

Critical Role of Social and Behavior Change (SBC) Across the Service Delivery Continuum

Impact and measurement of SBCC in service delivery

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Outline

- Background/Context
- Service provider ideation for SBCC intervention
- Data source
- Impact of targeting provider ideation on quality of provider interaction, counseling, and provider bias in service delivery









Service delivery context among providers

- Provider bias is high, more than half of providers do not offer some methods based on parity, marital status and age
- Interpersonal communication and counselling (IPCC) needs improvement
- Client-provider interaction (CPI) is poor
- Clinical training has not yielded much in improving provider attitude and interaction with clients









Service Provider Ideation

NURHI research showed that provider **ideation** affects quality of interaction and counseling.

To improve IPCC we used SBC to improve these ideational factors:

- provider rejection of myths and rumors
- perceived peer contraceptive attitudes and prescribing behaviors
- perceived social/religious approval for family planning
- gender-related attitudes.









NURHI implemented SBC Interventions for service delivery providers to focus on:

How to:

- counsel and communicate with clients in a non-judgmental and client-focused way
- provide information that allows clients make informed choices.









Platforms adopted for SBCC interventions

- Interactive distant learning videos
- Client-provider Dialogue/Feedback meetings
- Guidelines & Job Aids
- "Know your provider" initiative
- Whole site orientation









Data source:

- NURHI study on the effect of IPCC intervention for Providers in Zaria and Benin
- NURHI/MLE facility survey at baseline and endline in six urban cities

Both studies were funded by the Bill and Melinda Gates Foundation

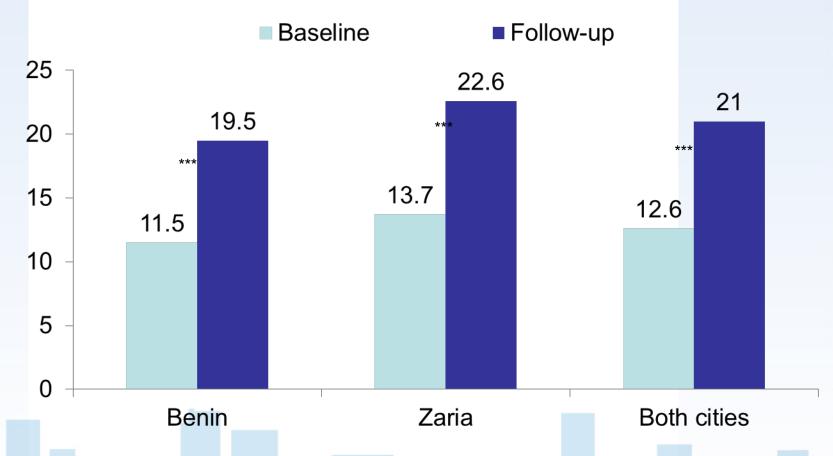








Mean index score¹ on information provided by providers on modern methods increased across cities



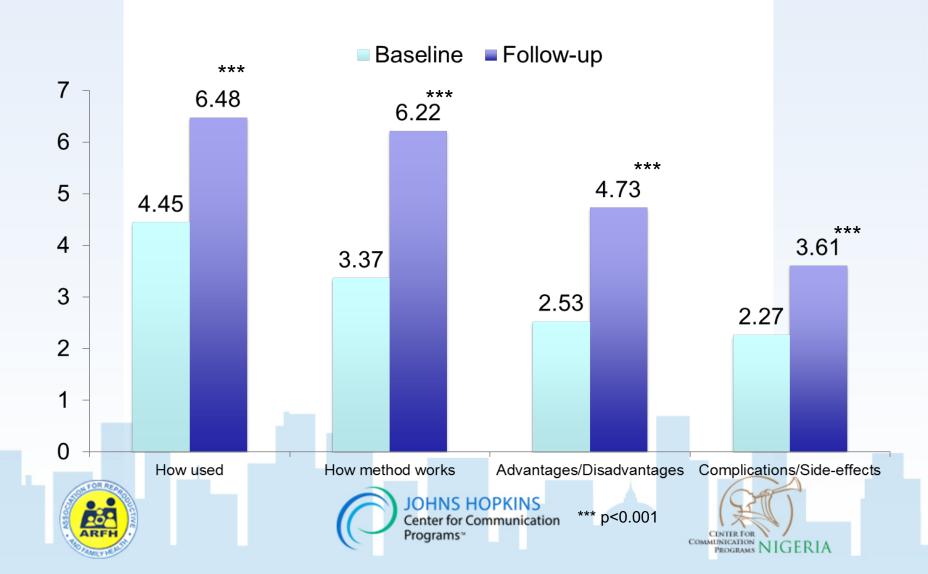






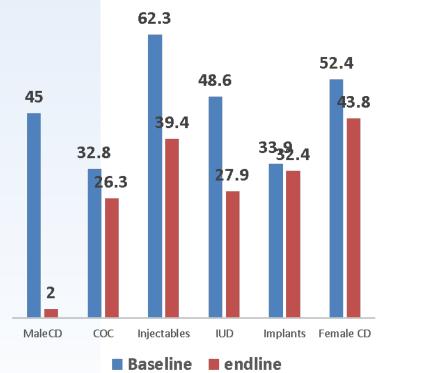


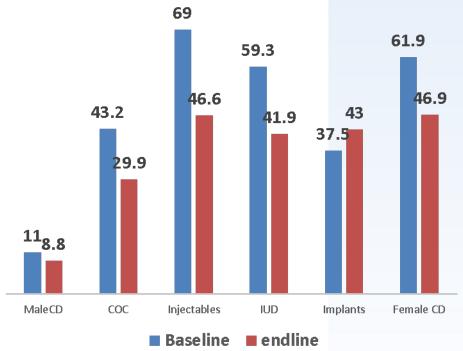
% of providers that talked about different methods, how used, and side effects increased post intervention





% of providers that restrict provision of methods based on parity and marital status (respectively) decreased at endline













Conclusion:

 Provider ideation is related to the quality of family planning services, information provision and provider bias.

 Focusing on Provider ideation using SBCC should be a critical part of effective service delivery interventions.





