



Social and Behavior Change Communication Strategy Worksheet

Purpose – The purpose of this template is to compile all the information from each step to create an overarching communication strategy for provider behavior change.

Directions – As you complete each step, fill out the relevant section of this template. Once you have finished filling out Step 9, this template will contain all the information you need to write your provider behavior change SBCC strategy.

- 1** Problem Statement, Shared Vision, Problem Scope, Affected Population, Context, Provider Barriers and Needs, Motivational Barriers, Communication Landscape and Other Efforts
- 2** Core Problem
- 3** Primary Audience, Influencing Audiences, Audience Segments, Primary Audience Profile and Influencing Audience Profile
- 4** Communication Objectives
- 5** Key Promise and Supporting Points
- 6** Communication Approach and Communication Channels
- 7** Ideas for Adaptation
- 8** Partner Roles, Activities and Budget
- 9** Monitoring and Evaluation Indicators

Step 1

Problem Statement
<i>What is the provider behavioral problem you need to address?</i>



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Shared Vision

What is your vision for provider behavior and service provision? What will the future look like thanks to your SBCC intervention?

Problem Scope

How big or widespread is the problem? How severe is it and what are its causes?

Affected Population

Who is affected by the problem (provider types, values, demographics, psychographics, location, motivations and education level)?

Context

What is the broad context in which the problem exists (policy, environment and social)?

Provider Barriers and Needs

What inhibits and facilitates provider behavior change (in each category)?

Expectation



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Ability

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Opportunity

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Motivation

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Motivational Barriers

What specific motivational factors (social norms, status, lack of rewards or lack of recognition, etc.) are barriers to provider behavior change and quality service provision?

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Communication Landscape

What communication channels are available? What are the preferred sources of information and channels? Who uses which channels?

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Other Efforts

What are other programs doing to address the identified problem? How do you plan to work with them to reach the shared vision?

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Step 2

Core Problem

What is the core problem your intervention needs to address?

Step 3

Primary Audience

Who is the broad primary audience for your intervention? Whose behavior needs to change?

Influencing Audiences

Who are the key influencing audiences for your intervention? Who influences your primary audience?

Audience Segments

What audience segments will your intervention focus on?

Primary Audience Profile(s)

What is your primary audience segment like (demographics, psychographics, geographic location and behaviors)?



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Influencing Audience Profile(s)

What is your influencing audience segment like (demographics, psychographics, geographic location and behaviors)?

Step 4

Communication Objectives

What objectives do you hope your SBCC intervention will achieve? What change do you desire, how much, and by when?

Step 5

Key Promise and Support Points

What promise are you offering each audience if it makes the desired behavior change? What evidence do you have to back up that promise?

Step 6

Communication Approach

What communication approach(es) will you use to achieve your objectives?



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Communication Channels

What specific communication channels will you use for which audience segments? Which channel will be your primary channel and which are supporting?

Step 7

Ideas for Adaptation

How could you adapt or use the ideas and project examples presented?

Step 8

Partner Roles

What role will each partner play in implementing the SBCC intervention?

Activities

What activities will you and your partners carry out to achieve your objectives, based on the selected approach and channels? What is the timeline for activities?

Budget

What is your budget for your intervention? (This is best done in a spreadsheet but can be summarized here.)

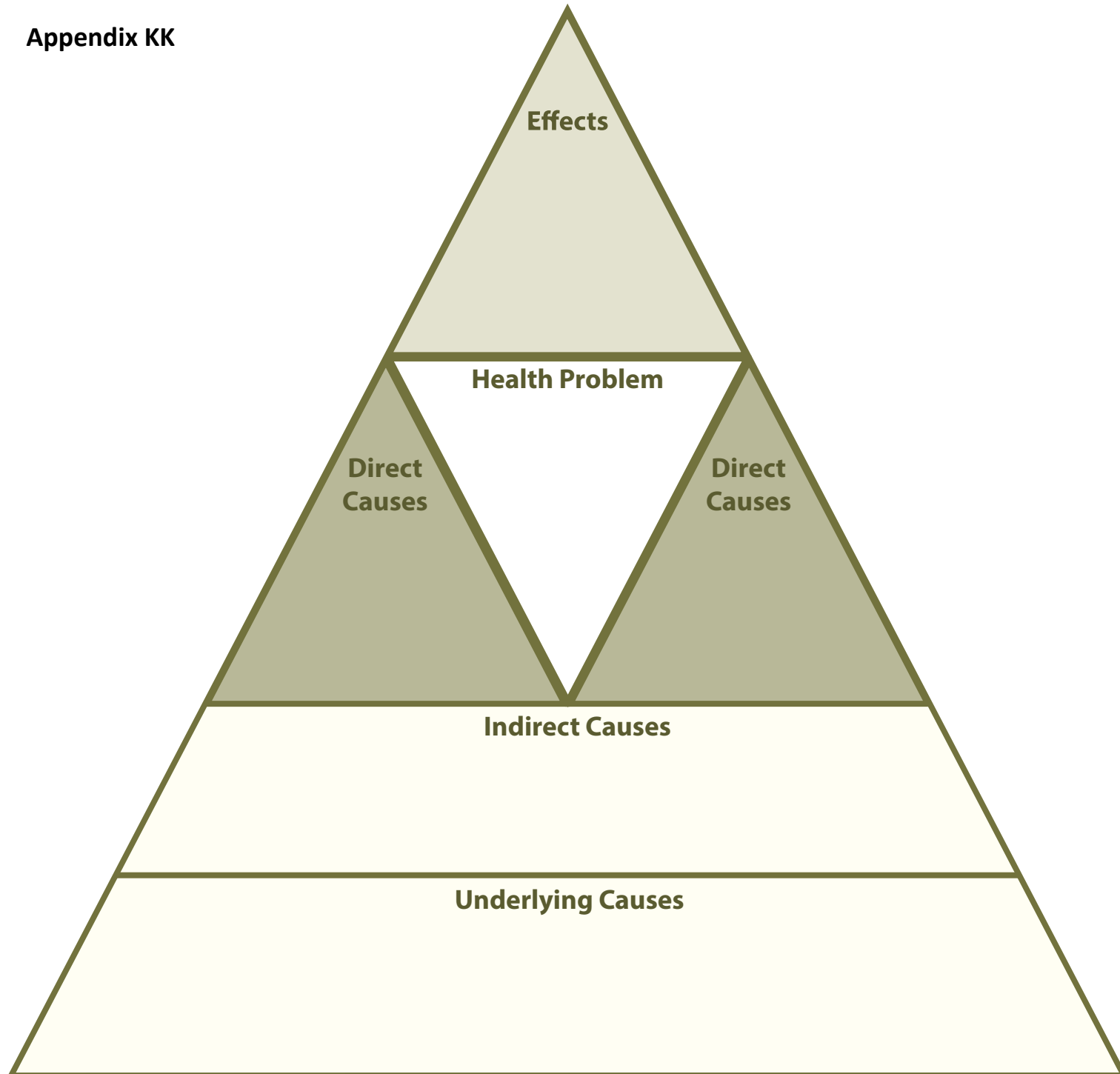


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Step 9

M&E Indicators
<i>What indicators will you use to measure success, including process, output, outcome and impact indicators?</i>

Appendix KK





Segmentation Table

Potential Audiences	Potential Primary Audiences	Potential Influencing Audiences
Demographic Characteristics Age, gender, years of training and years as CHW		
Geographic Characteristics Region, urban or rural, and area of conflict		
Socio-Cultural Characteristics Language, culture, place in society, religion and ethnicity		
Behavioral Characteristics Behaviors that affect or impact the challenge		
Psychographic Characteristics Personality, values, attitudes, interests, lifestyle and reasons for wanting to be a CHW		
Ideational Characteristics May include knowledge, beliefs and attitudes about CHW work, expectations and attitudes about clients served, perceived risk, self-efficacy, social support and influence, environmental supports and constraints, emotions, norms and self-image		



Final Communication Objectives Table

Audience Segment	Desired Change	How Much Change	Barriers to Change	Timeframe
<i>Example: CHWs working 1-5 years (working in peri-urban areas) serving FP clients with high client loads</i>	<i>Example: To increase the number of FP referrals made to the health clinic</i>			



Key Approach Table

Key Approach:	Intended Audience	Communication Objective
Criteria	Meets this Criteria (Y/N)	
1. Matches the identified motivational barrier		
2. Is appropriate for the level of complexity of the barrier		
3. Is appropriate for the level of sensitivity of the barrier		
4. Matches audience literacy level		
5. Meets reach requirements for Audience		
6. Is within program budget		
7. Is an acceptable approach to the intended audience		
8. Technology and innovation level is appropriate		

Appendix 00: Other Resources

The following is a collection of recent tools, resources, articles and literature you may consider as you design provider behavior change interventions to address *Expectation*, *Ability* and/or *Opportunity* barriers. Often, these challenges cannot be addressed solely through SBCC. However, using SBCC to complement the interventions can help make them more successful.

For example, a program that seeks to address *Ability*-related gaps through trainings providers in HIV counseling skills could develop complementary SBCC activities to build demand for HIV counseling and testing.

SBCC could complement *Expectation*-related challenges where FBP's do not understand quality standards or what is expected of them through community mobilization.

Opportunity-related challenges could be complemented by community advocacy to enable resources and health system support for improved CHW integration into the health system.

	Toolkits/Guidance Documents	Key Background Literature
Expectation	<ol style="list-style-type: none"> 1. UNICEF—Community Based Infant and Young Child Feeding, 2010. Support Supervision Module 2. IPC Toolkit, PSI, Implementation module: Quality Assurance Chapter and Cost Effectiveness Chapter 3. PSI Provider Behavior Change Toolkit: Support Supervision Tools and Coaching Basics Handbook 	
Ability	<ol style="list-style-type: none"> 1. Developing and Strengthening Community Health Worker Programs at Scale: A Reference Guide for Program Managers and Policy Makers, MCHIP, 2013 2. IPC Toolkit, PSI, Implementation module 3. Social and Behavior Change Communication for Frontline Health Workers, C-Change, 2012 4. The Balance Counseling Strategy: A Toolkit for Family Planning Providers, Population Council 5. Provider Behavior Change Communication Toolkit. PSI, 2012: Guidelines for identifying provider needs and creating value propositions (communications and materials development) and Objection handling guidance (communication and materials development) 6. Supporting Orphans and other Vulnerable Children Through Communication and Basic 	<ol style="list-style-type: none"> 1. Meeting the Health Information Needs of Health Workers: What have we learned? M. D'Adamo, et al. Journal of Health Communication: International Perspectives, 17:sup2, 23-29

	Toolkits/Guidance Documents	Key Background Literature
	<p><u>Counseling</u>. International HIV/AIDS Alliance, 2008</p> <p>7. <u>Helping Health Workers Learn</u></p> <p>8. <u>Village Health Team: A Handbook to Improve Health in Communities</u></p> <p>9. <u>Mapping of Training Resource Packages on RH, newborn, child health and adolescent health for CHWs</u>. World Health Organization. April 2014.</p> <p>10. <u>We are Health Curriculum</u>. Community Capacitation Center. Available through: CHW Central</p> <p>11. <u>A Guide for Training Community Health Workers/Volunteers to Provide Maternal and Newborn Health Messages</u>. Basics, POPPHI. September 2009. CHW Central</p> <p>12. <u>Barrier Analysis Facilitators Guide</u>. Food for the Hungry: A tool for improving behavior change communication in child survival and community development programs. 2010</p> <p>13. <u>Make Me a Change Agent</u></p> <p>14. <u>Interactive Health Education from NURHI</u></p>	
<p>Opportunity</p>	<p>1. <u>Developing and Strengthening Community Health Worker Programs at Scale: A Reference Guide for Program Managers and Policy Makers</u>, MCHIP, 2013: Section 3 – CHW Programs in Context and Appendix 1, Case Study of Large Scale Community Health Worker Programs</p> <p>2. <u>Open Source Human Resource Information Systems</u></p> <p>3. <u>CRS Guide to Working with Volunteers</u>. Catholic Relief Services, 2012.</p>	<p>1. <u>Capacity Project Legacy Site</u></p> <p>2. <u>Scaling up Health workforce Education and Training: A guide for Applying the Bottlenecks and Best Buys Approach</u></p> <p>3. <u>Planning, Developing and Supporting the Health Workforce: Results and Lessons Learned from the Capacity Project, 2004-2009</u></p> <p>4. <u>Strengthening Human Resources Management: Knowledge, Skills and Leadership</u>. J. McCaffery et al. Capacity Project. Legacy Series, 2009</p>