



Concept Note 1

Examining social and behavior change communication (SBCC) strategies to incorporate nutrition, hygiene, or health into agricultural programs

September 12, 2012

JSI Research & Training Institute, Inc. (JSI) • Helen Keller International (HKI) • International Food Policy Research Institute (IFPRI) • Save the Children (SC) • The Manoff Group (TMG)

Examining social and behavior change communication (SBCC) strategies to incorporate nutrition, hygiene, or health into agricultural programs

Background

One of the central tenets of SPRING is to promote social and behavioral change with a multi-sectoral and community-directed approach and successful health behavior change interventions in developing countries must rely upon insight from previous successes and failures as well as an in-depth understanding of the target audience (Aboud and Singla 2012, 589).

SPRING seeks to work across diverse sectors including agriculture, health, and nutrition to design effective combined social and behavior change communication (SBCC) strategies for improved maternal and child health outcomes. Studying the feasibility and acceptability of these integrated programs is not only a key step for evaluating large-scale interdisciplinary programs (Habicht 1999, 15) but this insight will be valuable for the design and delivery of effective SBCC programs to improve health-related behaviors and nutrition outcomes in SPRING countries or regions.

Research Objectives

- 1. Assess the provision, utilization, and coverage of a SBCC-focused program that combines: Nutrition | Hygiene | Health + Agriculture in a cohesive strategy.
- 2. Compare behavior change (e.g. intention to adopt or modified practices) related to nutrition-related outcomes for a SBCC-focused program that combines: Nutrition | Hygiene | Health + Agriculture.
- 3. Compare indicators for Nutrition | Hygiene | Health + Agriculture to comparison group(s) exposed to Nutrition | Hygiene | Health alone or Agriculture alone.

Methods

The first step will be the identification of a suitable agriculturally-focused program which could be adapted to incorporate key nutrition, hygiene, or health promotion SBCC messages in a SPRING country. After critical formative research to inform robust design, an integrated program will be developed to include Nutrition | Hygiene | Health *in addition to* Agriculture based upon a program theory of process pathways. SBCC interventions may include mass media campaigns on radio or television, individual counseling, group demonstrations, etc.

The second step will entail deploying this integrated multi-sector strategy and the evaluation design will focus on examining program delivery and utilization in relevant setting(s). Qualitative and quantitative methods including structured observations, focus group discussions, key informant interviews, and program surveys may be used to collect data and comparisons will be made to similar setting(s) where only messages representing a single sector (i.e. agriculture, nutrition, hygiene, or health) are available.

Additional analyses may include the comparison of various SBCC interventions to compare accessibility, coverage, etc. to determine if one delivery strategy versus another is more effective for the impact or cost of integrated Nutrition | Hygiene | Health + Agriculture programs. Information about the best practices for behavior change and packaging of content would be valuable to guide replication or scale-up of integrated programs in resource-limited settings.

References

Aboud, Frances E., and Daisy R. Singla. 2012. "Challenges to changing health behaviours in developing countries: A critical overview." *Social Science & Medicine* 75: 589-94.

Habicht, JP, CG Victora, and JP Vaughan 1999. "Evaluation designs for adequacy, plausibility, and probability of public health programme performance and impact." *International Journal of Epidemiology* 28:10-18.