

The Provider Behavior Ecosystem in Action

A Practical Application from West Africa

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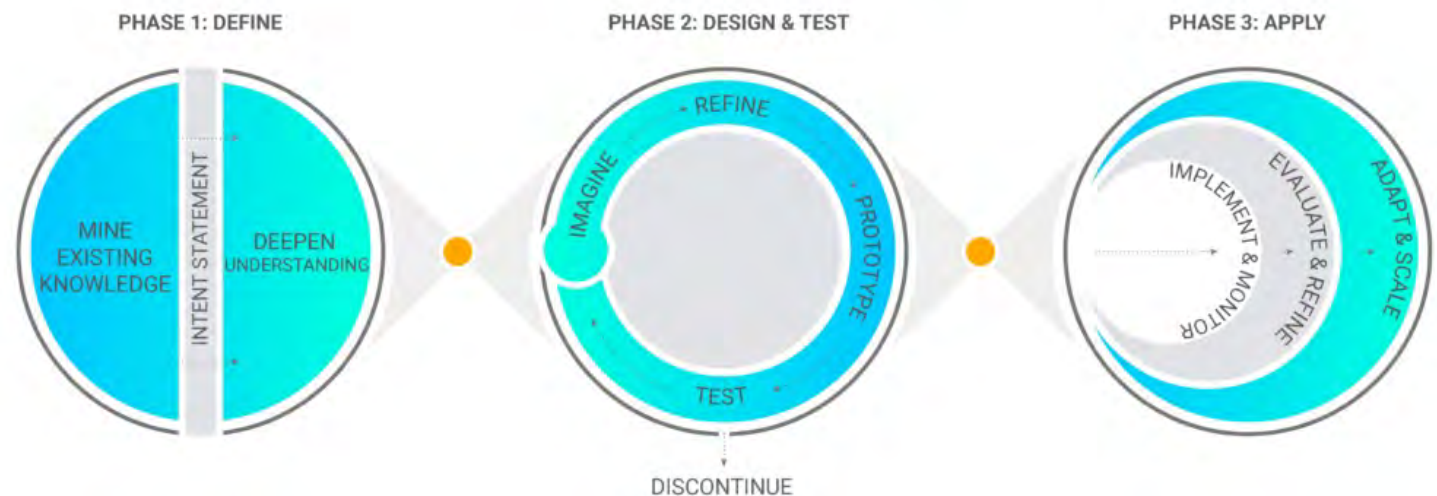
West Africa Breakthrough ACTION project aim

Improving family planning provider behaviors in Niger, Togo, Burkina Faso, and Côte d'Ivoire

As part of phase 1: Define

- Breakthrough ACTION conducted interviews in the four West Africa Breakthrough ACTION (WABA) countries to better understand the challenges that family planning (FP) providers experience.
- The goal of this research was to help identify one priority challenge in each country.

SBC FLOW CHART



Methodology

Over 40 semi-structured interviews

- ✓ Ministry of Health (MOH) representatives
- ✓ Key implementing partners
- ✓ Supervisors of providers
- ✓ Experts in provider behavior change (PBC)
- ✓ Dialogue Communautaire, PBC Ecosystem review, PBC landscaping
- ✓ Discussions with Amplify-FP and WABA

Interview questions

- ✓ Challenges in FP delivery
- ✓ Format of training and supervision
- ✓ Availability of tools
- ✓ Key gaps in the tool kit

Goals of November 2020 presentation to partners

- ✓ Review findings
- ✓ Identify key gaps and prioritize key challenges
- ✓ Share best practices across countries
- ✓ Identify key areas of support for Breakthrough ACTION

Using the PBC Ecosystem to organize and present the main challenges to MOH and partners



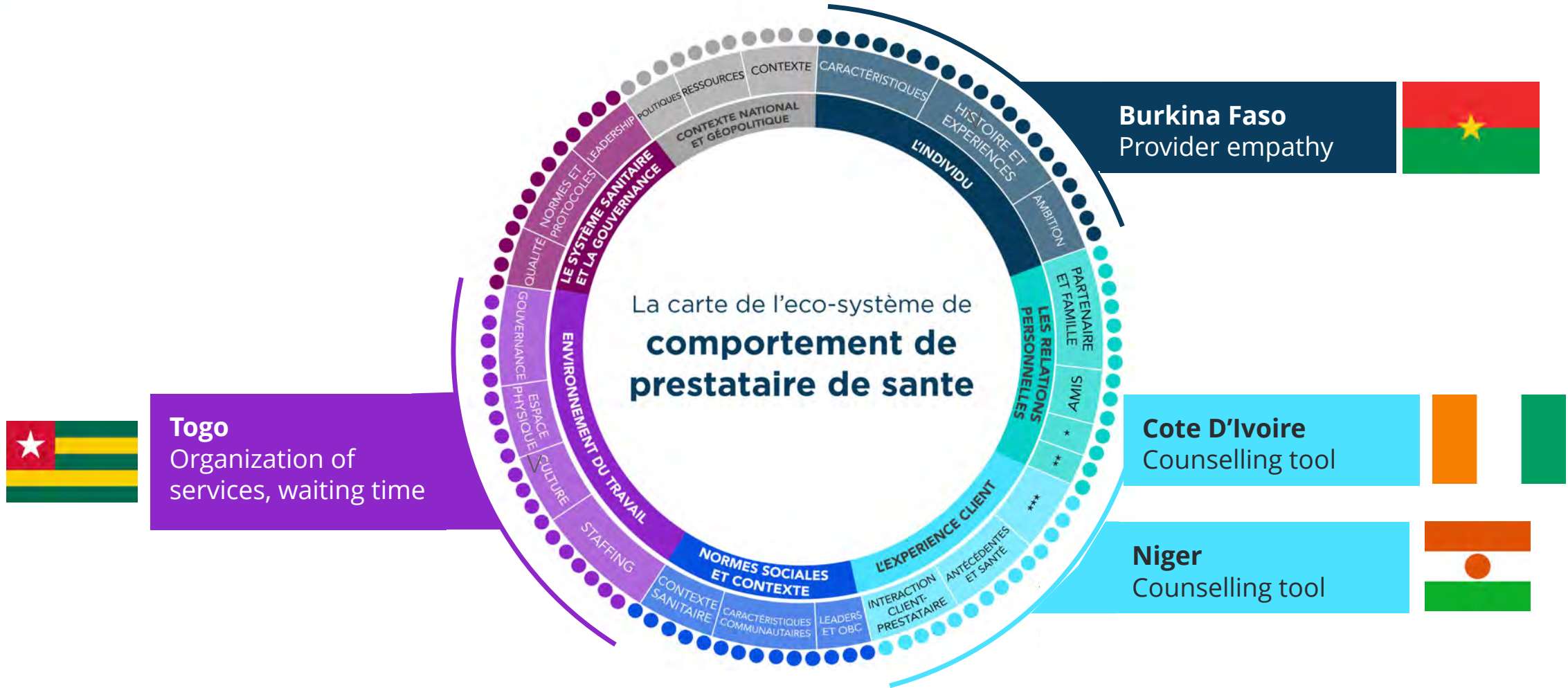
Individual	<ul style="list-style-type: none"> • Lack of knowledge and skills on some FP methods • Attitude of providers • Lack of motivation of providers • Judgment/ bias
PERSONAL RELATIONSHIPS	<ul style="list-style-type: none"> • Role of the community and family on the provider • Difficulty reconciling work and private life
CLIENT EXPERIENCE	<ul style="list-style-type: none"> • Welcoming skills • Judgement by providers, particularly against adolescent girls and young women • Client did not feel included in the decision-making process • Limited explanations on the side effects of the methods

Using the PBC Ecosystem to organize and present the main challenges to MOH and partners

COUNTRY AND GEOPOLITICAL CONTEXT	<ul style="list-style-type: none"> • Lack of funding for PBC • Lack of coordination among health partners
HEALTH SYSTEM GOVERNANCE	<ul style="list-style-type: none"> • Lack of tools and equipment • Tools poorly adapted to the realities on the ground • Costs of services • Lack of supervision and training • Lack of assessment at the level of health providers
WORKPLACE ENVIRONMENT	<ul style="list-style-type: none"> • Poor HR management • General disorganization, long wait times for patients, high stress environments for health workers • Lack of confidentiality • Poorly adapted opening hours • Difficult working conditions
COMMUNITY CONTEXT AND SOCIAL NORMS	<ul style="list-style-type: none"> • Myths and misconceptions among patients and health workers about FP • Lack of male participation in public service decisions



The Ecosystem helped MOH and partners in each country to identify one key priority challenge



The Ecosystem in practice

The PBC Ecosystem helped us:

- **Organize and visualize** complex information on the challenges faced by providers
- **Give a comprehensive view** of the challenges faced by providers (ensuring you do not forget anything)
- **Facilitate an objective conversation** on the factors that influence provider behaviors (instead of only focusing on the providers, it helped us capture divergent views)
- **Prioritize and focus** our efforts on specific challenges while recognizing the importance of having a comprehensive approach



Aspects to consider

Important to recognize the interdependency of the factors

Possible applications



Planning and designing research programs on Provider Behavior Change



Designing projects to improve Provider Behavior Change



Collect and present information (e.g., monitoring and evaluation)

Thank You

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