Results of Social and Behavior Change Communication Pilots in Senegal and Malawi

SU NGEEN MA GUNGEE CI SAMA LIIFANTU, DU NGEEN KO RECCU !
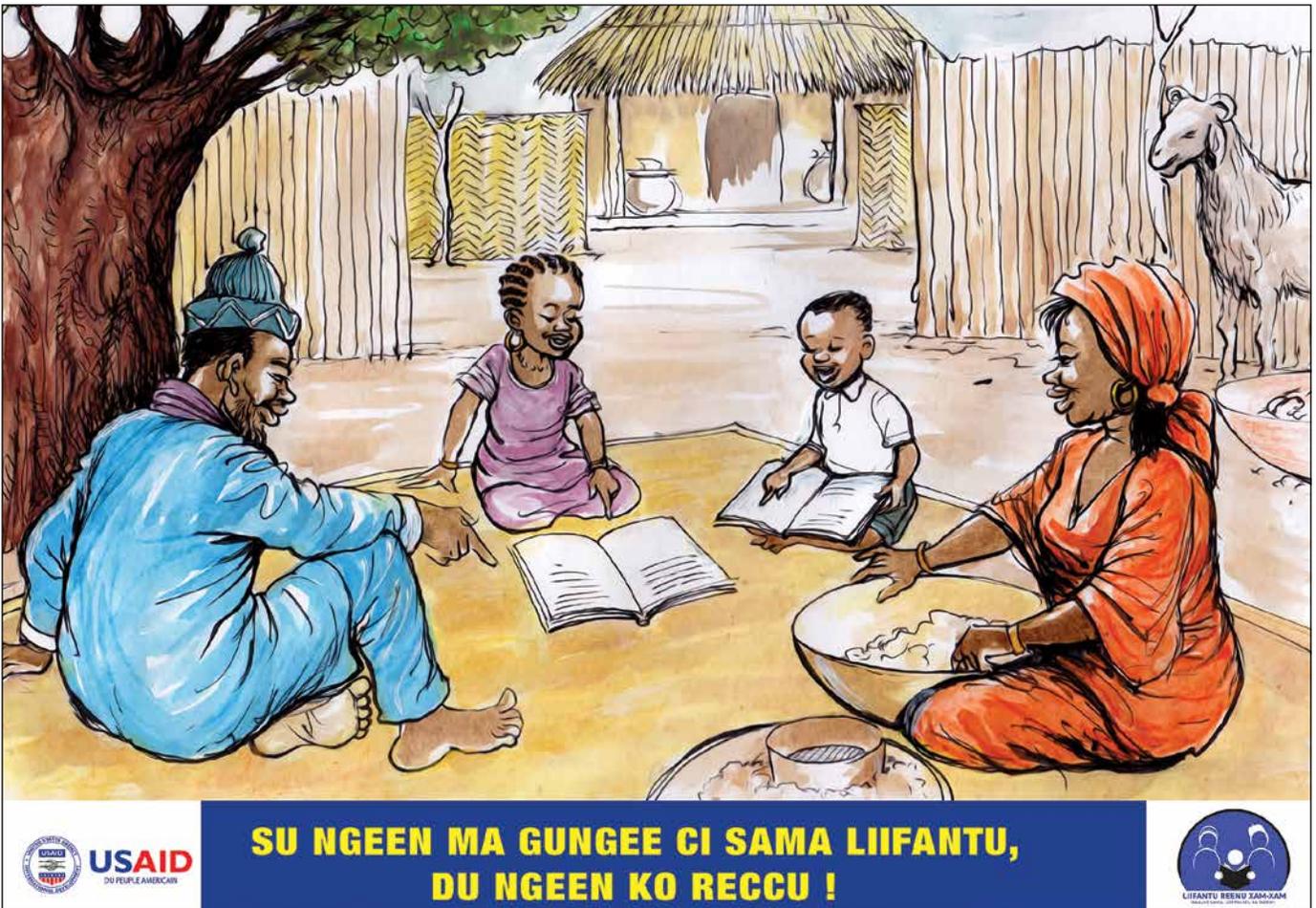
What did we do?

A few years ago, in conversations with USAID, we asked the question, "Could the well-researched communication techniques often employed in the health sector be used to promote greater household support for children learning to read?" In response, pilot studies in Senegal and Malawi, funded under USAID's Education Data for Decision Making (EdData II) contract, were designed to test whether a social and behavior change communication (SBCC) campaign could bring about changes in household members' beliefs regarding the roles they can play to support their children learning to read. The studies also tested whether such a campaign could induce family members to try out specific activities designed to have them help their children practice reading skills at home.

Social and behavior change communication (SBCC) represents the culmination of decades of research and practice in the public health field, where communication has been a critical element of efforts to encourage positive health behaviors.

A basic tenet of SBCC is that information is necessary but seldom sufficient to sustainably change behavior (C-Change, 2012).

The methodology bridges the gap between awareness and action by influencing the beliefs that can block or enable needed behavior change.

Drawing on preliminary qualitative research in each location, the project teams developed communication objectives designed to influence the target audience's attitudes, perceptions of community norms, and self-efficacy, in line with Fishbein and Cappella's (2006) integrative model. Based on these objectives, teams designed messages with a creative approach intended to strike an emotional chord with family members. The messages were widely disseminated through branded multichannel SBCC campaigns (over three to four months) that included a package of short radio spots, longer radio programs, posters, community theater, and community meetings. During the meetings, community organizers coached family members in a specific set of literacy-related activities they could regularly do with their children at home, even if they were not literate themselves.

A well-designed SBCC campaign must also recognize and address other barriers to the desired behaviors present in the target environments (Fishbein & Cappella, 2006). In the case of both Malawi and Senegal, this meant making sure that there were adequate books or other materials available to be used for reading activities at home, and addressing family members' lack of knowledge regarding the kinds of activities that would best support the development of their children's literacy skills.

A local nongovernmental organization, Associates in Research and Education for Development, ran the campaign in both regions in Senegal, including managing mobile libraries through which families could borrow storybooks in Wolof and French. In Malawi, the Early Grade Reading Activity (a USAID-funded project) supported the campaign, and made available additional copies of books and story cards in Chichewa for children to take home from school. The communication activities in Malawi also included SMS text messages designed to remind and encourage teachers to have students take materials home on a day-to-day basis.

What did we learn?

In each country, a pre-campaign survey collected baseline data, and a similar post-campaign survey measured the extent to which the target audiences were exposed to the SBCC campaign activities, and whether they could recall the specific messages. The theory underlying SBCC identifies several factors that will influence whether someone performs a desired behavior or not. An SBCC campaign therefore seeks to alter behavior by addressing those factors, namely (1) the target audience's attitudes toward the desired behavior, (2) their perceived norms regarding what others think about the behavior, and (3) their confidence in their ability to

perform the behavior (self-efficacy). Each of these factors is influenced by specific beliefs that audience members hold. Therefore, data were also gathered on what family members believed were the roles they could play in supporting their children learning to read, what they thought other people in the community do to help their children learn to read, and whether they thought they could themselves contribute directly to their children learning to read. They were also asked what specific reading-related activities they engaged in with their children. The discussion below summarizes the post-campaign findings from the three pilots.

Campaign recall

Table 1 shows the extent to which families in the target locations were exposed to any of the communication channels employed by the campaigns, and whether they could recall without prompting the main messages embedded in campaign communication materials and activities.

Table 1. Levels of campaign exposure and recall, by country and treatment area

Percentage of family members who…	Senegal region		Malawi zone
	Kaolack	Rufisque	Kasinje
Had heard or seen any messages about children learning to read	94%	90%	41%
Could spontaneously recall specific messages of the campaign*	72%	38%	11%

* Average of the percentages that could recall the 2 to 4 main messages without prompting.

Two things probably contributed directly to the lower recall seen in Malawi. Only one in four households in Kasinje reported having a radio, whereas majorities of households in the two regions in Senegal had them. The intervention in Kasinje tried to help families share radios in listening groups, but obviously, that required more planning and effort than just turning on their own radios. Also, in order to have treatment and control zones in the same district, a small, local radio station was chosen for broadcasts, but families listened to it less than the national radio stations.

The highest recall of specific messages was in the more rural setting of Kaolack, with a significant drop-off in recall among family members in peri-urban Rufisque. Paradoxically, families in Rufisque reported higher access to a variety of media channels, but also may have experienced a harder time hearing and recalling the SBCC messages in that more crowded media environment. The recall of specific messages

in Kaolack was very high;[1] in Rufisque it was more consistent with what was expected from this kind of SBCC campaign, while in Kasinje recall was very low, owing probably to the lower levels of exposure.

Attitudes

Table 2 presents data from the three studies showing the differences in response rates between those who had the highest level of exposure to the campaign (as measured by recall) and those with the least exposure[2] when asked, "What role can a family member play to help their child with school?"

Table 2. Response rates on family reading involvement, by level of campaign exposure

Percentage of respondents who said a family member could…		Senegal region		Malawi zone
		Kaolack	Rufisque	Kasinje
Read with the child	Highest exposure	58%	42%	49%
	Lowest exposure	10%	21%	41%
Ask the child to read aloud	Highest exposure	46%	27%	14%
	Lowest exposure	27%	15%	4%

The two responses shown in Table 2 relate to explicit messages of the SBCC campaigns. The first message was that parents can help their children by reading with them; the second was that if parents cannot read themselves, they can ask the child to read aloud. In Kaolack and Rufisque, family members with highest exposure to the campaign were considerably more likely than those with the least exposure to say they could read with their child or ask their child to read. In the case of Kasinje, the difference between the two exposure groups in terms of those saying they could read with their child was less pronounced (and not statistically significant). The percentages in Kasinje saying they could ask their child to read to them were much lower than in either region in Senegal, but the difference between the exposure groups was still significant.

Norms

To gauge the extent to which families were perceiving changes in the social norms in their communities, respondents were also asked whether they knew of friends or neighbors who read with their children. Table 3 shows the response rates based on level of exposure to the campaign.

Table 3. Family members' perceptions of community norms around reading

Percentage of respondents who said they knew of friends or neighbors who read with their children	Senegal region		Malawi zone
	Kaolack	Rufisque	Kasinje
Highest exposure	98%	65%	73%
Lowest exposure	56%	43%	51%

Whether the respondents were or were not actually reading with their children, the differences in the response rates between the highest and lowest exposure groups for this question after the campaign indicate that people perceived that the desired behaviors were occurring, and thus the social norms in the targeted communities may have been starting to change.

Self-Efficacy

Family members were asked if they felt they themselves could help their children learn to read. In addition to whether in general they felt that they could, those who responded yes were also asked if they felt that they could do the activities targeted by the SBCC campaign. Results are shown in Table 4.

Table 4. Family members' perceptions of own capacity to help children read

Do you feel you can help your child learn to read?		Senegal region		Malawi zone
		Kaolack	Rufisque	Kasinje
Yes	Highest exposure	94%	75%	94%
	Lowest exposure	69%	67%	61%
Of those who said yes, percentage saying they could…				
Read with the child	Highest exposure	63%	58%	69%
	Lowest exposure	33%	43%	39%
Listen to the child read	Highest exposure	73%	54%	23%
	Lowest exposure	33%	45%	12%

The percentage of most-exposed family members who said they did feel they could help their child were extremely high in absolute terms and relative to low-exposure respondents in both Kaolack and Kasinje, and considerably lower in Rufisque. This is somewhat surprising, since families in Rufisque tended to have higher levels of education, which one could have

assumed would make them feel more able to help (i.e., have higher self-efficacy). However, family members in Rufisque also reported having less time to attend to such matters. This could be an example of how an external constraint—lack of time—could diminish a target group's sense of its ability to undertake the desired behavior.

Of those who said they could help, similar percentages said they could read with the child or have the child read to them, with appreciably higher percentages of high-exposure respondents saying so. In Kasinje, the percentage saying they could listen to the child read was low, even for the high-exposure family members, but the percentage among high-exposure respondents was nearly twice that of low-exposure respondents.

Behavior

The above reported differences in attitudes, norms, and self-efficacy were expected to contribute to family members being more willing to help their children learn to read. As mentioned earlier, in addition to the communication techniques employed, books and other materials were made more readily available in the target communities, and parents were trained on specific literacy-related activities they could do at home. This combination of motivation through communication and removal of direct barriers to the desired behavior is what sound SBCC campaigns need to deploy to be successful. Table 5 shows the extent to which family members

Table 5. Differences in behavioral outcomes, by level of campaign exposure

Do you/someone in the household help your child with school by…		Senegal region		Malawi zone
		Kaolack	Rufisque	Kasinje
Checking homework	Highest exposure	65%	44%	53%
	Lowest exposure	15%	30%	13%
Asking about schoolwork	Highest exposure	52%	56%	14%
	Lowest exposure	15%	19%	10%
Asking the child to read aloud	Highest exposure	56%	42%	27%
	Lowest exposure	6%	13%	8%
Reading with the child	Highest exposure	27%	10%	21%
	Lowest exposure	4%	4%	9%

with the highest and lowest levels of campaign exposure reported the behavioral outcomes envisioned at the start of the campaign.

Across the board, family members who were the most exposed to the campaign messaging reported the greatest incidence of the above behaviors. It is interesting that the lowest response rates were for those saying they read with their child, which is where other constraints (such as the respondent's own reading ability and the availability of appropriate materials) could have most interfered, even if an individual had formed the intention to perform that behavior. For two behaviors—asking about schoolwork and asking the child to read—the response rates in Kasinje were much lower than in the other two pilot areas, even for the high-exposure group. However, the difference between high-exposure and low-exposure respondents was notable, especially for asking the child to read. For Rufisque, there was quite a gulf between the share of respondents who felt they could do these last two behaviors (Table 4), and the percentage who actually reported doing them (Table 5).

Conclusions

The three pilots had varying success in changing attitudes, norms, self-efficacy, and behavior. But in all cases, change was greatest for family members with the highest exposure to the campaign activities and messages. Data collected six months after cessation of the SBCC activities in Kaolack did show that many of the changed beliefs and behaviors were maintained, albeit at levels below what they were immediately after the end of the campaign. This is not surprising for this type of communication effort.
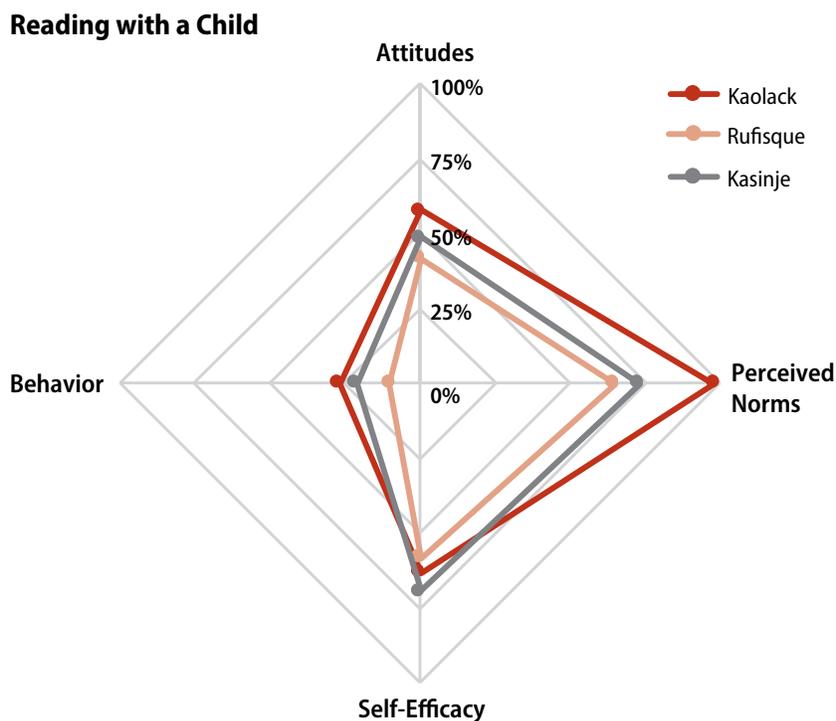
Also, in each case, important environmental obstacles to families being able to help their children learn to read were addressed—most importantly, providing books and other materials in sufficient quantity for students to take and use at home.

Figure 1 compares response rates for the highest exposure groups of respondents in relation to the issue of reading with their child. It implies that the campaign had more impact on attitudes, preconceived norms, and self-efficacy than it did on actual behavior. This is to be expected: SBCC theory suggests that attitudes, norms, and self-efficacy are key steps on the pathway to behavior change, and as such can be expected to precede behavior change. We concluded that these campaigns began changing behavior, but more importantly, laid the groundwork for future behavior change. Ongoing efforts would be needed to continue to motivate and address the constraints that impede parents and other family members from performing the desired behaviors. Long-term efforts

Figure 1. Impact on attitudes, norms, self-efficacy, and behavior: Comparison of high-exposure respondents on "reading with a child"

Reading with a Child

are especially important in this case because the audience for these messages is constantly renewing as additional cohorts of young children enroll in school.

Whether the strategies chosen for these SBCC campaigns were the most efficient for reaching the target audiences or whether an equal amount of (or even more) behavior change could have been brought about with a different array of communication strategies, we cannot conclusively state. Future activities and research in this area should be designed to test and compare different combinations of SBCC channels and messages.

What lessons can we draw from these pilots?

The most important lessons we took away from these pilot studies included the following:

- **Base campaigns on evidence.** SBCC campaigns need to be based on sound data describing how the target audiences think and feel about the issue being addressed. In the case of early grade reading, this means listening to what parents or other household members say they think, believe, and feel about the roles they can play in helping their children.

- **Address obstacles.** Understanding and overcoming the range of obstacles that may prevent the desired behavior

must also be part of an SBCC campaign. These pilots made more books available and trained families on the specific activities they could do at home in a few minutes. Pictorial reminder cards were given out to family members so that even those who could not read would be prompted to remember the different activities they had been trained to try out at home.

- **Choose the most optimal media coverage.** The media environment and the choice of media channels will determine how effective a campaign can be. More crowded media environments, such as in Rufisque, may require more sophisticated communication strategies and more intense media plans. And whereas a research design may lead to a choice of a media outlet with limited coverage (to allow for treatment and control), an intervention intending to maximize exposure should opt for the media channels with the greatest coverage and largest audiences.

- **Prepare to reinforce messages over time.** There was maintenance of beliefs and behaviors at levels above baseline six months after the campaign in Kaolack. But there was also significant erosion from the highest levels measured right at endline. Campaigns therefore need to evolve over time, introducing new messages, strategies, and tactics on a regular basis to continue to elicit and reinforce the desired behaviors.

Endnotes

[1] The recall of specific messages in Kaolack rivaled the rate at which the highest scoring commercials were recalled by people in the UK in a recent media assessment—that is, recall rates of 60% to 70% for commercial campaigns funded at the level of £20 to £30 million. (Based on data on 2014's most recalled ads; see Kemp, 2015).

[2] For these pilot studies, the researchers created an index of media exposure from survey questions that focused on the respondents' recall of the media campaign. This included unprompted recall and prompted recall. The exposure questions asked about channels (radio, public performances, posters and printed materials, etc.), about slogans and messages, and about characters in the radio spots and public performances. This index provided a way to measure the "dose response" effect of the campaign—the relationship between the intensity of an exposure and its effect on the target.

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