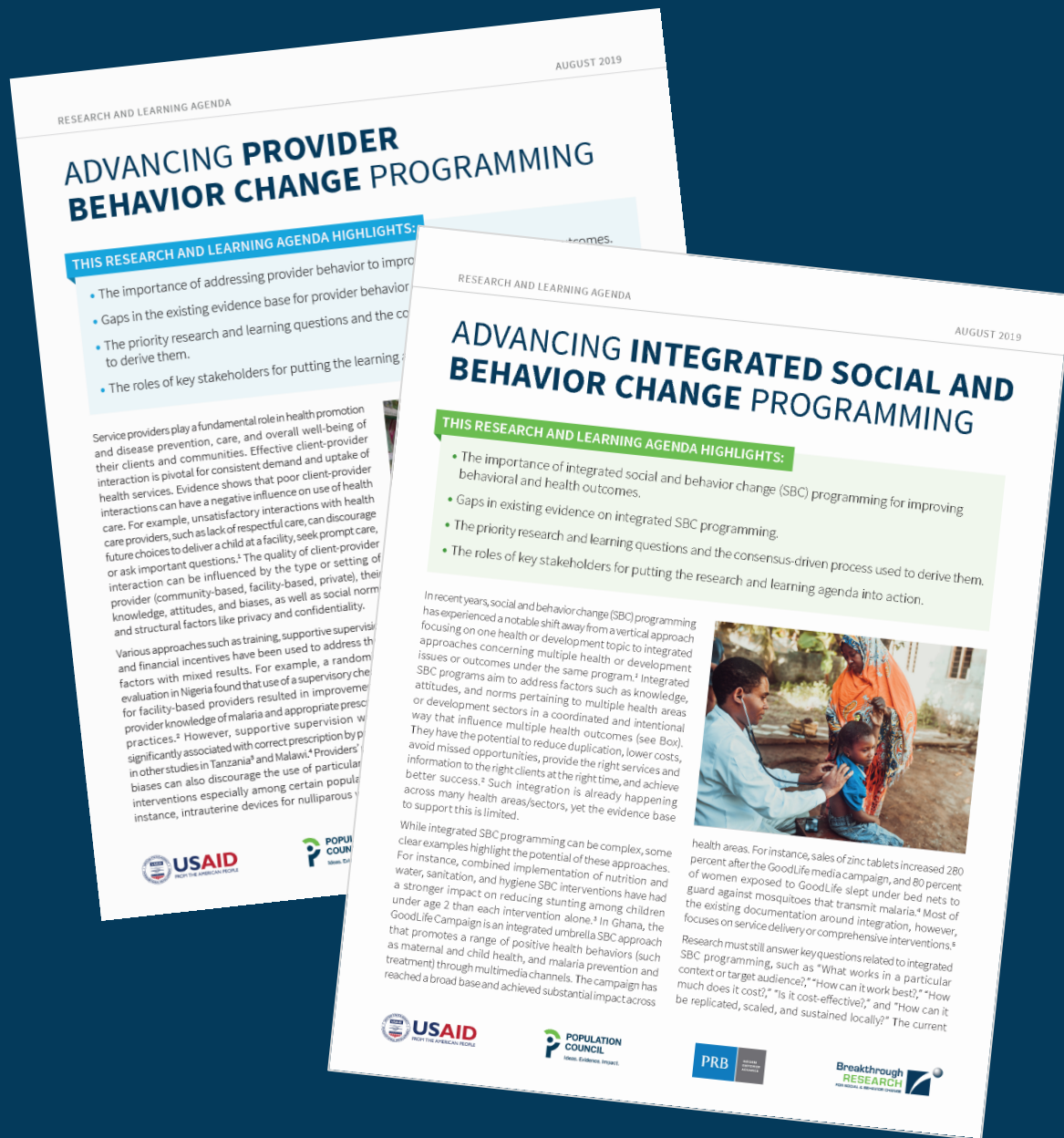
- Does improving the behaviors/practices of health providers influence the quality of care provided?
 - What are the most effective SBC approaches to enable/motivate/facilitate (different cadres of) providers to provide respectful, client-centered care (such as staff recognition through incentives to provide postpartum FP counseling)?
 - What are the most effective non-communication-based SBC interventions to improve provider behaviors (for instance, a suitable waiting room)?
- How does addressing the factors that influence provider behavior (normative, structural, behavioral) lead to improved health outcomes?

Measurement

- How can we best assess/measure the quality of client-provider interactions from client and provider perspectives?
- How can we best measure provider attitudes, norms, and biases that influence their performance and adherence to timely and respectful client-centered care practices?



Research and Learning Agendas





Key Message

Applying tools to understand who SBC programs are reaching, how they are reaching them, with what content, and what changes they are producing is critical for effective measurement of SBC in family planning programs.



SBC Measurement Tools You Can Use



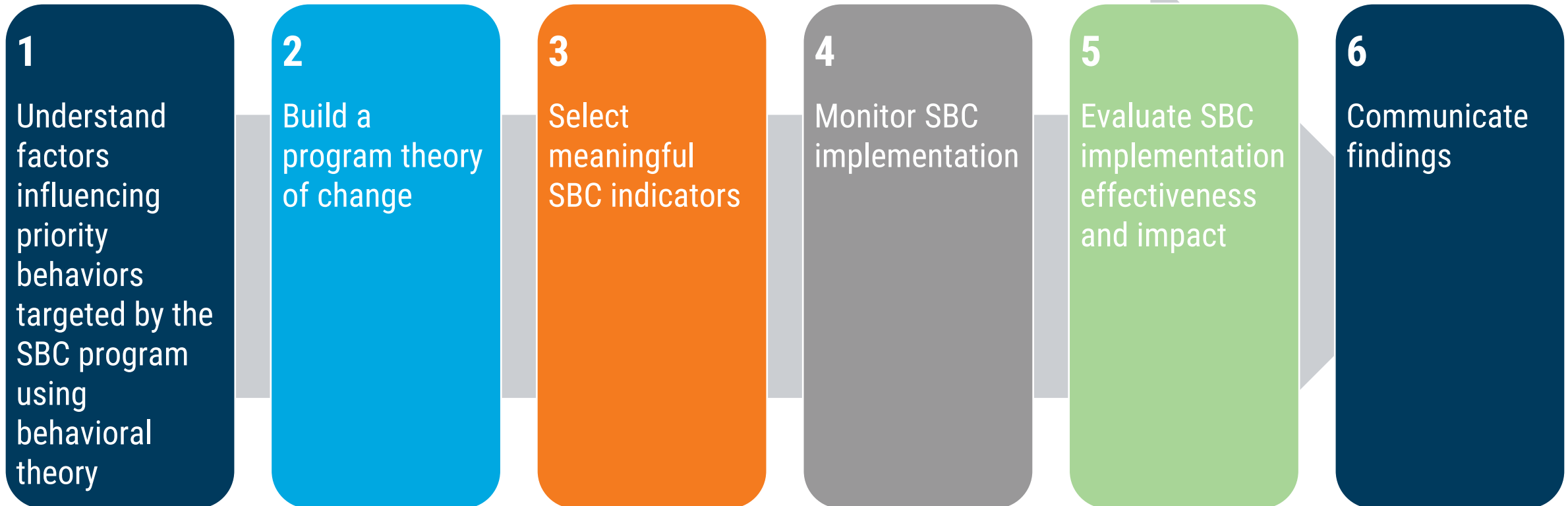
How to Use a Theory of Change to Monitor and Evaluate SBC Programs

How to Use a Theory of Change to Monitor and Evaluate SBC Programs



- Behavior change theory should be incorporated into an SBC program's theory of change to illustrate **how or why a desired change is expected to occur**.
- Behavior change theory also provides guidance on the **behavioral determinants that influence program goals** and objectives to measure.
- Breakthrough RESEARCH's guide is intended to help managers support research, monitoring, and evaluation staff and ensure they have the **programmatic data required to track results**, and it will ensure the **program is guided by robust theory-driven evidence**.

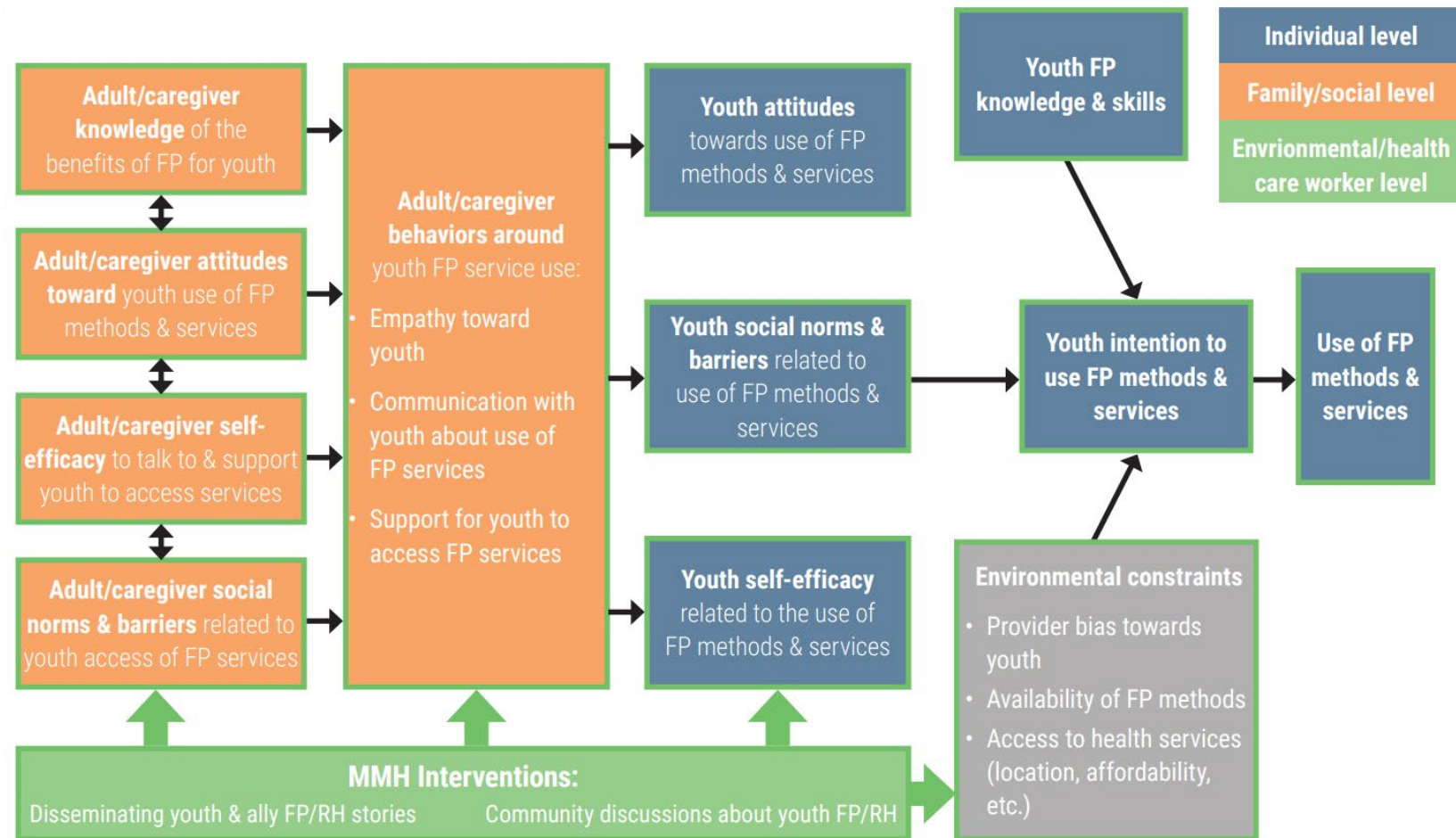
How to Use a Theory of Change to Monitor and Evaluate SBC Programs



How to Use a Theory of Change to Monitor and Evaluate SBC Programs



Building a Program Theory of Change—Example



Source: <https://ccp.jhu.edu/2020/03/30/youth-reproductive-health-heroes-francophone>

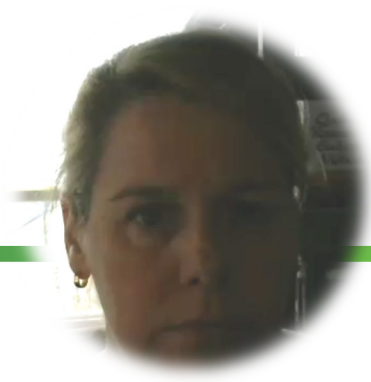
How to Use a Theory of Change to Monitor and Evaluate SBC Programs



Using a Program Theory of Change to Identify Intended Outcomes to Measure—Example

Behavior	Knowledge	Attitude	Self-efficacy	Intent	Norms
Parent/adult ally speaks to youth about FP/RH	Parent/adult ally recognizes that youth are/can be sexually active	Parents/adult allies accepts/tolerates that youth are sexually active			Parent/adult ally believes other parents accept that youth are/ may be sexually active
	Parent/adult ally knows to talk to youth about FP/RH	Parents/adult allies believes they should speak to youth about FP/RH	Parent/adult ally believes they can speak to youth about FP/RH	Parents/adult allies intend to talk to youth about FP/RH	Parent/adult ally believes other parents in the community speak to youth about FP/RH
	Parent/adult ally knows that youth need guidance	Parents/adult allies approve of youth using FP	Parent/adult ally believes they can speak to youth about FP		Parent/adult ally believes other parents in the community approve of youth using FP
	Parent/adult ally knows that FP can help youth achieve life goals	Parents/adult allies have a favorable attitude toward young people's use of FP to help them achieve life goals			
Youth speak to adults about FP/RH	Youth know that there are adults they can trust to talk about FP/RH	Youth believe they should speak with adults about FP/RH	Youth believe they can speak to adults about FP/RH	Youth intend to speak to adults about FP/RH	Youth believe that other youth speak to adults about FP/RH
Youth use FP if sexually active	Youth know about the FP methods	Youth believe they should use FP if sexually active	Youth believe they can use FP if sexually active	Youth intend to use FP if sexually active	Youth believe that other youth use FP if sexually active

How to Use a Theory of Change to Monitor and Evaluate SBC Programs



To effectively integrate a theory of change into a monitoring and evaluation (M&E) plan, SBC programs should:

- **Use a theory of change process at the design stage** and identify the important behavioral determinants that should be addressed with SBC programs.
- Select indicators for SBC M&E plans that consider **measures that assess exposure to the program, determinants of behavior, and the behavioral outcome.**
- Introduce qualitative studies such as in-depth interviews or focus group discussions **to complement routine monitoring and help explain how the program is working.**
- **Share evidence** on what works and how interventions can be improved.



How to Use a Theory of Change to Monitor and Evaluate SBC Programs

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Twelve Recommended SBC Indicators for Family Planning

12 Recommended SBC Indicators for Family Planning



SBC measurement enables programs to:

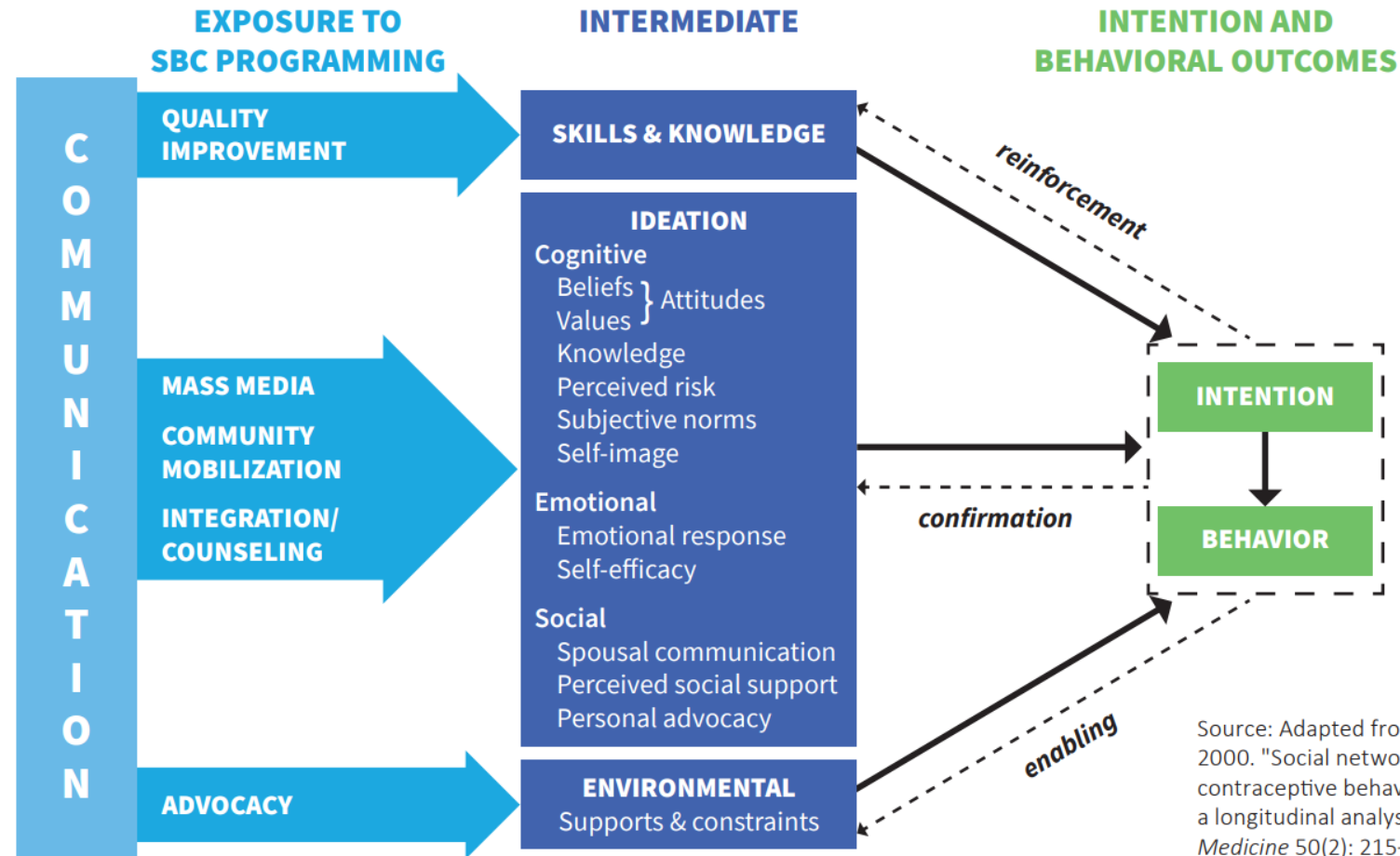
- engage in continuous learning and improvement;
- demonstrate how SBC interventions improve desired outcomes; and
- provide evidence of SBC's effectiveness that can be used to mobilize further investment.

We propose 12 SBC indicators that programs can consider adopting to monitor and evaluate SBC programs.

12 Recommended SBC Indicators for Family Planning

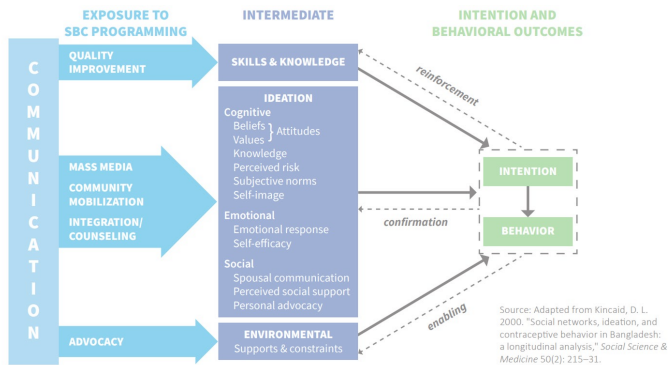


Ideational Model of SBC Interventions



Source: Adapted from Kincaid, D. L. 2000. "Social networks, ideation, and contraceptive behavior in Bangladesh: a longitudinal analysis," *Social Science & Medicine* 50(2): 215–31.

12 Recommended SBC Indicators for Family Planning



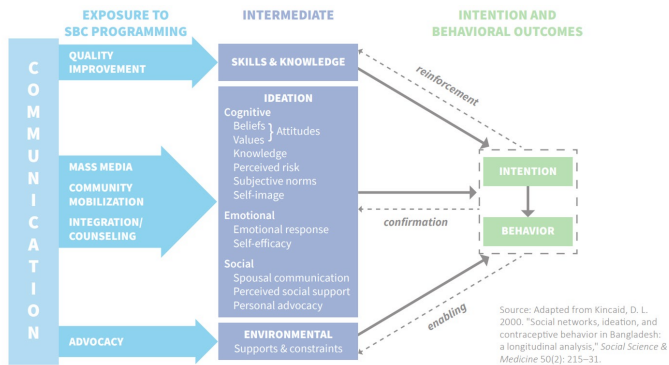
Exposure to SBC programming enables us to understand the extent to which beneficiaries are exposed to SBC approaches.

Indicator 1: Number of decision-makers reached with SBC FP advocacy activities.

Indicator 2: Percent of target audience that recalls hearing or seeing a FP message, campaign, or communication initiative.

Indicator 3: Number of service providers trained in interpersonal communication for FP counseling.

12 Recommended SBC Indicators for Family Planning



INTERMEDIATE

SKILLS & KNOWLEDGE

IDEATION

Cognitive
Beliefs } Attitudes
Values }
Knowledge
Perceived risk
Subjective norms
Self-image

Emotional
Emotional response
Self-efficacy

Social
Spousal communication
Perceived social support
Personal advocacy

ENVIRONMENTAL

Supports & constraints



Intermediate enables us to understand the factors contributing to behavioral outcomes.

Indicator 4: Percent of target audience that knows of at least three modern FP methods.

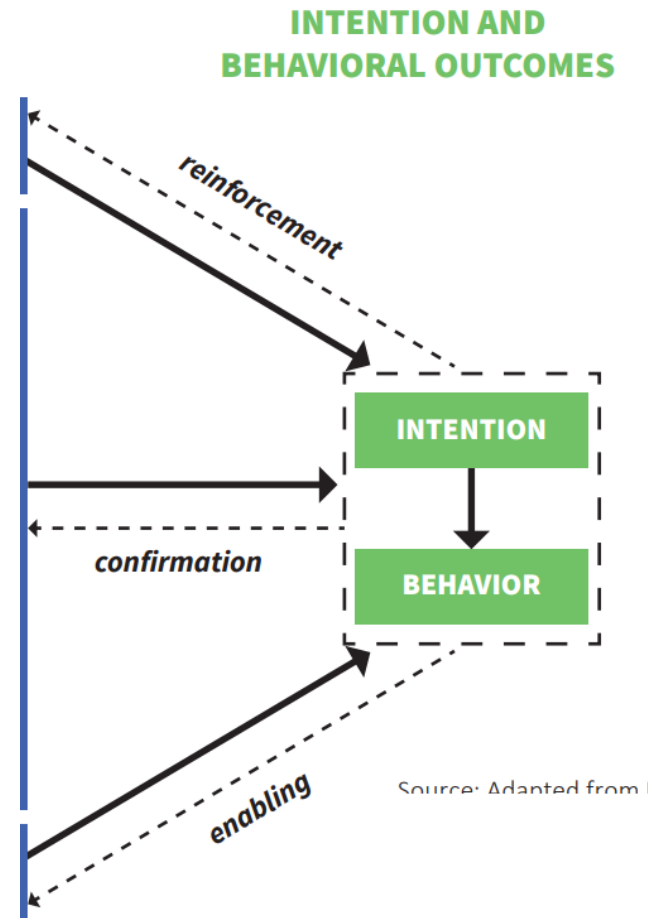
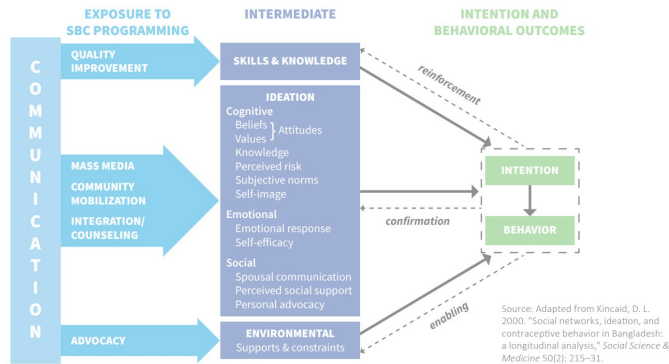
Indicator 5: Percent of target audience with favorable attitudes of modern FP methods.

Indicator 6: Percent of target audience that believes most people in their community approve of people like them using FP.

Indicator 7: Percent of target audience confident in its ability to use FP.

Indicator 8: Percent of target audience that discussed FP with spouse or partner.

12 Recommended SBC Indicators for Family Planning



Intention & behavioral outcomes enables us to determine if behavior has changed.

Indicator 9: Percent of non-users intending to adopt a modern FP method in the future.

Indicator 10: Percent of target audience currently using a modern FP method.

Indicator 11: Percent of modern FP users intending modern FP method continuation.



Cost enables us to understand the resources used/ needed to reach a target audience.

Indicator 12: Cost per person reached by SBC activities.

12 Recommended SBC Indicators for Family Planning



Twelve Recommended SBC Indicators for Family Planning
BREAKTHROUGH RESEARCH PROGRAMMATIC RESEARCH BRIEF | JULY 2020

This brief describes 12 indicators that align with the ideational model of social change (SBC) interventions that programs can consider adopting to evaluate their family planning performance. Recommended indicators can be used by donors, and implementing partners, to measure SBC measurement and impact performance.

A growing body of evidence suggests that increasing use of modern contraceptive methods generates a positive return on investment. SBC interventions can drive contraceptive uptake and use through peer-to-peer communication, such as attitude change around FP (see Figure 1). However, SBC interventions vary in their effectiveness, and the impact of SBC interventions varies depending on the contraceptive prevalence rate and the attitudes, beliefs, and risk perceptions of the target population.

Figure 1. Ideational Model of SBC

Douze indicateurs CSC recommandés pour la planification familiale
BREAKTHROUGH RESEARCH NOTE DE RECHERCHE PROGRAMMATIQUE | SEPTEMBRE 2020

La présente note décrit 12 indicateurs alignés sur le modèle représentatif d'interventions sur le changement social et comportemental (CSC) que les pays et les programmes peuvent envisager d'adopter pour le suivi et l'évaluation de leurs programmes de planification familiale (PF). Les indicateurs et les partenaires peuvent aider les pays, les donateurs et les partenaires d'exécution à mieux mesurer le CSC et à accroître la performance de leurs programmes.

Un nombre croissant de données probantes suggère que les interventions en matière de CSC augmentent l'utilisation de contraceptifs modernes en général, au final, des retours sur investissements en PF. Ces données factuelles suggèrent que les interventions en matière de CSC peuvent directement accroître l'adhésion à la contraception et en accroître l'usage par des moyens qui prennent en compte des indicateurs intermédiaires, tels que les attitudes et la communication en matière de PF (voir Figure 1). Certaines interventions en matière de CSC sont toutefois plus efficaces que d'autres dans la mesure de l'usage par le taux actuel de prévalence contraceptive moderne et des connaissances, attitudes, croyances et perceptions intermédiaires des risques.

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PRINCIPAUX MESSAGES

- La mesure du CSC permet aux programmes d'évaluer l'impact des interventions sur le changement social et comportemental (CSC) que les pays et les programmes peuvent envisager d'adopter pour le suivi et l'évaluation de leurs programmes de planification familiale (PF). Les indicateurs et les partenaires peuvent aider les pays, les donateurs et les partenaires d'exécution à mieux mesurer le CSC et à accroître la performance de leurs programmes.
- Un nombre croissant de données probantes suggère que les interventions en matière de CSC augmentent l'utilisation de contraceptifs modernes en général, au final, des retours sur investissements en PF. Ces données factuelles suggèrent que les interventions en matière de CSC peuvent directement accroître l'adhésion à la contraception et en accroître l'usage par des moyens qui prennent en compte des indicateurs intermédiaires, tels que les attitudes et la communication en matière de PF (voir Figure 1). Certaines interventions en matière de CSC sont toutefois plus efficaces que d'autres dans la mesure de l'usage par le taux actuel de prévalence contraceptive moderne et des connaissances, attitudes, croyances et perceptions intermédiaires des risques.
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INTENTION ET RÉSULTATS COMPORTEMENTAUX

Figure 1. Modèle représentatif des interventions en matière de CSC

EXPOSITION À LA PROGRAMMATION DE SBC

COMPÉTENCES ET CONNAISSANCES

INTENTION

COMPORTEMENT

ENVIRONNEMENT

PLAIADOYER

USAID **Tulane University** **POPULATION COUNCIL** **Breakthrough RESEARCH**

Twelve Recommended SBC Indicators for Family Planning: Indicator Reference Sheet
BREAKTHROUGH RESEARCH PROGRAMMATIC RESEARCH BRIEF | NOVEMBER 2020

This document provides 12 indicator reference sheets for the "Twelve Recommended SBC Indicators for Family Planning" reference brief. Indicators help program implementers define measurement, help program implementers interpret data, and help users correctly interpret data. These proposed reference sheets are adapted from the social and behavior change bank for family planning (SBC) and service delivery, and implementing partners, and measurement of SBC activities and program learning, improved programming, and increased investment.

Prior to adopting these 12 indicators, program implementers can review existing data or conduct formative research to select the ideational components most relevant to their country and intervention contexts. These indicators are described with sufficient detail to guide implementation partners and help facilitate their use within FP monitoring and evaluation systems. A series of guiding questions are included to help implementers adapt these indicators.

Additional resources:

- USAID Performance Indicator Reference Sheet (PIRS) Guidance & Template
- Compass for SBC how-to guides: How to develop indicators
- The Family Planning and Reproductive Health Indicators Database: Measure Evaluation
- Croft, Trevor N. et al. 2018. Guide to DHS Statistics. Rockville, Maryland, USA: ICF.

USAID **Tulane University** **POPULATION COUNCIL** **Breakthrough RESEARCH**

Douze indicateurs du CSC recommandés pour la planification familiale: Fiches de référence des indicateurs
BREAKTHROUGH RESEARCH NOTE DE RECHERCHE PROGRAMMATIQUE | NOVEMBRE 2020

Ce document présente 12 fiches de référence pour accompagner la mise en œuvre des « Douze indicateurs CSC recommandés pour la planification familiale ». Les fiches de référence des indicateurs aident les administrateurs de programme à définir des indicateurs mesurables des succès et des échecs de leurs programmes, elles garantissent la qualité des données, et aident les utilisateurs à interpréter correctement les données générées pour les indicateurs adaptés de la banque d'indicateurs du changement social et comportemental (CSC) pour la prestation de services de planification familiale (PF) pour la prestation de services de planification familiale (PF).

Avant d'adopter ces 12 indicateurs, les administrateurs de programme peuvent examiner les données existantes ou conduire des recherches formatives pour choisir les composantes conceptuelles les plus pertinentes pour leur pays et contextes d'intervention. Ces 12 indicateurs proposés sont décrits avec suffisamment de détails pour faciliter la mise en œuvre de la mesure de l'usage par le taux actuel de prévalence contraceptive moderne et des connaissances, attitudes, croyances et perceptions intermédiaires des risques.

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SBC Measurement Learning Courses

SBC Measurement Learning Courses



M&E of SBC approaches

1. Building an SBC M&E theory of change
2. Selecting meaningful SBC indicators
3. Monitoring SBC implementation
4. Determining if the SBC program reached the desired outcome

Measuring SBC program or campaign exposure

1. Understanding SBC program or campaign exposure
2. Examples of SBC exposure questions and data sources
3. Using exposure data to inform your SBC program or campaign



Measuring SBC Program or Campaign Exposure

Measuring SBC Program or Campaign Exposure:

Understanding Exposure



SBC exposure	Description	Example questions
Reach	Measures the extent to which the program or campaign reaches the intended audience.	How many decisionmakers (i.e., local or religious leaders) participated in SBC program trainings?
Awareness: recall	Recall (Spontaneous) measures if the respondent is aware of the campaign or topic and can provide an affirmative response.	Do you recall hearing or seeing the “X campaign”?
Awareness: recognition	Recognition (Prompted) measures if the respondent can provide an affirmative response when prompted with a campaign element (i.e., chime or tag line).	Can you identify the campaign logo (from a group of logos)/Can you complete this campaign slogan: “X ...”?
Comprehension	Comprehension measures message elements related to information, or an idea being communicated.	Thinking about the radio commercials you heard about family planning; can you tell me one of the messages in these commercials?
Message reaction	Message reaction measures if a respondent agrees or disagrees with the message.	Did you agree or disagree with the message in the commercial?

Measuring SBC Program or Campaign Exposure:

Exposure Data Sources



Source of data	Pros	Cons
Routine program monitoring (e.g., # of household visits)	Low cost	Does not tell you whether people remember anything from this exposure
Project-tailored surveys (mobile and household)	Allows for construction of very specific measures	High cost
Estimates using existing large-scale surveys (i.e., DHS)	Low cost	Questions included are generic, only capturing exposure to messages in general by health topic and by channel
Client-provider observations (e.g., provider is observed using a job aid to discuss FP)	Does not rely on self-reported data	High cost; may be particularly subject to social desirability bias
Social media monitoring and listening	Low cost	Requires technical expertise
Qualitative interviews with community leaders and program participants	Useful to assess comprehension and message reaction in richer ways that may lead to program learning	Not generalizable to entire target population

Measuring SBC Program or Campaign Exposure: Using Exposure Data to Inform Programs



SBC program or campaign exposure data can be used to:



Determine if the program reached the intended audience.



Assess audience reaction to the SBC program or campaign.



Determine how to budget for your SBC program based on the desired number of people reached.



Assess whether the program had an impact on the audience reached.



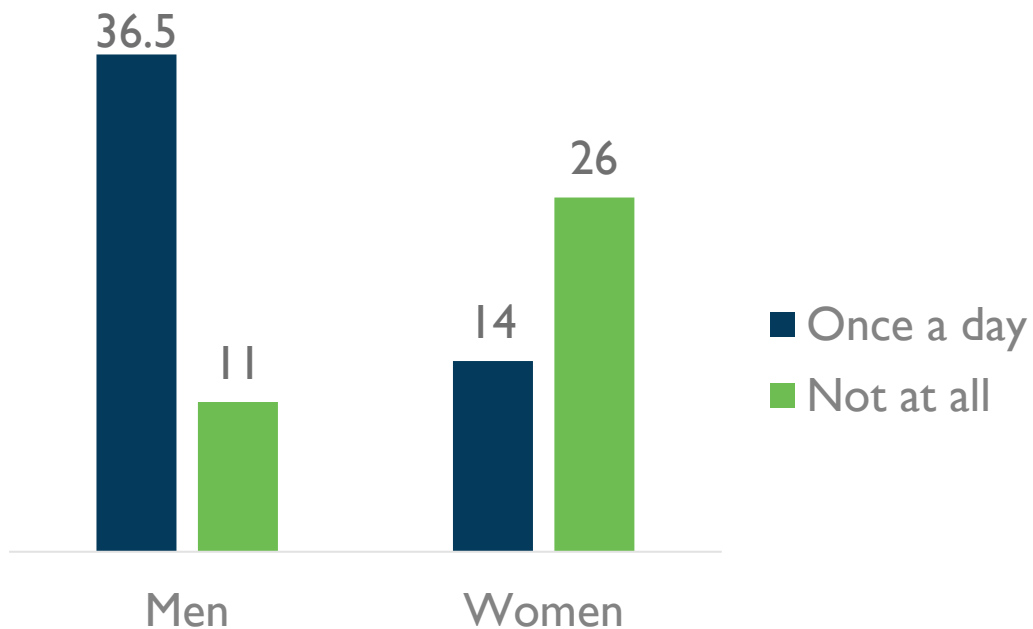
Assess whether the audience understood the program.

Measuring SBC Program or Campaign Exposure: Using Exposure Data to Inform Programs



Determine if the program reached the intended audience

Radio listenership from a mobile survey among men and women in Abidjan, October 2020



Finding: Radio listenership skewed male, with about a third of female survey respondents reporting not listening to the radio at all.

Implication: Findings suggest a multi-channel approach beyond radio is necessary to reach women of reproductive age.



SBC Measurement Learning Courses



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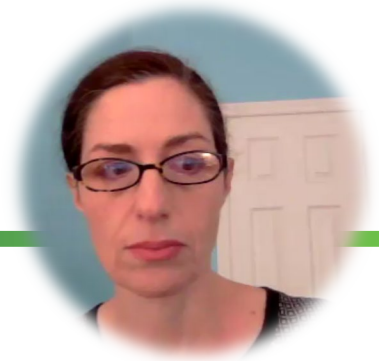
Key Message

Program designers and evaluators can benefit from SBC insights gained when tried-and-true research and evaluation methods have new applications in the family planning field.



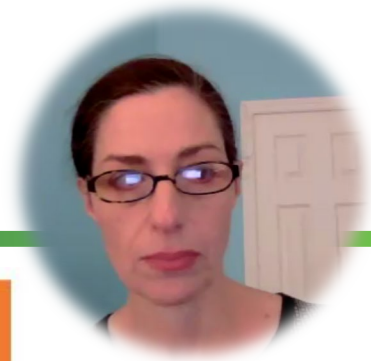
Audience Segmentation

Audience Segmentation



- Practice of dividing an audience into subgroups based on demographic, psychographic, and/or behavioral factors to develop tailored SBC approaches that are most likely to resonate with each audience subgroup.
- More recent applications of audience segmentation for FP has focused on segmentation by demographic characteristic.

Using Audience Segmentation Approaches in Niger



- Knows that a woman must have at least 4 **ANC** visits for her health and that of her baby
- Knows that a woman should give **birth** in a health **facility**
- Has heard of at least 3 different **FP methods**



- Pregnant women only need **ANC** if they are sick
- Health care **facility** is the best place to give **birth**
- Acceptable for a couple to use **FP methods** such as condoms, the pill or injectables to delay or avoid pregnancy



- Most women in the community have 4 or more **ANC** visits
- Most women in this community deliver in a health **facility**
- Members of this community agree that a woman should use **FP methods**

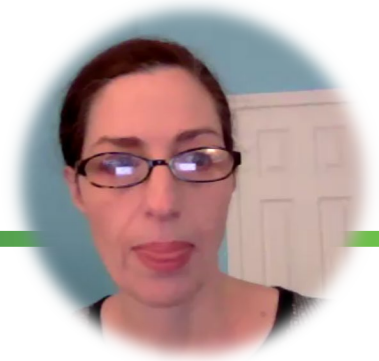


- Not at all difficult to go to a health facility for **ANC**
- Not at all difficult to go to a health **facility** to give **birth**
- Know where to go to get **FP methods**



- Not at all difficult to start a conversation with my partner about **ANC** visits
- Not at all difficult to start a conversation with my partner about giving **birth** in a health care **facility**
- Feel comfortable discussing **FP methods** with my partner

Using Audience Segmentation Approaches in Niger



AISSATOU is less likely to use ANC services than other women in Niger. Approximately, 29% of women interviewed were similar to Aissatou.



BINTOU is more likely to use facility-based delivery services than other women in Niger. Approximately, 12% of women interviewed were similar to Bintou.

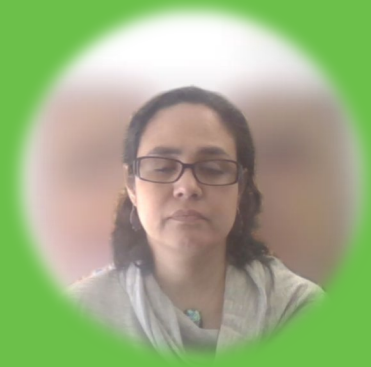


FATOU is more likely to use family planning than other women in Niger. Approximately, 21% of women interviewed were similar to Fatou.



Audience Segmentation



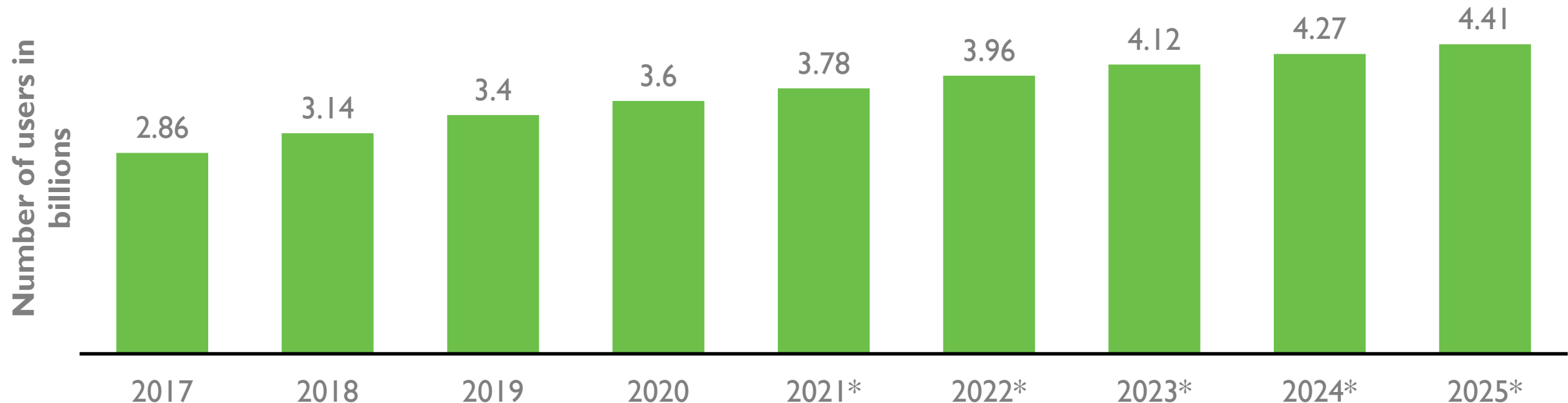


Social Listening

In 2020 there were over 3.6 billion social media users worldwide



Social media: Websites and applications that enable *users to create and share content* or to participate in social networking



Source: statista.com

Using Social Listening and Social Media Monitoring for SBC Programs



Social Listening

Can help you **qualitatively** understand:

- **Who** is messaging about topics of interest and what are they saying?
- **Where** are these topics of interest mentioned?
- What are the **attitudes & behaviors** of an audience to a specific topic?
- What **misinformation exists** about the topic?
- What **insights** can be learned about underlying attitudes or social norms expressed about a topic?

Social Media Monitoring

Can answer questions **quantitatively** such as:

- What is the awareness and level of **engagement** (**# of likes, # of shares, etc.**) with a campaign or brand on social media platforms?
- What is the **volume of conversation** for key topics in a given location?
- What is the **sentiment** of conversations related to a campaign, brand, or topic?

Using Social Listening and Social Media Monitoring for SBC Programs



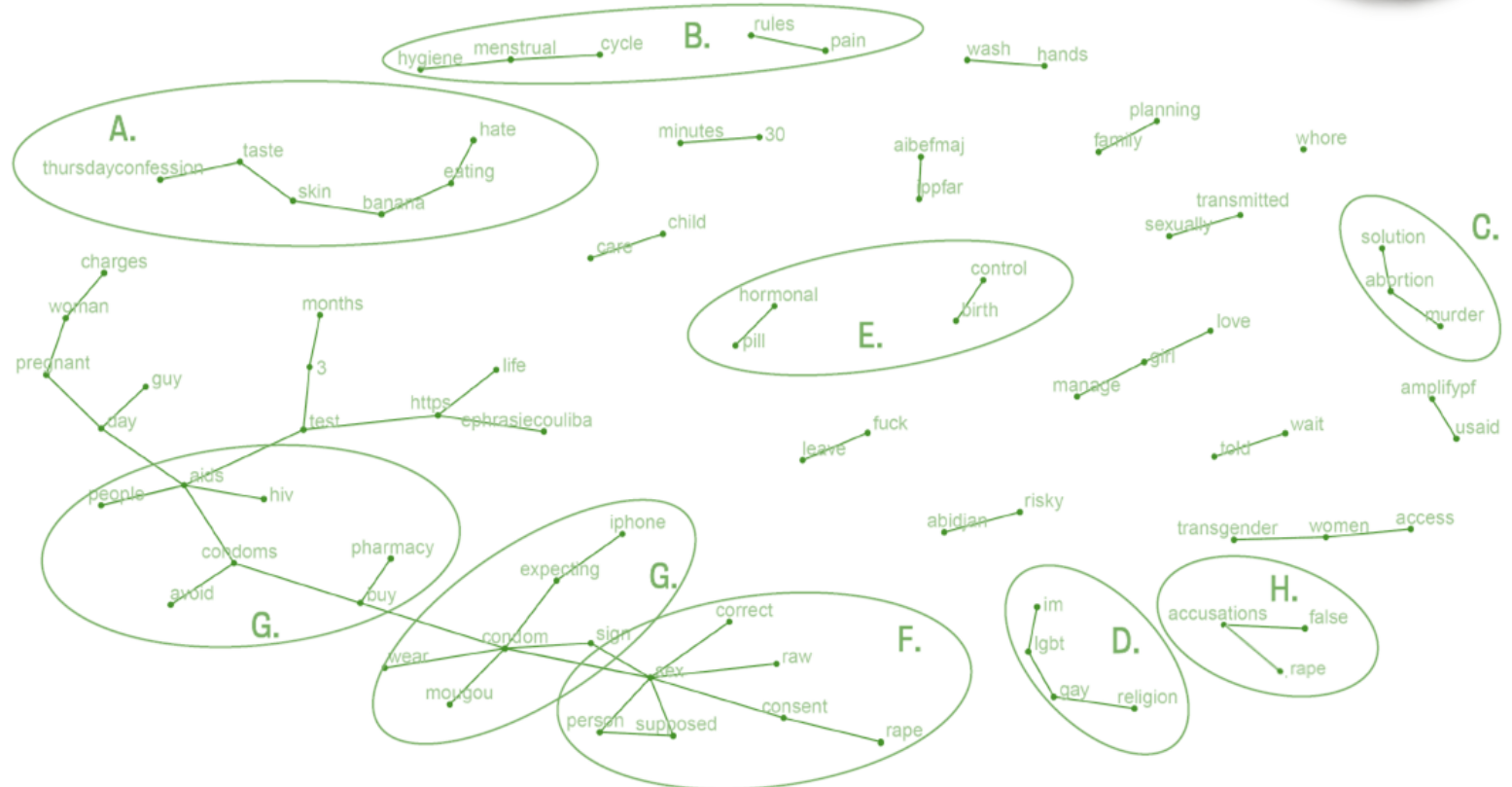
- SBC programs and FP programs that incorporate SBC approaches can leverage social listening to gather insights related to people's health-related knowledge, attitudes, norms, and behaviors.
- Insights generated through social listening and social media monitoring can be used together with other monitoring and evaluation techniques to produce data-rich learning environments for program design and adaptation.



[twitter.com/akreana_/statu...](#)



Cote d'Ivoire “Family Planning & Sexual Attitudes” Bi-gram Analysis



How to Leverage Social Listening to Inform Social and Behavior Change Programs



Introduction

Introduction

Social media platforms can engage users in multidirectional communication and provide public health programs with a tool to inform and engage diverse audiences on a wide range of public health issues, as well as monitor opinions and behaviors on health topics.^{1,2} Public health campaigns routinely feature social media advertisements, create fan pages, and promote conversations on social media around campaign topics, which makes social listening and social media monitoring useful tools for research and adaptive management of programs.³ Social media monitoring refers to quantitatively tracking mentions and comments on social media regarding a specific topic, while social listening allows public health campaigns to better understand the context of online interactions by qualitatively tracking and analyzing conversation content.³ The purpose of this how-to guide is to provide social and behavior change (SBC) program implementers, as well as monitoring, evaluation, and research practitioners with information needed to apply social media monitoring and social listening techniques to inform and evaluate campaigns that make use of social media platforms and other



Fluency 3



Developed by Bre, this guide will pro change (SBC) prog well as monitoring practitioners with apply social medi listening techniqu campaigns that m platforms and oth and highlights wh resources, partne needed.

This guide is one of the how-to guides that provide instructions on how to complete tasks. From form monitoring and evaluation guides cover each offer useful hints, resources and references available on the C

2023.

internet-based channels, and/or external resources, partly needed.

Internet penetration rates and social media is often an online population, with urbanization skews.⁴ However, while media as one of the media innovation, potential biases possible methodology do not differ from campaign itself. Social lister

Informing Social and Behavior Change Programs

Change Programs

USING SOCIAL LISTENING AND SOCIAL MONITORING

...how to use social listening and social monitoring to understand customer sentiment and identify areas for improvement.

This brief offers practical guidance on how to use social listening and social monitoring as tools to inform social and behavior change (SBC) programs. It is intended for global and regional SBC program implementers, evaluators, and donors in USAID priority countries. The brief provides an overview of social listening and social monitoring and explains how these methods can be important tools for collecting information about target audiences' knowledge and attitudes, as well as their exposure and responses to particular SBC interventions. Using applied examples in Francophone West Africa, it illustrates the steps undertaken in social listening and social monitoring, provides examples of lessons learned, and identifies how these methods can be applied to SBC programming.



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Discussion and Q&A



Call to Action

Future SBC approaches to strengthen family planning programs should commit to standardized, robust measurement to enable effectiveness evaluations that support continued investments in evidence-based SBC programs.

Call to action



SBC PROGRAMS: SBC programs can help fill the gaps in measurement by ensuring inclusion of standardized indicators of behavioral determinants and behaviors in their results framework, using a behavioral theory of change to guide their M&E efforts and going beyond a focus on output-level indicators.

SERVICE DELIVERY PROGRAMS AND COMMUNITIES OF PRACTICE: Voluntary FP efforts incorporating SBC approaches through programming or across community of practice platforms should promote the use of standardized SBC measures, and monitor and evaluate these SBC efforts using established measurement tools, such as the 12 Recommended SBC Indicators for FP.

SBC RESEARCHERS: Future researchers should continue to use existing SBC indicators and measurement tools and encourage the inclusion of modules that collect behavioral determinant data in surveys, including large-scale surveys, and build the capacity of implementers and policymakers for data use of behavioral determinant data.

DONORS: Donors should commit to requiring robust evaluation and standardized measurement of SBC approaches in FP programs and promote the routine collection of behavioral determinant data as a way to address global data equity issues and data gaps, so that scaled programs are informed by the evidence they need.

Reflecting on the Call to Action: Jason Bremner, FP2030

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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.

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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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