

SOCIAL BEHAVIOUR CHANGE (SBC): FROM KNOWLEDGE TO ACTION

Evidence-based development of a comprehensive SBC project strategy to improve dietary diversity of women and small children

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Why developing a Social Behaviour Change strategy is beneficial for any project in rural development, climate change mitigation, agriculture or food and nutrition security?

Bringing about social and behaviour change has been predicated on the idea that creating awareness about a 'problem' and its 'solution' will catalyse the desired change. While this approach is sound in theory, it neglects the fact that information and knowledge alone are just one out of many causal forces behind human behaviour change. Social Behaviour Change (SBC) has emerged as a more holistic antidote to this issue. It is understood as a process involving individuals, communities or societies that enables them to adopt and sustain positive behaviours in any thematic area, e.g., food production, climate-friendly lifestyles, good nutrition & hygiene practices.

To ensure a comprehensive SBC approach, an organisation or project needs to specify first which issue they want to address, and which practices are most likely to be effective in addressing the issue, considering their feasibility and impact. The next step is to conduct qualitative SBC formative research to identify the various factors that enable the adoption of selected practices ('enablers') or pose any obstacles ('barriers') to the adoption and address these by using those approaches that are most likely to be effective. In their seminal book 'Nudge', Nobel prize winning Behavioural Economist Richard Thaler, along with co-author Cass Sunstein, wrote "By knowing how people think, we can make it easier for them to choose what is best for them, their families and society." The use of SBC-oriented interventions is important when working with communities who have challenges that are often culturally, socially, and economically interlinked. Furthermore, a comprehensive SBC intervention needs to consider not only the individual's perspective but also the environment in which the person or group lives (demand and supply), e.g. providing information only about a recommended practice will, with a high chance, not result in a lasting behaviour change.

EXAMPLES OF SBC IN AGRICULTURE, CLIMATE CHANGE, AND RURAL DEVELOPMENT INTERVENTIONS

 Buehren et al. (2019) found that Ethiopia's Rural Capacity Building Project (RCBP), a programme implemented by the Government to strengthen agricultural services through a network of farmer training centers, greatly improved women's access to the training centers. This happened due to the government hiring more female trainers who helped inspire not just women's participation in agriculture, but also influence a shift towards higher value, and productive farming.

- Kerr et al. (2011) did a comparison study in northern Malawi between children in villages which were exposed to a participatory agriculture and nutrition intervention in comparison to comparable households in a different village which did not have a similar intervention. The agricultural intervention promoted the use of intercropping legumes and complementary visits from farmer researchers as well as nutritional education delivered through home visits and community meetings. The study showed that children exposed to the intervention had long-term positive anthropometric effects.
- The Climate Outreach Foundation's book 'Talking Climate' outlines a new approach to how climate change communication could be done. Authors Adam Corner and Jamie Clarke (2016) explore the role SBC strategies play in achieving meaningful discussions on the topic. The authors opine that for the last two decades, conversations around climate change have centered on "piecemeal" behaviour change strategies. But, to truly utilise SBC as a tool promoting climate-friendly choices, it is participatory important to foster public engagement and a sense of 'climate citizenship'

Box 1: Further reading material on Social Behaviour Change

- GIZ Practitioner's Guide: Social and Behaviour Change: Insights and Practice (Schmied, 2019)
- Social and Behaviour Change for Nutrition-Sensitive Agriculture: Session Guide Six of the Nutrition-Sensitive Agriculture Training Resource Package (SPRING, 2018)
- The Science of Changing Behaviour for Environmental Outcomes: A Literature Review (Bujold et al., 2020)
- Aligning recycling behaviours and the recycling system - Towards a full cycle of materials and behavioural methods (Pegels et al., 2022)

The Indo-German project 'Securing Nutrition, Enhancing Resilience (SENU) — India' implemented by Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) is an example of a project that has used an evidence-based SBC approach to improve nutrition and hygiene practices. The overall objective of the project is to increase dietary diversity of women (15-49 years) and small children (6-23 months). At village level, the project is operational in four districts in Madhya Pradesh, and two districts in Maharashtra, India. Social and Behaviour Change driven activities are the base of SENU's work in India by following a SBC and gender transformative informed integrated nutrition-sensitive approach that links nutrition sessions

(Nutrition-Participatory Learning & Action, N-PLA) and community / homestead nutrition gardens (knowledge to action) and involves not only women but other important stakeholders for improved nutrition, such as fathers, grandmothers and Anganwadi workers (frontline nutrition workers at village level).

Towards a systematic and evidence-based SBC approach, SENU project first prioritised high impact and feasible nutrition, hygiene & food production practices based on international recommendations by World Health Organisation (WHO) & the Food and Agriculture Organization (FAO) and expert / community consultations (Box 2).

Box 2: Examples of prioritised nutrition, hygiene, and food production practices

Nutrition Practices:

- Breastfeeding Practices such as mothers put their new-born children to the breast within one hour of birth and continue exclusive breastfeeding for the first six months
- Complementary Feeding Practices such as feeding children other foods in addition to breast milk after six months
- Dietary Diversity by ensuring pregnant and lactating women and their small children consume any suitable type of protein-rich ('body building') & vitamin / mineral-rich ('immunity-boosting') foods every day

Hygiene Practices such as:

- · handwashing at critical times, using soap and water
- use a handwashing station with water and soap readily available
- · safely handle drinking water
- · defecate in an improved latrine

Food Production Practices in Community Nutrition Gardens such as:

- grow **7 or more types** of recommended seasonal, nutrient-rich vegetables / fruits / millets / pulses (including medicinal plants) during the rainy and dry season
- practice crop rotation and intercropping
- use recommended water retention, harvesting and smart irrigation methods

Based on this prioritisation, SENU carried out a multi-pronged, **qualitative** and **quantitative** research approach.

The following three main SBC questions were selected for the **qualitative SBC research** which took place in Khandwa and Barwani districts (Madhya Pradesh) and Nandurbar district (Maharashtra) at the beginning of 2021:

 What are the main barriers that prevent the target group members from following the selected nutrition, hygiene and food production practices?

- What are the main enablers that enable / motivate the target group members to follow the selected nutrition, hygiene and food production practices?
- What can be done to overcome the main barriers and to take advantage of the enablers through SENU's integrated approach and the use of positive deviance (i.e., the use of uncommon but useful strategies adopted by outliers in a population)?

The qualitative research used a combination of group interviews with mothers, fathers, grandmothers and Anganwadi workers respectively, key informant interviews with frontline health workers (ASHA-Accredited Social Health Activists), agricultural extension workers and Gram Panchayat (Village Council) representatives and observations of homestead nutrition gardens, child feeding practices, hand washing practices and photo documentation of the same.

Washim districts with a sample of 800 mother-child pairs (200 per district), assessed the prevalence of these barriers and enablers. Based on these findings, the existing project activities were refined and SBC messages in a comprehensive procedure developed, focused on addressing the most prevalent barriers while taking advantage of the identified enabling factors and tailor them to the relevant target audience (mothers, fathers, grandmothers, Anganwadi Workers [AWW]), see Table 1.

The **quantitative baseline** survey, conducted in late-2021 in Barwani, Khandwa, Nandurbar and

Table 1: Example of a studied practice with barriers / enablers, their prevalence, SBC message and integration in SENU activities

PRACTICE: PREGNANT & LACTATING WOMEN CONSUME VITAMIN / MINERAL-RICH ('IMMUNITY-BOOSTING') FOODS EVERY DAY (PREVALENCE BELOW)						
Barriers / Enablers	Required Changes	Audiences		ces	Recommended SBC Communication	SBC Activities
(+) desire to have a safe delivery + a healthy child	Strengthen the perception that consuming vegetables / fruits contributes to safer delivery and helps the child be healthy.	M*	F*	G*	Message: Do you want a safe delivery and a healthy baby? It is important that you consume foods rich in vitamins and minerals every day, such as fruits, vegetables, seeds, pulses, eggs or dairy products.	N-PLA sessions household visits community and mass media activities activities engaging men Community Nutrition Gardens, support to home gardens, nutrition-sensitive micro planning
(+ / -) access to low-cost, vitamin / mineral-rich foods	Strengthen fathers' perception that it is worth buying fruits and vegeta- bles for their pregnant / lactating wives.		F*	G*	Message: Is your wife pregnant or lactating? Help her eat foods rich in vitamins and minerals every day, such as fruits, vegetables, seeds, pulse, eggs or dairy products. They will help her and the baby thrive! Message: Is your daughter-in-law pregnant or lactating? Help her eat foods rich in vitamins and minerals every day, such as fruits, vegetables, seeds, pulses, eggs or dairy products. They will help her and the baby thrive!	
(+) existing popular meals that contain minerals / vitamins	Strengthen women's ability and motivation to prepare affordable, vitamin / mineral -rich meals.	M*		G*	Sharing of low-cost recipes (among women + by AWW" Anganwadi Work-ers) rich in vitamins and minerals during SBC activities.	

Percentage of women who consumed dark green leafy vegetables during the previous day: 10.4% across districts (Barwani: 1.5%; Khandwa: 18%; Nandurbar: 11%; Washim: 11%)

Percentage of women who consumed vitamin A rich fruits / vegetables during the previous day: 4.2% across districts (Barwani: 2.5%; Khandwa: 4%; Nandurbar: 3%; Washim: 7.5%)

Percentage of women who consumed other vegetables during the previous day: 80.5% across districts (Barwani: 71%; Khandwa: 91%; Nandurbar: 88.5%; Washim: 71.5%)

Percentage of women who consumed other fruits during the previous day: 15.9% across districts (Barwani: 13.5%; Khandwa: 15%; Nandurbar: 12%; Washim: 23%)

M*- Mother, F*- Father, G*- Grandmother

The described SBC research process helped that the revision of the nutrition sessions content and materials (20 N-PLA sessions) and design of other awareness raising activities is based on data from women and community members and focused on the most prevalent ones. For instance, there is a general perception that the barrier to early initiation of breastfeeding is grandmothers' negative attitudes towards colostrum. However, the conducted research showed that the proportion of grandmothers who encourage their daughters-in-law to feed colostrum is actually quite high, ranging from 40% to 94%, depending on the SENU project district. For this reason, the activities do not prioritise addressing this perceived barrier. On the other hand, research confirmed that the perception of mothers that a child needs more food and other fluids to avoid thirst and hunger during the first six months needs to be addressed. The perception is relatively high in Barwani with 60%, Khandwa 51%, Nandurbar 49% and Washim 31%. Through the research process the project also learnt about motivators for women to have a well-nourished child. For instance, when women were asked about their wish for their children, "good education" which is linked to good nutrition was mentioned by more than 50% of women in the districts. This means that linking improved nutrition with

children's good education can serve as a strong motivator for adopting the promoted nutrition practices.

Relevant for the selection of recommended food crops for the community nutrition gardens are the following findings: when it comes to vitamin and mineral-rich foods, the percentage of children who consumed specifically vitamin A rich fruits and vegetables during the previous day was comparatively better in Barwani district with 4.5% as compared to other districts which are even less, the consumption of other fruits and vegetables ranged from 27.5% to 42.5%. The qualitative and quantitative studies helped here to identify and illustrate the prevalence of barriers to dietary diversity with access to nutrient-rich food being one. The baseline survey found that on average only 39.5% of households grow their own vegetables; a finding which encourages SENU's use of Community Nutrition Gardens as a promising activity of increasing access to diverse food as it is a women self-help group who maintains the garden on community land with support of Mahatma Gandhi National Rural Employment Guarantee Scheme and others.

The entire SBC research process and results are documented in a comprehensive SENU project SBC strategy.

Problems with complex origins such as malnutrition require innovative, interdisciplinary solutions. The following points need to guide the design and implementation of all the SBC activities listed below:

- All the activities must focus on addressing one or more identified and highly prevalent barriers / enablers. The project must avoid general awareness raising activities, as they are not likely to bring the desired changes in people's behaviours.
- Since the activities focus largely on adults, their implementers must understand and actively use the principles of adult learning (see box 3). SENU project aims to reach well over one million women and their 'influencers' (husbands, in-laws, etc.). Therefore, the focus should not be on coming up with many different activities but on implementing a limited number of activities at a large scale (reaching many people) and in the required quality. It is the scale and quality of activities that matter the most, not their number.
- It is important that the prioritised activities not only change the behaviours of individuals but also strengthen the systems that can do so in the long-term and/or on a large scale. For example,

instead of delivering trainings directly, the project can support creating pools of trainers from relevant government departments or civil society organisations. Strengthening the ways how AWWs (and other 'agents of change') are currently supported to do their job well is equally important. This means using, even more, the perspective of "what can they do" as opposed to "what can we do". Soft skill trainings for effective training delivery are recommended.

Box 3: Principles of Adult Learning

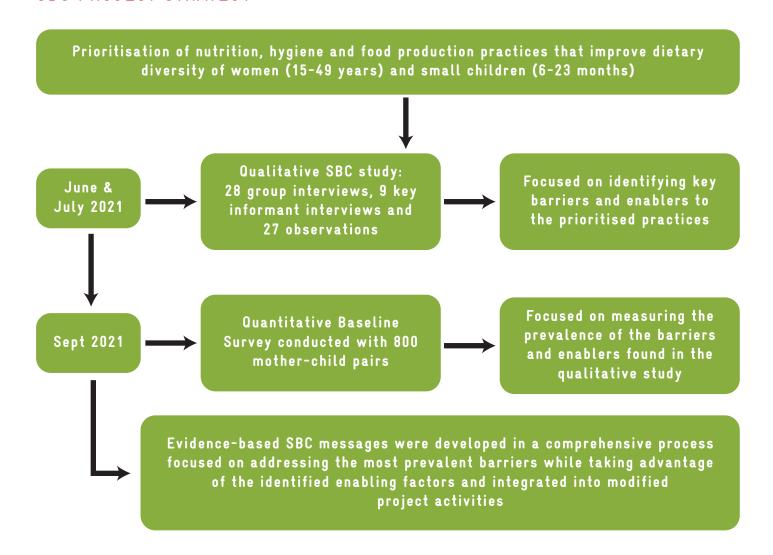
Adults learn the best when they:

- Are motivated: learning must address their real needs they must feel that they benefit.
- Are actively engaged, through sharing opinions, practicing things, finding solutions.
- Practice: adults learn the best by doing, not by hearing or seeing.
- Are appreciated: when we ask about, appreciate and promote their existing knowledge and experience.
- Feel safe to participate to express their opinion, ask questions, etc.

- Nutrition-Participatory Learning Action (N-PLA) sessions promote high-impact nutrition, hygiene and by following production practices participatory methodology. Some of the implementation paths charted are: (i) focussing on not just how, but also on what AWWs are communicating to the women they work with (ii) ensure participation of mothers-in-law because of their importance in catalysing adoption of promoted behaviour (iii) monitoring the quality of N-PLA sessions and incorporating the findings to strengthen further trainings (iv) support and enable AWWs through multiple approaches ranging from direct training to providing interactive guides such as picture cards, flipbooks and facilitation guides (v) incorporating adult learning principles and soft skills techniques in N-PLA modules to ensure effective delivery of promoted behaviours by the AWWs.
- Learning events at Community Nutrition Gardens

- (CNG) focus not only on promoting various food production practices but also on communicating the importance of dietary diversity and reflection of gender roles. CNGs can be established as "nutrition field schools", as a community space for dialogue, learning, demonstration and exchange.
- Nutrition-Sensitive Micro Planning (NSMP) is used to improve people's access to relevant entitlements. NSMP prioritises the needs of families facing malnutrition as well as developing village plans and creating demands by the community to better utilise government schemes.
- Engagement of men and other "influencers" is not just
 a separate activity it is a priority that is
 mainstreamed throughout all the activities listed
 here.
- Community and Mass Media activities reinforce what is communicated during inter-personal activities (such as N-PLA sessions), focusing on addressing barriers and ensuring motivators.

SBC PROJECT STRATEGY



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