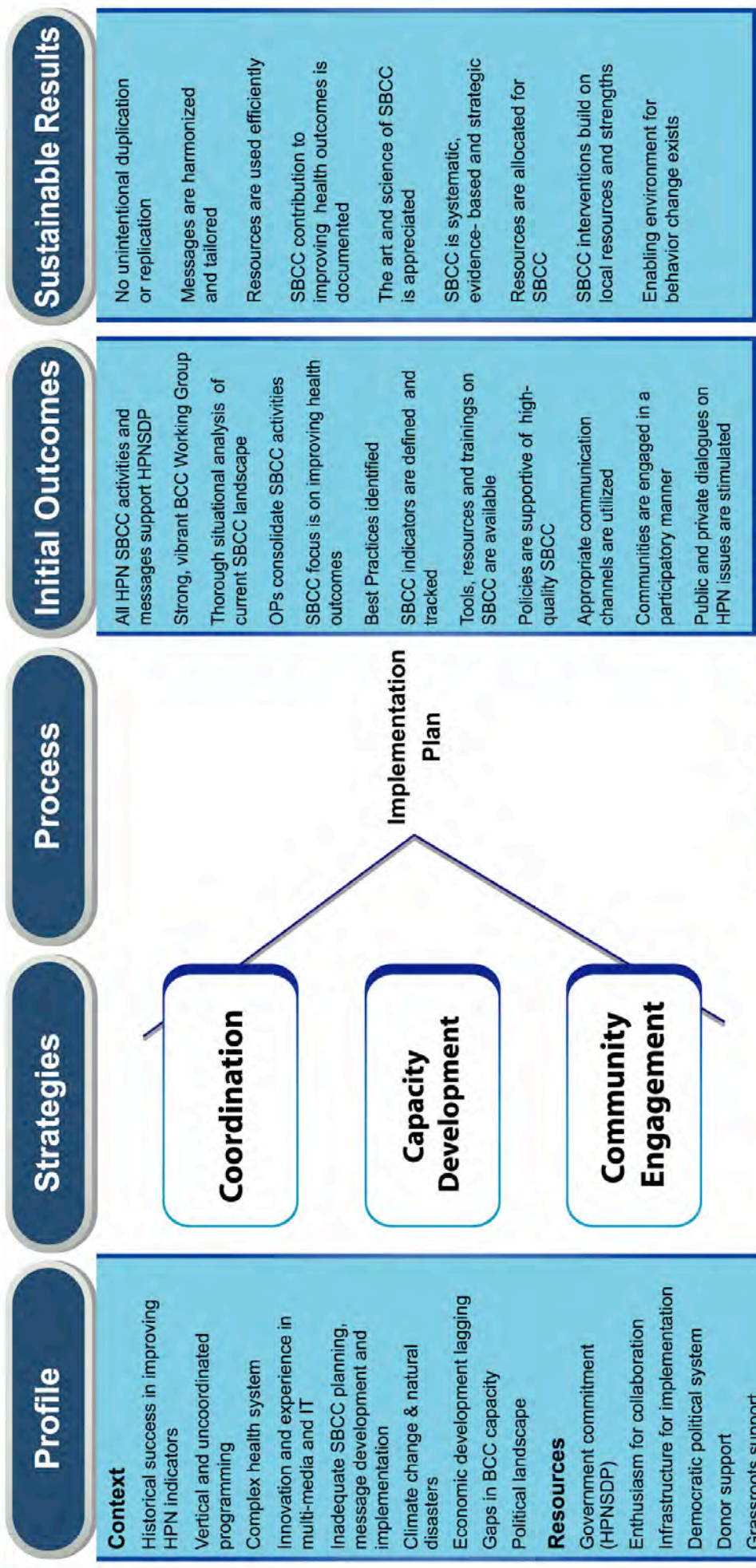


Pathways to Effective HPN SBCC

Vision: In Bangladesh, coordinated and audience-centered social and behavior change communication (SBCC) improves knowledge, attitudes and practices for health population and nutrition through a multi-sectoral approach, a skilled workforce at all levels, and the use of appropriate communication technology.



Research, Monitoring and Evaluation

Knowledge Management (documentation, sharing, learning)



National Framework for Effective HPN Social and Behavior Change Communication

Background

The strategic plan for the national Health Population and Nutrition Sector Development Program (HPNSDP) describes the Government of Bangladesh's intentions for developments and innovations in Health Population and Nutrition (HPN) for the period of 2011-2016. The HPNSDP identifies social and behavior change communication (SBCC) as a key strategy for achieving positive and lasting health outcomes.

This framework supports the implementation of the HPNSDP by **ensuring that SBCC activities are aligned with GoB policies, strategies and plans, and that they are carried out according to high-quality standards for best practices.**

This framework was developed by the Bangladesh BCC Working Group following a participatory, iterative process in close consultation with relevant key stakeholders and concerned experts including DGFP, DGHS, development partners, NGOs and civil society members.

Purpose of the Framework

The National Framework for Effective HPN SBCC assists all stakeholders to deliver consistent, reinforcing messages to priority audiences addressing key behaviors in support of the HPNSDP. The Framework facilitates coordination between and among stakeholders, and will align all stakeholders' activities with government policies and strategies. The Framework supports the planning, design and implementation of effective communication in support of favorable health outcomes.

To achieve this purpose, political commitment is critical.

What is it? The Framework consists of strategies and approaches that can be used align communication activities with GoB policies, strategies and plans. It identifies initial and long-term results of effective and coordinated SBCC. The Framework is a flexible and adaptable tool that can be used by any stakeholder harmonize their SBCC strategies and activities with national priorities.

The Framework consists of a diagram, this narrative, and a sample implementation plan.

Who is it for? Stakeholders include actors at all levels and in all sectors who are responsible for planning, designing, implementing, monitoring and evaluating SBCC, as well as those who are responsible for allocating resources to SBCC.

How will it be used? Stakeholders can adapt the Framework for their use on two levels: conceptual and practical. On one hand, it can be used conceptually to inform communication strategies and to guide resource allocation. On the other hand, the Framework – particularly the Implementation Plan – is a practical tool to identify opportunities for coordination, to inform a national Community of Practice (the BCC Working Group), and to guide implementation of SBCC activities.

The framework can also support the IEC Technical Committee as they continue to approve high-quality, coordinated SBCC materials.

Vision for SBCC

In Bangladesh, coordinated and audience-centered Social and Behavior Change Communication (SBCC) improves knowledge, attitudes and practices for health, population and nutrition (HPN) through a multi-sectoral approach, a skilled workforce at all levels, and the use of appropriate communication technology.

Profile

Strengths	Weaknesses
Commitment to HPN within technical units of MOHFW	Vertical/uncoordinated programming
Available expertise and experience on Media and Technology for HPN communication	Complexity of public sector leadership given the multiplicity of actors
Available infrastructure for HPN communication implementation	Inadequate HPN communication planning and implementation
Available mechanisms and goodwill for collaboration between units, sectors & levels	Poor information and knowledge management
Opportunities	Threats
Innovation in information technology and multi-media related to HPN communication	Disturbing ecological environment patterns
Positive social development and health results accomplished over the last 40 years	Political interference in decision-making
Promising experiences in multi-sector and multi-level collaboration	Over-dependency on foreign aid
Democratic political system	Economic development lagging behind

Strategies

During the Alignment Workshop of November 2012, participants identified key strategies to leverage strengths, address weaknesses, take advantage of opportunities and minimize threats.

1. **Harmonization (coordination) of BCC/IEC messages**
2. **SBCC Capacity Development**
3. **Community Engagement (audience focus)**

The three strategies work hand-in-hand and reinforce each other to support effective SBCC in support of the HPNSDP.

Strategy #1: Coordination

Coordination is crucial for successful implementation of SBCC. Effective SBCC programs require a concerted effort to orchestrate activities and to ensure quality, phasing and harmonization of interventions. To ensure synchronization across the multi-level and multi-segment stakeholders, it is essential that there is coordination at the highest levels of the government in collaboration with donors and NGOs.

Coordination can take on several forms, such as the alignment of messages, activities or stakeholders with national policies. All coordination efforts should ultimately support the goals outlined in the HPNSDP. Coordination can take place both within and beyond the health sector.

Networking is key to coordination. Through networking, different stakeholders can establish and nurture working relationships, and can look for opportunities to cooperate. Networking can be done in a number of ways, by meeting together, sharing newsletters, participating in e-mail or online networks, or meeting at seminars and conferences. Forums for networking and sharing, such as the BCC Working Group, allow

stakeholders to leverage resources, and encourage stakeholders to capture and replicate innovations. Meetings of the HPN Communication Coordination Committee strengthen coordination between HPN Units within DGHS and DGFP.

Linkage brings interactions between tasks, functions, departments, and organizations that promote flow of information, ideas, and integration in achievement of shared objectives and facilitate the process of coordination.

Advocacy is an organized effort to influence decision-making, and an effective tool to support coordination. Advocacy may be carried out at national to local levels, addressing both leadership and media to establish and ensure coordination. It is a continuous and adaptive process for gaining political and social commitment and plays a crucial role in smooth implementation of policies that would be beneficial for in creating an enabling environment for social and behavior change.

Knowledge management can support coordination. The BCC eToolkit for Field Workers is one example of this. KM tools can be used to disseminate existing information, best practices, and other evidence so that relevant data are accessible and used for message and program design.

Other examples of coordination may include: unified SBCC and uniform message development, adapting existing SBCC materials for other audiences or purposes (rather than starting from scratch); sharing research data widely so that others may also benefit; promoting service utilization and providing links to services; designing a multi-stakeholder or multi-sectoral campaign; or ensuring that local and national-level activities are complementary and reinforcing.

In order to coordinate effectively, a thorough situational analysis of the current SBCC landscape is necessary.

Strategy #2: Capacity Development

Capacity development in SBCC means nurturing a high-performing workforce for SBCC that works in ways that are responsive, fair and efficient to achieve the best health outcomes possible, given available resources and circumstances (i.e. staff are skilled, fairly distributed, competent, responsive, ethical and productive).

Capacity development at all levels – from grassroots to policy – is crucial. It includes the capacity to plan, design, implement, monitor and evaluate SBCC, as well as the willingness to allocate resources for SBCC. Capacity development as a strategy includes everything from improving the interpersonal communication and counseling skills of field workers, to building the leadership and advocacy skills needed to convince authorities and decision-makers to establish policies that are supportive of high-quality SBCC.

Strengthened capacity of SBCC practitioners will improve the quality of SBCC efforts, which will ultimately improve health outcomes. Well-executed SBCC is data-driven, audience-centered and coordinated. It focuses on changing behavior, encouraging supportive social norms, linking clients to services, and closing the gap between knowledge and practice. It includes a robust monitoring and evaluation system, including specific process and behavioral indicators.

There are many different approaches to capacity development, from more traditional formats (workshops, seminars) to more innovative techniques (webinars, eLearning). The Program Manager eToolkit is one resource for developing SBCC capacity. Identifying Best Practices in SBCC in Bangladesh will also improve the capacity of SBCC practitioners to learn from past successes and replicate effective interventions.

The rapid growth of information and communication technologies provides opportunities for learning, sharing and dissemination. At the same time, SBCC practitioners have to find the right mix of new and traditional forms of communication.

Strategy #3: Community Engagement

Community engagement refers to the process of engaging all stakeholders and communities to participate and build ownership with SBCC programs by applying a collective vision for the community's benefit.

In order to be effective, SBCC needs to strongly reflect communities' needs and priorities. Expert SBCC practitioners take a strengths-based approach to community engagement. In addition to changing the behavior of individuals, SBCC looks for ways to nurture an environment that will facilitate healthy behaviors and positive social norms.

A strengths-based approach acknowledges the value of local resources, including community participation; opinion and thought leaders; existing institutions, organizations and processes; or material or in-kind contributions.

Community engagement can take the form of pre-testing SBCC materials; advisory committees; participatory methods of community mapping and other qualitative research techniques; stimulating discussions in communities; empowering communities to speak on their own behalf; or working with communities to identify and then minimize or eliminate social, cultural or practical barriers to accessing health services and performing healthy behaviors.

Communication is, by definition, a multi-directional process. SBCC is not merely about disseminating messages, but also about stimulating dialogue – between SBCC practitioners and audiences, within communities and within families and social networks.

Key audiences and communities inform every step of developing and disseminating SBCC. Vulnerable, at-risk and marginalized populations are given particular consideration. As a result, communities are given voice.

Process

The strategies direct the formulation/development of social and behavior change communication activities. Process activities are the bridge between strategies and results. This is the Implementation Plan, which provides information on how the activities will be executed. Activities depend on strategies, and will vary considering the objectives and audiences of the project. The implementation plan details out the activities: what are the steps, what is the time frame, what are the expected outputs, what are indicators, who will implement, who will monitor etc (see example below).

Initial results

Initial results are the visible outcomes of implementing the three strategies.

Sustainable results

Sustainable results describes an infrastructure that is supportive of SBCC; a community of professionals that works in a coordinated and systematic way; and an environment in which SBCC can make the biggest impact on improving health outcomes. When sustainable results are achieved, we can attain our vision.

Cross-cutting Themes

These activities are important throughout each step of the Pathway.

Research, Monitoring and Evaluation will provide valuable learning about audiences, local context, the impact of SBCC interventions, and areas for improvement. Such learning will feed back into the planning cycle for continuous quality improvement. A results-based monitoring and evaluation system addresses the questions of ‘What and how much has been achieved?’ and ‘Are outputs linked to changes in the lives of people?’ A mix of participatory monitoring and evaluation techniques, surveys, and media tracking tools need to be considered for monitoring process as well as evaluating impact.

Documentation is an important aspect of a successful program. The activities to be undertaken need to be documented and this will ensure to measure the successes, or reasons for failure, so that it can help the next phase of action. Documentation of “Best practices” and “Lessons learned” should be undertaken to understand what works and what does not in different communities, so that successful interventions can be replicated. In the current age, documentation is a powerful tool. It is cost-effective and time saving through use of Information and Communication Technology (ICT).

Knowledge Management represents a series of tools and techniques for capturing, developing, sharing, and effectively using knowledge. It is a way to leverage knowledge externally and internally to improve collaboration and communication, and to work with greater efficiency to achieve better results using people, processes and technology. This is a continuous process.

Implementation Plan

Sample of planning format with example:

Activity	Step	Timeline	Output	Responsible Party	Partners + Allies	Activity
Strategy: Coordination Activity: Advocacy Result: Framework is well communicated; relevant stakeholders are aware of the benefit of coordination and are a champion for it.	Mapping	2 months	Decision makers & advocacy audience identified	BKMI	Relevant GoB/NGO and other stakeholders	N/A
	Produce an advocacy strategy	1 month	Strategy	Sub-g group of BCCWG	Members (relevant) of BCC Working Group	1 month time for review
	Execution of strategy	6 months	Advocacy: Coordination is well thought Reaching out to the policy level stakeholders	BCCWG, IEM, BHE, IPHN		BCC Working Group has talking points in each meeting about recent policy changes.

It is envisaged that the National Framework for Effective HPN Social and Behavior Change Communication, will foster ownership and build synergies among the relevant sectors, departments and organizations.