

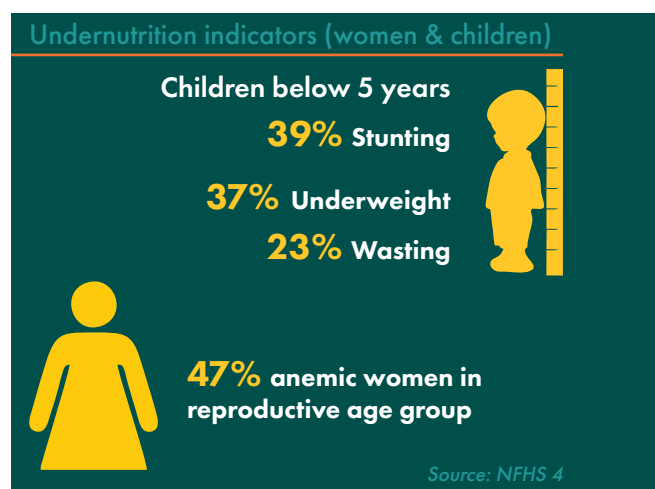


SBCC FOR EFFECTIVE NUTRITION INTERVENTIONS

How can state governments create an enabling environment for nutrition programs and interventions to succeed? Social & Behaviour Change Communication (SBCC) can be one of the answers. This practice insight captures processes, methods and tools involved in creating a data driven SBCC strategy developed in Rajasthan, adopted by both the state government and development partners with a focus on what contributed to the strategy's success and how were the hurdles crossed.

Context

NFHS-4 (2015-16) brought some positive tidings for nutrition indicators in Rajasthan but it was also apparent that the battle was far from over. The data was indicative of a heavy burden of undernutrition among children and women, spurring the government to intensify focus on reducing undernutrition with a comprehensive nutrition vision, 'Nourishing Rajasthan- Vision 2022'. An SBCC strategy to create awareness and an enabling environment for adoption of better dietary and nutrition-related practices by the target population dovetailed well with this vision. Hence, the Department of Women and Child Development (DWCD), Rajasthan led the process of developing a state specific SBCC strategy, supported by IPE Global, the implementing agency for Children's Investment Fund Foundation (CIFF) project, Rajpusht¹.



Methodology Involved in Developing the Strategy

STEP I: Understanding Ground Realities

Targeted, tailor made communication to influence behaviour are the building blocks for an SBCC strategy. The strategy developed in Rajasthan to fight undernutrition, was informed by available literature and data collected through commissioned studies.

Assessment of Nutrition Status and Practices

The nutritional status of women and their lactation behaviour are repeatedly cited among the immediate causes of undernutrition in children. Dietary practices, on the other hand is another key determinant of nutritional status of women. Therefore, Indian Institute of Health Management and Research (IIHMR) was commissioned to conduct assessment studies to ascertain the nutritional status of pregnant and lactating women (PLW) and their dietary patterns in 2017.

Figure 2: Four steps to strategy development



¹ RajPusht, funded by Children's Investment Fund Foundation (CIFF), UK, aims to improve the nutritional status of children in Rajasthan.

Optifood Study: Target Group: Pregnant and Lactating Women (PLW) & Non-pregnant, non-lactating women
Location: Baran, Barmer and Udaipur districts of Rajasthan
Agency: IIHMR

POINTS OF ENQUIRY	FINDINGS
What was the socio-economic demographic of the target population?	<ul style="list-style-type: none"> » More than 38 percent of respondents were not literate » Median age of respondents: 25 years » 68% watched television » 13% were members of Self-Help Groups (SHGs) or Community Based Organization (CBOs)
What did the Optifood study reveal about the diet of PLWs?	<ul style="list-style-type: none"> » Prevalence of hidden hunger in PLW » PLW and non-pregnant women consumed almost similar meals in size, quality and frequency » Cereals, millet, sugar, fats, and oil were the main source of energy intake » Absence of poultry and fruits in the diet in almost all the cases » Fear of abortion and difficulties caused during the delivery of the baby, guided food choices » 65% of respondents had some degree of awareness about breastfeeding
What are the nutrition gaps in dietary practices viz a viz recommendations by WHO* and ICMR**?	<ul style="list-style-type: none"> » More than 70% gap between Recommended Daily Allowance (RDA) in Fat, Calcium, Vitamin C, Vitamin A, and Zinc
How much agency do PLW have?	<ul style="list-style-type: none"> » 92% of PLW didn't have a say in household purchases and decisions to be undertaken on their health

WHO*: World Health Organisation ICMR**: Indian Council of Medical Research

Identifying behavioural determinants

The study by IIHMR revealed that nutrient-rich food, even though locally available, was absent from the diet of PLW. To understand hindrances in adapting the good practices related to consumption of nutritious food, especially during pregnancy and lactation, CIFF commissioned Sight and Life to conduct a formative study. Effectiveness of an SBCC strategy depends on determinants for a set of behaviours. The study helped to identify emotional, psychological and cultural barriers and enablers for desired behaviours.



How did the study help the Strategy?



- » Building blocks for a clear theory of change to be adopted
- » Addressing nutrient needs in pregnant women (It required INR 63/day and INR 69/day) for lactating women leading to the Cash Transfer Scheme
- » Food based recommendations (FBRs) that fed into messages
 - *Meal size, frequency and food groups for PLW and improved practices*
- » Suggestive tools for targeted behaviour change communication (BCC)
 - *Book with nutri-dense recipe for demonstrations to mothers and caregivers*
 - *Community mobilization*
 - *Multisectoral and multi-dimensional engagement*

FORMATIVE STUDY

Location: Baroni (Tonk), Kachri (Baran) and Sarkanya Pali (Sarkanya)- Rural Udaipur (Fatehnagar and Kanor)- Urban
Agency: Sight and Life

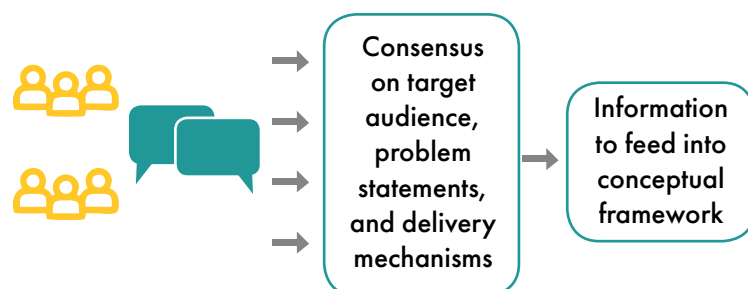
FACTORS EXAMINED	FINDINGS
Who are the primary and secondary audience to be considered?	<ul style="list-style-type: none"> » PLW, husband and mother-in-law, front line workers (FLWs) » They act as gatekeepers
What are the attributes of each of the target audience and their influence on PLW?	<ul style="list-style-type: none"> » Husband: He has become more participative in the pregnancy but is still evolving » Mother-in-Law: In many ways, still a staunch traditionalist but is becoming more open to new ideas » FLWs: Trusted by PLW as PLW believes that FLWs use contemporary practices and gives her an opportunity to learn
What are the characteristics, beliefs and attitudes of PLW?	<ul style="list-style-type: none"> » Believes in making sacrifices by putting desires of the family first » Even though a few are finding a voice, their agency is limited » Feels lack of emotional support during pregnancy and feels guilty about adding monetary burden on the family » Has fears about childbirth, gender of the child and future
What are the factors influencing diet-choices of PLW?	<ul style="list-style-type: none"> » Change in diet of PLW is mostly about exclusion of items that are traditionally considered not 'good' during pregnancy » Vegetables, fruits and milk is not consumed with required frequency » Diet choices are also affected by PW feeling nauseous, experiencing lack of appetite & craving a change of taste

STEP II: Designing the Strategy

Developing a Conceptual framework

Before developing the strategy, insights derived from literature review and formative research were deliberated upon at a discussion of core group members (involved in creating the strategy) and other stakeholders. This was fed into the conceptual framework underpinning the next steps in the process.

Consultation workshop for building consensus among stakeholders



Development of Communication Strategy

Findings from the Sight and Life Study fed into the communication strategy.

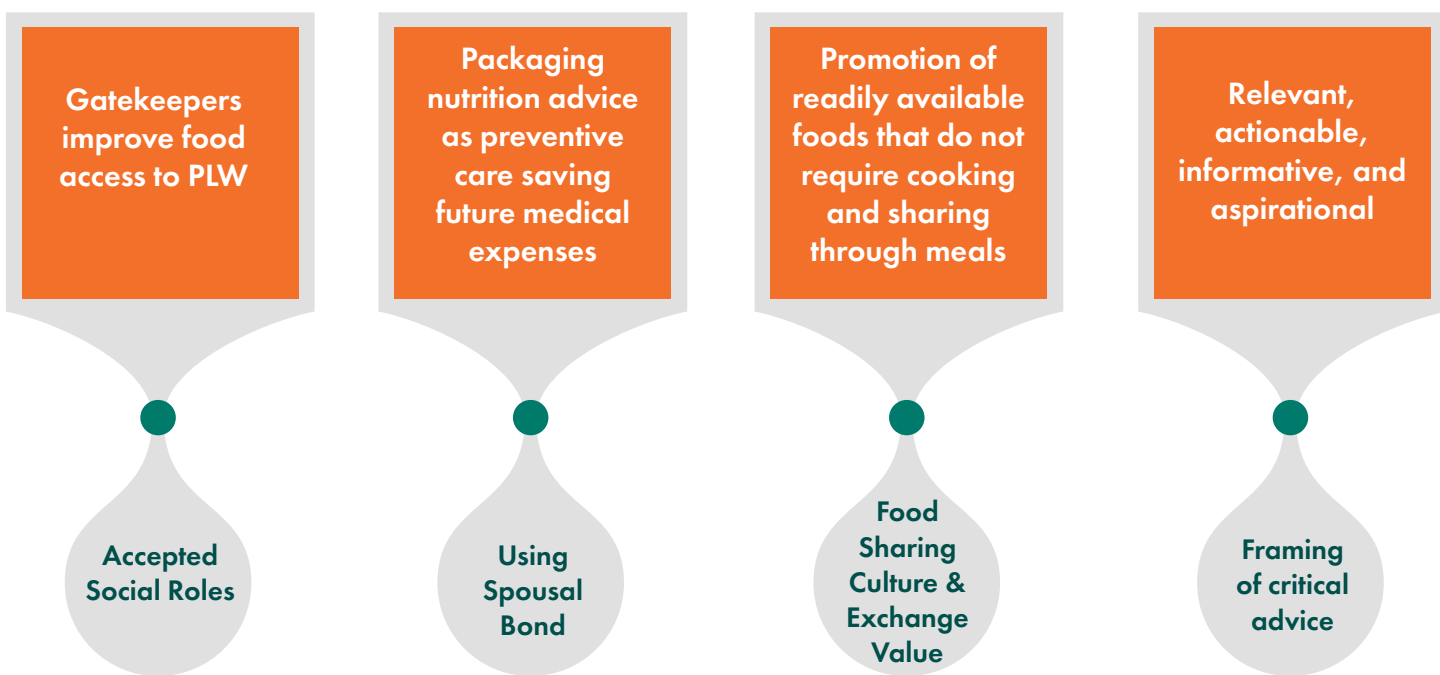
1. Audience Segmentation




An audience and influencer ecosystem based on primary target groups and secondary groups that could influence the knowledge, attitude, beliefs and practices of the primary groups were defined based on the study conducted by Site and Life.

- Primary Audience: PLW
- Secondary Audience: Husband, Mother-in-law, Frontline Workers (FLWs)

2. Defining behaviour and communication objectives

Four pillars were defined to be used as principles for the communication strategy that helped in identifying desired change in behaviour and the leverage points for each section of target audience leading to customized messages.



	BEHAVIOR OBJECTIVES	BEHAVIOR OUTCOMES
 Husband	Ensure that his wife has access to food resources during pregnancy as per dietary norms	Signs passbook when weight of his wife or child has been taken; shows material from SD card to wife; buys foods on shopping list, fills treat box.
 Wife	Acts on the dietary advice. Reminds her husband of the food she wants to eat.	Consume the foods recommended, at least two each day. Tells husband that the treat box/bag needs to be filled. Reminds husband of foods to be purchased and amount of food needed.
 MIL	Supports her son to take care of his wife, such as buying food and being present at antenatal care (ANC). Supports the daughter in law to eat nutrient rich food.	Reminds her son to purchase food and to go to ANC; grants her DIL the permission to eat foods at meals, tea, and between meals.

Source (Sight and Life Study)

3. Selecting media-mix and platforms for delivery

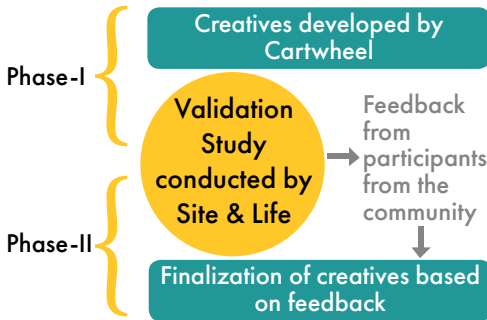
A mix of media and channels of communication were suggested based on their reach, fit with target audience and the messages, as well as the overall goal of the strategy. For instance:

- A mix of traditional media (Television, radio, newspapers, posters, advertisements on packages)
- A mix of modern communication channels and community media and channels i.e., mobile phone-based text messages and wall paintings at Anganwadis.

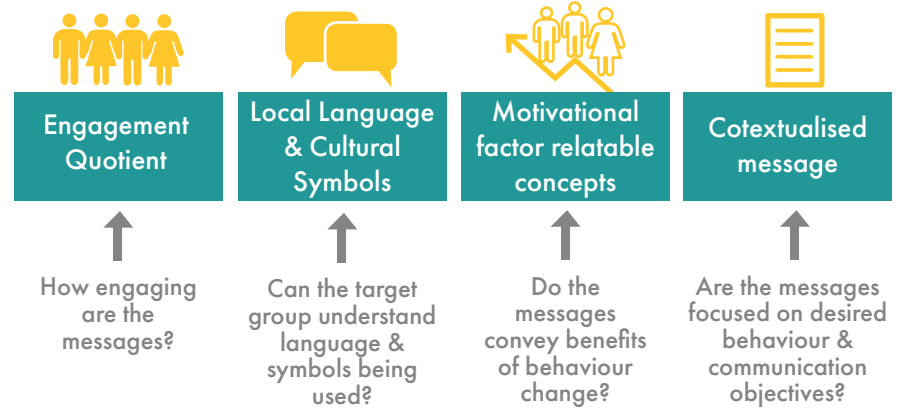
STEP III: Creating and Testing the Creatives

The creatives were developed in two phases. Cartwheel creative consultancy was commissioned to create messages based on communication hooks and develop customized materials based on local requirements for the selected communication channels. The formative studies and development of creatives went hand in hand, making it a collaborative process and providing a greater insight to the creative agency.

Development of communication materials (creatives)



Factors emphasized while briefing the agency to develop creatives



Validation of the creatives developed in the test phase was an interactive and inclusive process with the community. The study was conducted by Sight and Life to examine the acceptability, appeal, feasibility and actionability of the creative concepts, in three districts: Udaipur, Baran, and Barmer. Sight and Life, with the aid of Gram Bharati Samiti (GBS), an NGO based in Jaipur, conducted Focus Group Discussions (FGDs) with the selected participants comprising PLW, their husbands, mothers-in-law, and FLWs from the community.

How it helped the strategy?

- » Understanding acceptability and comprehension of messages in target groups
- » Defining target audience for communication in addition to primary beneficiaries
- » Improvement of message and media to create customized messages and materials
 - Creating communication hooks to nudge behaviour
 - Identification of direct communication methods for each target audience at different platforms
 - Creating a supportive atmosphere, where the community felt involved in the process

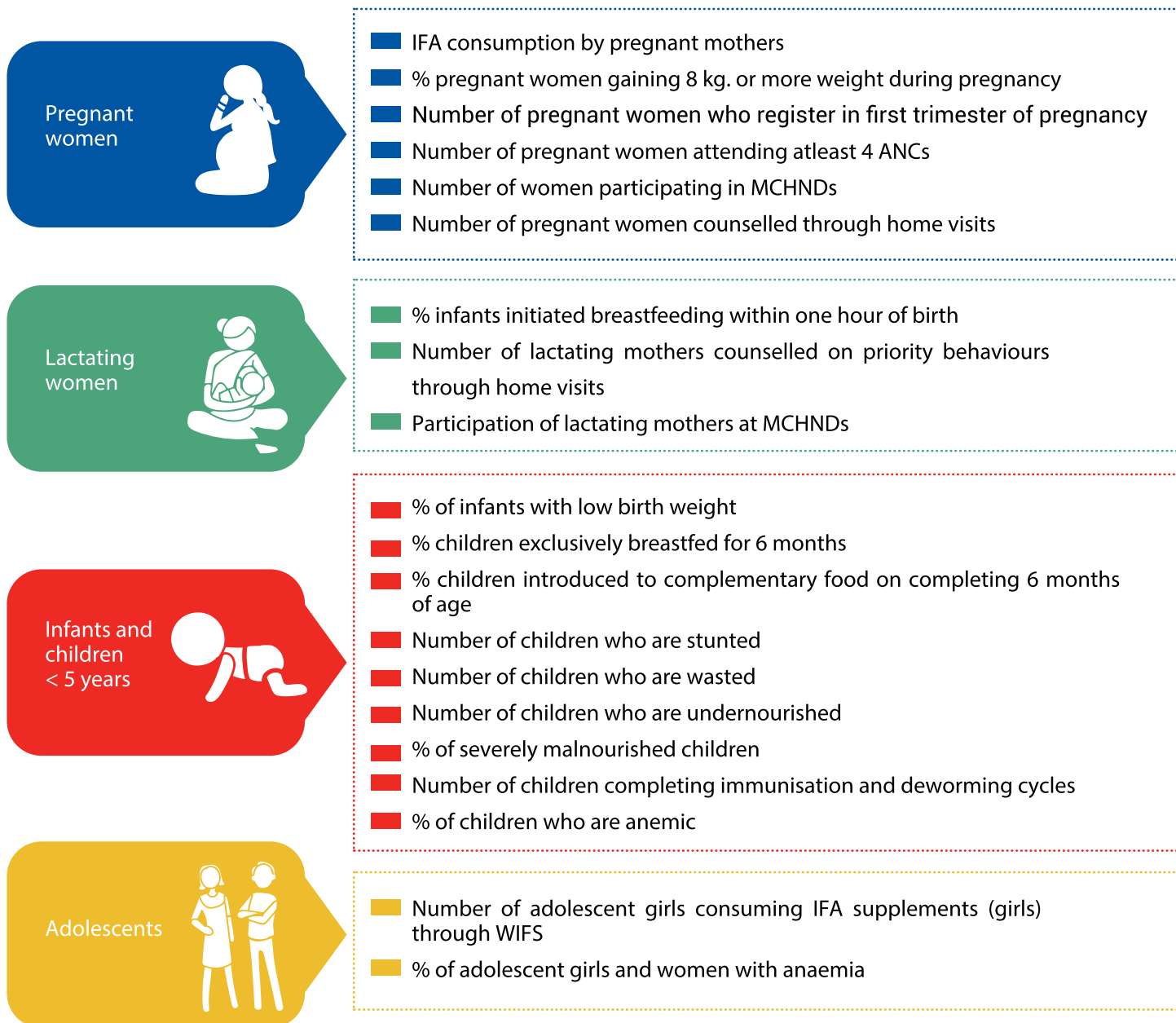


STEP IV: Monitoring and Evaluation Plan

Assessing implementation of an SBCC strategy is a significant step in ensuring its effectiveness and continued monitoring of elements that need to evolve with time. The strategy includes a robust monitoring plan based on indicators developed by DWCD drawn from framework suggested by POSHAN Abhiyaan (National Nutrition Mission) to evaluate nutrition outcomes. The chosen indicators will help to assess the impact on the nutrition outcomes for four beneficiary groups: PLW, infants and children less than five years of age and adolescents.

Category of beneficiary

Indicators to be tracked



Key Outcomes of the Process



Key Insights & Learnings from the Process

Role of Formative Study

A key factor in the success of strategy development was the formative study conducted to establish desired theory of change. It assisted in filling the gaps in available literature on underlying causes for behaviours in context of maternal nutrition leading to a data-driven, comprehensive and customized strategy. It is important to note that the research organisation and agencies being engaged for formative studies need to have well-developed tools and research designs that mitigate biases for clean data collection.

Broadening the Sphere of Influence

Approaches applied in the strategy development process helped in covering a larger sphere of actors impacting behaviours related to dietary practices in PLW. Adopting the lifecycle approach lead to engagement of both the immediate target group (PLW) and those who could be impacted in the future (married women, adolescent girls).

Using the socio-ecological model helped to take a deep dive into issues that influence decisions on food intake and feeding practices. For instance, traditional belief in giving *janam ghutti* to the newborn was found to be highly prevalent in the areas of study, proving to be a barrier in convincing mothers and caregivers in the family to refrain from the practice.

Joint Ownership

The strategy development used an inclusive and interactive process. Stakeholders such as the development partners, government officials from relevant departments (education, health and women and child development) as well as the public health workers were made an integral part of the journey through consultation workshops. This helped in creating a joint ownership, paving the way for widespread acceptance of the strategy among the intended user groups.

Underscoring the Significance of Convergence

The process adopted for strategy development stressed on intersectoral collaboration and convergence, opening up multiple touchpoints for accessing targeted groups. It focused on bringing together health, education, agriculture extension, among others along with DWCD. This led to the inclusion of influencers such as doctors and peer educators among the target audience and identification of cross-cutting programs across departments that could be leveraged for social and behaviour change for relevant nutrition outcomes.






“ It is my sincere hope that the government and our development partners will work together to bring behaviour change communication at the centre of all our efforts to improve nutrition outcomes of our state, and that this Social and Behaviour Change Strategy to Fight Undernutrition will act as a guiding light in the state in its fight against malnutrition.

- Roli Singh, Secretary, DWCD Rajasthan ”

SBCC Operational Strategy








Pregnant Women Behaviours

-  IFA consumption
-  Adequate and diverse food consumption
-  Hygiene and sanitation practices
-  Attending 4 ANC's
-  Institutional delivery



Lactating Mother Behaviours

-  Dietary Diversity
-  Colostrum feeding within one hour of birth
-  No pre-lacteal/exclusive BF
-  Timely immunisation
-  Hygiene and sanitation practices







Young Child Behaviours

-  Complementary feeding at 6 months (181 days)
-  Complete immunisation and deworming
-  Continue breastfeeding for at least two years
-  Dietary diversity
-  Hygiene and sanitation practices





Adolescent Behaviours

-  Developing life-skills to stop early marriage and early pregnancy
-  Completing quality school education; SRH
-  IFA consumption (girls)
-  Hygiene and sanitation practices



Married Couples Behaviours

-  Delayed pregnancy/ contraceptives
-  Birth spacing

Validation of Creatives

Validation of creative materials developed to aid communication was an interactive process, whereby focus group discussions (FGDs) were held with the target population. This step helped in refining the creative as per the feedback from FGDs.

Pressure Points

Rajasthan is culturally diverse, and regions have nuanced differences that influence behaviour. Therefore, developing a state level SBCC strategy that accounted for cultural differences and their impact on behaviour presented a challenge. Another pressure point was collating interventions and schemes running under different departments that could be used as platforms for accessing the beneficiaries and actioning the desired behaviour change. Building consensus on working together for a bigger cause and execution of state-wide endeavours increases in difficulty quotient in the absence of convergence. Hence, even though, convergence presented its own challenges, constant consultations and extensive communication was used to keep everyone on the same page.

Areas that need to be considered while commissioning agencies and research organisations:

- Design of the formative study was crucial as this study determines the SBCC strategy going forward
- Agency should lay emphasis on identification of behaviour traits that are reflective of the culture and traditions of local communities and social norms to provide recommendations for behaviour strategies
- Enablers for customisation and adoption of the recommended strategies by different implementing partners in the related projects needs to be factored in early on

What makes this strategy sustainable?

Government ownership

Budgetary allocations by the state government to the tune of \$3 million in the PIP for implementation



- ✓ Wider implementation
- ✓ Adaptation by development partners
- ✓ Integration in various programs
- ✓ Availability of funds

What makes this strategy replicable?

Adoption by partners in Rajasthan

Availability of tools to design the strategy such as TORs, strategy decks and proven methodologies for assessment studies.



Based on this, the state governments of Gujarat and Jharkhand have shown interest in developing state specific and SBCC strategies to fight undernutrition.

About WeCan

WeCan (We Collaborate for Nutrition) is a national level platform to foster crosslearning within the nutrition community, to collaborate and to leverage each other's experiences. WeCan facilitates scaling up of proven interventions for optimal utilization of resources and time to improve nutrition outcomes in India. Our goal is aligned with the overarching mandate of POSHAN Abhiyaan, a multisectoral nutrition flagship program of the Government of India. We work with a special focus on Maternal, Infant and Young Child Nutrition (MIYCN) and its key thematic areas. WeCan was conceptualized and established as a forum to enable cross-pollination of insights and sharing of learnings amongst different stakeholders, including governments, donors and development partners. To fulfil this mandate, we generate, collate, assimilate and disseminate knowledge from nutrition models through Practice Insights (PIs) and other products. A photo story based on this PI can be accessed at www.wecollaborate4nutrition.org.

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