The Keys to Quality Social and Behavior Change from Start to Finish

*Practice with Nutrition*

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Agenda

- Background
- Key 1: Prioritizing behaviors
- Key 2: Creating pathways to change
- Key 3: Monitoring change
Poll Question

Have you had experience improving young children’s diets?

**YES** - It is the primary focus of my work.

**SOME** - My current work touches on it or I have worked on it before.

**NO** - It is not related to my work.
Discussion Question

What was/is most challenging about SBC to improve children’s diets?
What, how much, how often, and with what help a child should eat must evolve to meet his or her changing needs.

The Complementary Feeding Period Matters – A LOT!
Behaviors Are the Roots of Complementary Feeding – and Any Nutrition Program
UNICEF Framework to Improve Young Children’s Diets

**Determinants**
- Adequate Foods
- Adequate Services
- Adequate Practices

**Strategic Actions Delivered Through Systems**
- Food System: Improve the availability, access, affordability and desirability of diets for young children.
- Health System: Improve the availability, quality, affordability and use of health and nutrition services for young children.
- Water & Sanitation System: Improve the availability, quality, affordability and use of safe drinking water, hygiene and sanitation services and practices for young children.
- Social Protection System: Improve the availability, quality, affordability and use of adequate foods and services for young children.

**Outcome**
- Good diets for young children (6–23 months)
- Improved access to and consumption of nutritious, safe, affordable and sustainable diets for young children.

**Programming Context**
(Food security situation, humanitarian crisis, political and economic instability, etc.)

**Monitoring, Evaluation & Learning**

USAID ADVANCING NUTRITION
Social and Behavior Change for Nutrition

- Complementary feeding - like all of nutrition - is complex, often requiring multiple sectors and actors to align and harmonize efforts.

- Many behaviors require multiple daily actions that change as a child ages.

- Quality SBC is fundamental to achieving our nutrition goals.
What is Social and Behavior Change (SBC)?

This video on the USAID Advancing Nutrition Vimeo channel provides an overview of what quality SBC is and how we can tell if we are doing it well.
STEPS FOR QUALITY SBC PART I
Less is More: Starting with the Outcomes
Keys to Quality SBC for Improved Diets of Young Children

- Prioritize behaviors
- Create pathways to change
- Implement and monitor
Globally Recommended Complementary Feeding Behaviors

- Caregivers feed children with age-appropriate frequency, amount, and consistency while continuing to breastfeed them.
- Caregivers use a variety of nutrient-rich foods each day in meals and snacks for children.
- Caregivers prepare and feed children hygienically.
- Caregivers feed children in a responsive manner.
- Caregivers ensure children continue to breastfeed and eat during illness.
- Caregivers provide children recuperative feeding for 2 weeks after illness.
TOOL

Prioritizing Behaviors

PRIORITIZING MULTI-SECTORAL NUTRITION BEHAVIORS

Social and behavior change (SBC) programmers can use this tool with technical experts and stakeholders to prioritize behaviors during multi-sectoral nutrition program design.

High-quality SBC design requires multiple steps, beginning with behavior prioritization, a step that ensures the efficient use of resources and lasting impact. This tool walks you through the behavior prioritization process, which requires subjective decision-making informed by data. Refer to your theory of change or results framework when making decisions. Use prioritized behaviors to guide formative research and development of the SBC strategy. Use the table at the end of this tool to note the sources of data used to inform each step of the prioritization process. Share tool results with the implementing team and stakeholders and attach them to the SBC strategy.

Using the attached worksheet, follow these steps to prioritize behaviors:

1. Determine nutritional status or note the nutrition-sensitive program outcome.
2. For each of the relevant behaviors, analyze the behavior gap, potential to impact results, and potential ability to change.
3. Narrow the behaviors of interest by determining program and policy fit.
4. Select final prioritized behaviors.
Prioritization Criteria

- Behavior Prevalence & Gap
- Potential to Impact Results
- Potential Ability to Change
- Program & Policy Fit
List of prioritized behaviors
Social and Behavior Change Formative Research Decision Tree

Nutrition programmers can use this tool to select one or more research methods when gathering information needed to design any nutrition SBC program or activity.

Research to “form” or shape program activities is called formative research. Formative research answers programmatic questions necessary to achieve quality social and behavior change (SBC) program design, such as: Why do people practice a behavior or not? What are people willing and able to do in their context and how? Who influences them?

After prioritizing behaviors, answer the questions above by reviewing existing information. Fill any information gaps through formative research.

Using the decision tree on page 3 (figure 1), follow these steps to select research methods that answer your research questions:

Step 1. Design research questions.
Step 2. Select methods.
Step 3. Select participant groups and places to include in the research.

Step 1. Design research questions.

This is a critical first step. Ask—
- what people do
- why they do the behavior (what prevents or supports action)
- how to improve practices.

Answering “why” and “how” questions with program participants helps you understand specifically how to refine priority behaviors and the factors preventing or supporting these behaviors. Use the Factors That Influence Multi-Sectoral Nutrition Behaviors tool to consider the range of factors to cover in the research questions. Design research questions that are specific to participant groups. Be sure to consider meaningful “segments” or sub-groups of the people who practice priority behaviors and the people who influence them.
ACTIVITY
Prioritizing Behaviors
STEPS FOR QUALITY SBC PART II
Designing for Impact: Pathways to Change
Keys to Quality SBC for Improved Diets of Young Children

- Prioritize behaviors
- Create pathways to change
- Implement and monitor
### TOOL

#### Types of Factors

<table>
<thead>
<tr>
<th>Structural</th>
<th>Social</th>
<th>Internal</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ACCESSIBILITY</strong></td>
<td><strong>FAMILY AND COMMUNITY</strong></td>
<td><strong>ATTITUDES AND BELIEFS</strong></td>
</tr>
<tr>
<td>• Cost</td>
<td>• Monetary or material support</td>
<td>• Perceived value</td>
</tr>
<tr>
<td>• Time</td>
<td>• Acceptance and approval</td>
<td>• Perceived consequences</td>
</tr>
<tr>
<td>• Distance</td>
<td>• Task support</td>
<td>• Perceived identity</td>
</tr>
<tr>
<td>• Availability</td>
<td></td>
<td>• Emotional response</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>PROVIDER COMPETENCIES</strong></th>
<th><strong>GENDER</strong></th>
<th><strong>NORMS</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Interpersonal communication</td>
<td>• Decision-making</td>
<td>• Standard practice</td>
</tr>
<tr>
<td>• Technical proficiency or skills</td>
<td>• Control of income</td>
<td>• Expected practice</td>
</tr>
<tr>
<td>• Respect</td>
<td>• Status and value of girls and women</td>
<td>• Sanctions and enforcement</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>FACILITY EXPERIENCE</strong></th>
<th><strong>SELF-EFFICACY</strong></th>
<th><strong>KNOWLEDGE</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Infrastructure</td>
<td>• Confidence in ability</td>
<td>• Awareness</td>
</tr>
<tr>
<td>• Hours</td>
<td></td>
<td>• Understanding</td>
</tr>
<tr>
<td>• Supportive policies</td>
<td></td>
<td>• Information</td>
</tr>
</tbody>
</table>

**SKILLS**

• Learned ability

Adapted from ACCELERATE
Linking Pathways

**FACTORS**

- **Access**
  - Markets do not sell affordable and appropriate fruits & vegetables for children year-round

- **Norms**
  - Grandmothers do not approve of giving children fruits & vegetables

- **Skills**
  - Caregivers are unsure how to prepare fruits & vegetables for young children

**ACTORS**

- **Market Vendors**
  - Offer affordable and appropriate fruits & vegetables for children year-round

- **Grandmothers**
  - Approve & support feeding children fruits & vegetables for snacks

- **Community Agents**
  - Demonstrate for caregivers how to prepare fruits & vegetables for children

**ACTIVITIES**

- **Marketing incentives**
  - To support market vendors to sell fruits & vegetables packaged for children year-round

- **Cooking demonstrations**
  - To show caregivers and grandmothers how to prepare & feed children fruits & vegetables

- **Community dialogues & home visits**
  - With grandmothers to encourage feeding children fruits & vegetables

**BEHAVIOR**

Caregivers offer children 9-12 months of age pieces of fruits & vegetables as snacks to feed themselves
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**Community dialogues & home visits with grandmothers**
To encourage feeding children fruits & vegetables.
EDUCATION is NOT ENOUGH
Get Creative! AND Always Check Your Pathways

**FACTORS**

**Access**
Caregivers do not have the food to offer children during certain seasons

**Norms**
Families feed children over 1 year of age together from the family pot so they do not know how much the child eats

**Family Support**
Caregivers don’t feed children with appropriate frequency because they don’t have family support for farm and household tasks

**ACTIVITIES**

**Products**
Engage vendors to market preserved fish powder for the dry season

**Collective Engagement**
Shift norms around feeding children in a separate bowl and increase family support for task sharing through community reflection and role models led by religious or traditional leaders

**Skills Building**
Practice skills with women’s group to help visualize food quantities and consistencies

**BEHAVIOR**
Caregivers feed children with age-appropriate frequency, amount, and consistency
TOOL

Using Research to Design an SBC Strategy
Output

Pathways for each prioritized behavior
TOOL

SBC Strategy Checklist

NUTRITION SOCIAL AND BEHAVIOR CHANGE (SBC)
STRATEGY CHECKLIST

Purpose of This Checklist
Using high-quality social and behavior change (SBC) processes is a key crosscutting approach to build effective nutrition programs and services. An SBC strategy provides a “road map” to achieve key social and behavioral outcomes. The strategy ensures that activities needed to address critical factors that prevent or support the priority behaviors are coordinated. Strategies vary according to the needs of the program but maintain common elements.

How to Use This Checklist
Nutrition program planners can use this checklist to prepare and outline a new SBC strategy under development. Nutrition program planners and managers can also use this checklist to assess a draft or completed strategy and use the questions or gaps identified to strengthen the SBC strategy. Planners should update an SBC strategy throughout the life of a program, adapting it as people and contexts change.

Use the Nutrition Social and Behavior Change Work Plan Checklist tool to review work plans annually. The Work Plan Checklist is helpful to ensure that the implementation and adaptation of the SBC strategy is reflected in plans from year to year.
ACTIVITY
Linking the Pathways to Change
QUESTIONS?
STEPS FOR QUALITY SBC PART III
Implementing and Monitoring Quality SBC
Keys to Quality SBC for Improved Diets of Young Children

- Prioritize behaviors
- Create pathways to change
- Implement and monitor
Do’s and Don’ts for Quality Implementation

• SBC implementation is as important as good design, but it often gets less support and attention.

• Tool highlights:
  — **What to DO** (elements that lead to high-quality nutrition)
  — **What NOT to do** (problems to avoid)
Setting up a Monitoring Plan

• Select those behaviors and factors to monitor that are most important, relevant for the stage of program implementation, and feasible to monitor.

• If you are unable to find appropriate indicators, work with MEL experts to design new ones.

• Indicators may be related to program processes or outputs or factors that are more difficult to measure, such as decision-making autonomy or social norms.

[percentage/number/proportion of] + [who/what] + [verb (did, receive, etc.) _____] + [optional: when, where, how long, disaggregation]

Example: [Percentage of ] + [mothers of children between 6 and 23 months] + [who fed their child porridge with ASF at least once per day] + [the week prior to the survey]
Monitoring Factors

- Purpose: to understand why a behavior is or is not changing
- Track factor indicators frequently to inform adaptations and maximize program resources
- Monitor factors through surveys as well as regular reviews of data from program activities (e.g., supervision checklists, records from home visits or peer groups)
- Feedback sessions with program participants also provide the opportunity to check in on persistent barriers and gauge how to optimize facilitators
# Monitoring Plan

<table>
<thead>
<tr>
<th>Priority behavior</th>
<th>Factors</th>
<th>Indicators (added to your MEL plan)</th>
<th>Baseline</th>
<th>Target</th>
<th>Method of monitoring</th>
<th>Frequency of monitoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caregivers feed children 6–23 months an animal source food (ASF) each day</td>
<td>% of children 6–23 months with minimum dietary diversity (DHS)</td>
<td>25%</td>
<td>10% increase/year</td>
<td>Survey</td>
<td>Annual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>% of caregivers enrolled in peer groups who fed a child 6–23 months an ASF in the past 24 hours</td>
<td>12%</td>
<td>20% increase/year</td>
<td>Peer groups reports</td>
<td>Quarterly</td>
<td></td>
</tr>
<tr>
<td>1. Access to eggs</td>
<td>% of vendors in local markets selling eggs</td>
<td>65%</td>
<td>10% increase/year</td>
<td>Digital SMS survey of markets by consumers</td>
<td>Bi-annual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price of eggs as a proportion of total household food budget</td>
<td>5% as a proportion of the food budget</td>
<td>No change or decrease</td>
<td>Survey of households</td>
<td>Annual</td>
<td></td>
</tr>
<tr>
<td>2. Norms about feeding children ASF</td>
<td>Community conversations show changing norms in feeding children ASF</td>
<td>–</td>
<td>Positive trend</td>
<td>Consultations with communities</td>
<td>Bi-annual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Perceptions of community reactions to changing practices around feeding children ASF</td>
<td>–</td>
<td>Positive trend</td>
<td>Focus group discussions</td>
<td>Bi-annual</td>
<td></td>
</tr>
</tbody>
</table>
Analyze & Share Findings

**Figure 1** Sample Grow Together Community Dashboard

Source: NOURISH

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**Source:** Hurtado et al., 2020

**Example:** Score card with indicators under an overall theme

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Score</th>
<th>Reason for the score</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.1</td>
<td>70</td>
<td>Poor communication and dialogue between communities and health center (HAC)</td>
</tr>
<tr>
<td>6.2</td>
<td>90</td>
<td>Most of the HAC dialogues and communicate well with VHCs in their subcenters.</td>
</tr>
<tr>
<td>6.3</td>
<td>50</td>
<td>Some of the units communicate very well with their community members.</td>
</tr>
</tbody>
</table>

**Source:** CARE

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**Regular community dialogues**

Source: Martin et al., 2017
TOOL

Monitoring Social and Behavior Change

MONITORING SOCIAL AND BEHAVIOR CHANGE FOR MULTI-SECTORAL NUTRITION

Nutrition social and behavior change (SBC) programmers can use this tool during program design and implementation to set up indicators, track progress, and make adaptations.

High-quality SBC design requires multiple steps, beginning with prioritizing behaviors. The USAID Advancing Nutrition Behavior Prioritization Tool guides programmers through that process. After prioritizing behaviors, use the USAID Advancing Nutrition Using Research to Design an SBC Strategy Tool to analyze the barriers and motivators that prevent or support practice of the behaviors. These are known as the factors. This tool walks programmers through the process of determining which priority behaviors and associated factors to monitor in a monitoring and evaluation (M&E) plan. It also helps SBC technical and M&E staff select and apply monitoring methods, analyze results, and make adaptations.

As a programmer, monitoring changes in nutrition behaviors and factors on a regular basis helps you know how things are going, and where and when to make adaptations for high-quality SBC. In your activities, you may see that some people take up behaviors faster than others, and some barriers are reduced more easily than others. Some behaviors or factors may need additional resources or attention. Because people and contexts shift continually, mid-term and endline measures, while useful, may not indicate the full extent to which a program is on track. Monitoring changes in behaviors and factors also helps researchers learn about which activities achieve results and should be considered common practices across programs.
Outputs

Monitoring Plan
ACTIVITY
Vote with your feet! Monitoring SBC edition
KEY TAKEAWAYS
Key Takeaways

• Complementary feeding is complex.

• Quality SBC can help (for complementary feeding and other complex topics):
  - Prioritize - less is more!
    - Complementary feeding is not one behavior/outcome.
  - Link pathways between behaviors, factors, and interventions
  - Continually monitor (behaviors and factors) to adapt to the situation.
Enabling Better Complementary Feeding

Key Concepts of Quality Social and Behavior Change

Have you already reviewed this guidance page? Are you ready to dig deeper into the specifics of programming?

If yes, jump directly to a module page. If no, keep scrolling to read the guidance!

Module 1. Prioritize Complementary Feeding Behaviors
Module 2. Plan and Conduct Formative Research
Module 3. Design an SBC Strategy to Improve Complementary Feeding
Module 4. Prepare the Implementation and MEL Plans
Module 5. Implement, Monitor, and Adapt Activities to Improve Complementary Feeding
Module 6. Evaluate Activities to Improve Complementary Feeding
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