Communication for Behavior Change to Support Early Grade Reading

Karen Schmidt and Joseph DeStefano
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Objectives

By the end of the seminar, participants will:

• Have a basic understanding of the history and major theories of communication for behavior change
• Be able to describe the steps to plan behavior change intervention
• Recognize the features of successful interventions
• Understand how communication for behavior change may be applied to support early grade reading in homes and communities.
Agenda

Part 1: What is Social and Behavior Change Communication?

Part 2: What is the history and theoretical basis for SBCC?

Part 3: What is the best way to develop a SBCC Strategy?
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Examples

• Which one did you like better?
• How did they make you feel?
• Which was most effective?
• What information or knowledge was conveyed?
Knowledge is necessary, but not sufficient, for behavior change.
### Exercise A: Changing Your Behavior

<table>
<thead>
<tr>
<th><strong>What did I want to change?</strong></th>
<th>I wanted to eat at least five servings of vegetables each day.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>What motivated me to change?</strong></td>
<td>My doctor recommended it to lower my blood pressure.</td>
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<tr>
<td><strong>What made it more difficult to change? (Barriers)</strong></td>
<td>1. I didn’t have time to wash and cut vegetables every day.</td>
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<tr>
<td></td>
<td>2. I don’t like vegetables.</td>
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<td></td>
<td>3. When I bought vegetables they often went bad.</td>
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<tr>
<td><strong>What made it easier to change? (Facilitators)</strong></td>
<td>1. I washed and cut vegetables as soon as I got home from the market.</td>
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<tr>
<td></td>
<td>2. I found new kinds of vegetables and recipes that I liked.</td>
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<td>3. I made an extra visit to greenmarket each week just for vegetables.</td>
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What is SBCC?

Social and Behavior Change Communication is the systematic application of interactive, theory-based, and research-driven communication processes and strategies to address tipping points for change at the individual, community, and social levels.

Source: C-Change/FHI 360, 2012
Agenda

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The Evolution of Health Communication

- Information, Education and Communication (IEC)
- Behavior Change Communication (BCC)
- Social and Behavior Change Communication (SBCC)
Three Key SBCC Strategies

• **Advocacy** to raise resources as well as political and social leadership commitment to development actions and goals

• **Social mobilization** for wider participation, coalition building, and ownership, including community mobilization

• **Behavior change communication** for changes in knowledge, attitudes, and practices among specific audiences

Source: C-Change/FHI 360, 2012
**What is SBCC?**

Social and Behavior Change Communication is the systematic application of interactive, *theory*-based, and *research*-driven communication processes and strategies to address tipping points for change at the individual, community, and social levels.

Source: C-Change/FHI 360, 2012
Theories and Models

• Change theories (How do people change?)
  – Stages of Change Model
  – Diffusion of Innovation
  – Social Ecological Model

• Explanatory theories (Why do people behave as they do?)
  – Health Belief Model
  – Social Cognitive Theory
Theory: Cross-Cutting Concepts

• The importance of environmental and social influences
• Behavior change as a multi-stage process, not an event
• The distinction between forming an intention and completing and maintaining an action
• The difference between changing a behavior and maintaining it

Source: Glanz & Bishop 2012
How do people change?

The Stages of Change model describes five steps of behavior change:

• Pre-contemplation
• Contemplation
• Preparation
• Action
• Maintenance
How do people change?

**Diffusion of Innovation** theory posits that adopters of any new innovation or idea can be categorized as:

- innovators
- early adopters
- early majority
- late majority
- laggards
How do people change?

Social Ecological Models function as both “why” and “how” theories by emphasizing the multiple levels of influence, from the personal to community to public policy, and the idea that behaviors shape and are shaped by the social environment.
Why do people behave as they do?

- Intention to perform the behavior
- Environmental or external constraints
- Skills needed to perform the behavior
- Attitude or belief about whether the benefits of the behavior outweigh the risks or costs
- Perceived social or normative pressure
- Self-image
- Emotional reaction
- Self-efficacy (a person’s confidence in her ability to take action and maintain a behavior)

Salem et al, Johns Hopkins Bloomberg School of Public Health, 2008
Questions?
Agenda

Part 1: What is Social and Behavior Change Communication?
Part 2: What is the history and theoretical basis for SBCC?
Part 3: What is the best way to develop an SBCC Strategy?
How NOT to develop an SBCC campaign
How NOT to develop an SBCC campaign
1. Inquire
2. Design Strategy
3. Create & Test
4. Mobilize & Monitor
5. Evaluate & Evolve
P-Process

Step 1: Inquire
Step 2: Design strategy
Step 3: Create & test
Step 4: Mobilize & monitor
Step 5: Evaluate & evolve
P-Process Step 1: Inquire

- Understand the extent of the problem
- Identify audiences
- Uncover audiences’ barriers to behavior change—these may be economic, social, structural, cultural, educational, or something else entirely
- Identify facilitators for change, including potential messengers/media
“A Qualitative Study Exploring Barriers Related to Use of Footwear in Rural Highland Ethiopia: Implications for Neglected Tropical Disease Control.”

Used focus group discussions, in-depth interviews, and case studies to gain an in-depth understanding of community perspectives on behaviors related to shoe use, and the predominant facilitators and barriers to wearing shoes.

Ayode et al. 2013
Results: Norms

- Going barefoot increasingly seen as ‘shameful’
- Shoes confer dignity
- Shoes protect against injury and cold

“Educated sons and daughters advise their parents saying ‘people insult me, not you, if you don’t wear shoes. I will be ashamed of being your child if you travel barefoot to town.’”

(Religious leader, male, age 54)

Ayode et al. 2013
Results: Barriers

• People unable to buy more than one pair of shoes or shoes of the preferred quality.
• Shoes were typically preserved for special occasions.
• Shoes might not be provided for children until they reached a certain age.
• Low perception of risk
“Even when we buy shoes for children, we don’t let them wear them the whole time in order to preserve them. We punish the children when we find them wearing shoes at home. We force them to wear them only when they go to church, school and other distant places.”

(Unaffected male, age 30)
Exercise B: Inquire

Problem: Second-grade children in a rural district in Malawi have adequate materials and instruction for reading at school, but they do not read at home. We know from research that out-of-school reading practice is important for developing literacy.

Task: In groups of two or three, propose a plan for a formative assessment to design a behavior change intervention to increase out-of-school reading practice for second-graders.
**Problem:** Second-grade children in a rural district in Malawi have adequate materials and instruction for reading at school, but they do not read at home. We know from research the out-of-school reading practice is important for developing literacy.

**Task:** In groups of two or three, propose a plan for a formative assessment to design a behavior change intervention to increase out-of-school reading practice for second-graders.

<table>
<thead>
<tr>
<th>Who will be the respondents for your survey?</th>
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<tbody>
<tr>
<td>What methods will you use?</td>
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<tr>
<td>What questions will you ask?</td>
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Questions?
P-Process Step 2: Design Strategy

- Audience segmentation
- Behavior change objectives (desired changes per audience)
- Communication objectives per audience
- Program approach, based on change theory
- Key content
- Channels (per audience), activities, and materials

Adapted from Health Communication Capacity Collaborative 2013 & C-Change/FHI 360 2012
"Talk to me and find out the truth about Family Planning."
-Nurse Mildred

Talk to a qualified health worker at a health facility with a sign of a rainbow over a yellow flower or call 0312 500 600.
The campaign brings the kindly nurse Mildred into rural homes through:

- Radio drama
- Theme song
- Talk shows
- Radio spots
- Posters
- Billboards
- Counseling materials
- National health hotline
- Logo for health facilities and materials
Features of Successful Interventions

- Multiple reinforcing communication channels and techniques
- Community approaches
- Appeals to the heart as well as the mind
Exercise C: Design Strategy

For each case study, propose:

- Audience
- Behavior Change Objectives
- Communication Objectives
- Stage of Change
- Key Message Content
- Illustrative Channels
- Activities

*Online participants: see Case Study #1 on mothers*
## Exercise C: DESIGN STRATEGY

<table>
<thead>
<tr>
<th>Behavior Change Objectives</th>
<th></th>
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<tbody>
<tr>
<td>Communication Objectives</td>
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<tr>
<td>Stage of Change</td>
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<tr>
<td>Key Message Content</td>
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<tr>
<td>Communication Channels and Approaches</td>
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Questions?
Research on SBCC and Literacy

The Five T’s:

• **Tongue:** Children learn to read most easily in a language they already speak. Literacy skills in one language can be transferred to another – but oral vocabulary in both mother tongue and a new language needs to be systematically built.

• **Time:** Reading instruction and reading practice need to take place every day. Each day must include explicit instruction in each of the five components of reading. More time is needed for disadvantaged students.

• **Text:** Children cannot learn to read without text. Text for beginning readers should have a small number of words and simple sentences. Complexity should increase as children’s skills develop.
The Five T’s (continued):

• **Teaching**: Teachers need to know how to teach reading, including understanding the essential components of reading instruction: phonics, vocabulary, fluency and comprehension.

• **Testing**: Teachers need to use assessment regularly in class to check understanding and to determine if students have retained what they learned so that the pace and content of instruction can be adjusted accordingly. Education systems must use assessment to be aware of students’ and teachers’ progress. National assessments serve as indicators of a system’s performance.
## Addressing the Five T’s at Home

<table>
<thead>
<tr>
<th>T</th>
<th>What can families do?</th>
<th>How can we research SBCC impact on that?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tongue</strong></td>
<td>Development of oral vocabulary is important in a child’s first language and in other languages introduced in school</td>
<td></td>
</tr>
<tr>
<td><strong>Time</strong></td>
<td>Children need time every day to reinforce and practice their reading skills</td>
<td></td>
</tr>
<tr>
<td><strong>Text</strong></td>
<td>Beginning readers need beginning text, and need access to increasingly complex text as their skills develop</td>
<td></td>
</tr>
<tr>
<td><strong>Teaching</strong></td>
<td>Daily instruction should reinforce all five reading skill areas</td>
<td></td>
</tr>
<tr>
<td><strong>Testing</strong></td>
<td>Evaluating students’ progress is needed to adjust the pace and content of learning</td>
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Key Takeaways

• Behavior change is a process, not an event.
• Designing a behavior change intervention is also a process, based on evidence, theory and research (e.g. integrative model).
• People change behavior when the benefits of the new behavior outweigh the cost.
• Understanding a person’s motivations, barriers and facilitators is an essential first step.
• Knowledge is necessary, but not sufficient, for behavior change.
Thank You
References


References


• “Sponge” smoking cessation spot (India): Reproduced by the World Lung Foundation with permission of the Cancer Institute, New South Wales, Australia, owner. www.cancerinstitute.org.au http://worldlungfoundation.org/ht/d/sp/i/11223/pid/11223

• “Nimechill” abstinence spot (PSI Kenya (www.psikenya.org/)) https://www.youtube.com/watch?v=zxNnIdHav9g&list=PL5A43B80C0814A7FA