Social and Behaviour Change Communication – Essential Component of Contemporary Health Care

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Introduction:

Health is created through the interplay of many determinants, which include social determinants too. These social determinants include factors such as knowledge, attitudes, norms, beliefs and cultural practices. Social and Behaviour Change Communication programs (SBCC) use the most powerful and fundamental human interaction – communication – to positively influence these social dimensions of health and well-being. SBCC is a process that motivates people to adopt and sustain healthy behaviours and lifestyles. Sustaining healthy behaviour usually requires a continuing investment in Behaviour Change Communication (BCC) as part of an overall health program.

In this context, communication goes beyond the delivery of a simple message or slogan. It encompasses the full range of means through which people, individually and collectively, can be motivated to cultivate healthy lifestyle.

What is SBCC?

Social and Behaviour Change Communication is the use of communication to change behaviours, including service utilization by positively influencing the knowledge, attitude and social norms. [1]

The shift in terminology from Behaviour Change Communication (BCC) to Social and Behaviour Change Communication (SBCC) is a recent milestone in health communication that reflects renewed emphasis on improving health outcomes through healthier individual and group behaviours as well as strengthening the social context, systems and processes that underpin health.

BCC efforts have focused on individuals' behaviour change because the most widely used theories emphasize the individual level. [2] However, a growing understanding that behaviours are grounded in a particular socio-ecological context and change usually requires support from multiple levels of influence resulted in an expansion of the approach to become SBCC.

The addition of an 'S' to BCC aims to bring the field closer to the recognition of the need for systematic, socio-ecological thinking within communication initiatives. [3]

Components of SBCC [3, 4]

SBCC encompasses three core elements:

- Communication using channels and themes that fit to target audience's needs and preferences.

- Behaviour Change through efforts to make specific health actions easier, feasible, and closer to an ideal that will protect or improve health outcomes.

- "Social Change" to achieve shifts in the definition of an issue, people's participation and engagement, policies and gender norms & relations.

Need for SBCC

- Strengthening community responses to issues

- Influencing decision-makers and family and peer networks

- Increasing demand for health services and products

- Increasing correct use of health services and products

- Influencing policy

- Capacity building for local planning and implementation of health improvement efforts

Steps in the implementation of an SBCC program

- Analyse the Situation

- Know Your Audience (primary audiences/ influencing audiences)

- Specify Communication Objectives
- Selecting Strategic Approaches
- Positioning and Strategy Outline
- Formulating Implementation Plan
- Monitoring and Evaluation
- Feedback for Further Improvement

Approaches for SBCC

Once the communication objectives have been determined, the strategic approaches will used to achieve the communication objectives. Often a communication strategy will include several approaches, especially if addressing multiple audiences across the social-ecological levels.

Often the campaigns include a combination of approaches (usually including mass media, in addition to community-based approaches) and provide multiple opportunities for exposure through a consistent theme that links program activities together. A campaign provides benefits to the individual and/or society, typically within a given time period, by means of organized communication activities.

Following is a list of some of the strategic approaches:

- Advocacy
- Community-Based Media
- Community Mobilization
- Counselling
- Distance Learning
- Information and Communication Technology (ICT)
- Interpersonal Communication (IPC)/Peer Communication
- Mass Media
- Social Mobilization
- Support Media/Mid-Media

Selection of the approach for SBCC [5]

CONSIDERATIONS	APPROPRIATE APPROACHES
Complexity of the Challenge	Face-to-face communication, Mass media Popular social media channels –Facebook, Twitter, and Whatsapp among others. Written materials (for referral and re-referral)
Sensitivity of the Challenge	Interpersonal approaches and one-on-one communication
Effectiveness of Approach to Address Challenge	Some examples-Entertainment education is well suited for motivational messages and moving social-norms, face-to-face counselling seems to help people learn about and adhere to more effective strategies to quit smoking, media campaigns were better than interpersonal interventions without media for HIV/STD prevention.
Literacy	If audience is not literate, an approach, which does not rely on the written word, will be more effective.
Desired Reach	Mass media, most internet-based interventions and many mHealth interventions have an advantage in their potential reach and can provide regional and national coverage.
Cost	Consider the cost – and cost effectiveness.
Innovation	Consider using approaches that are new / appealing/ interesting and fresh for the audience.
Youth	Some mobile-based or social-media based approaches may appeal more to young adults.

Often there is great confusion about the approach, which will suit a particular SBCC campaign. However, depending on the communication objectives and target audience, the following methods may be suitable for SBCC activities.

Scope of SBCC

Often it is required to apply various communication approaches ranging from mass communication, entertainment education, interpersonal communication, participatory development communication, advocacy and social mobilization for the programs.

Communication programs need to be responsive to peoples' wants, needs and desires. Additionally, communication programs must be geared to stimulate social change in more effective ways through careful communication research, analysis, planning, co-ordination, implementation, management, monitoring and evaluation. [4]

SBCC has proven effective in several health areas, such as increasing the use of family planning methods, preventing HIV and AIDS, non-communicable diseases, mental illnesses, drug abuse, genetic disorders, reducing the spread of malaria and other infectious diseases, improving newborn and maternal health, adolescent health and much more.

Well-planned social mobilization efforts also seek to empower communities to take control of their own situations, including accepting or rejecting interventions. Social mobilization, integrated with other communication approaches, has been a key feature in numerous communication efforts worldwide. [6-10] However we have to see the ethical issues while considering SBCC strategies and programs for any community. There is no limit to the aspect of the healthcare and the way various strategies can be used for SBCC. Many studies in the field of nutrition have described the uses of mHealth and eHealth strategies. [6, 7]

In a study by Willis E and Royne MB, it was observed that online health communities act as informal self-management programs led by peers with the same chronic disease through the exchange of health information. Online health communities provide opportunities for "health behaviour change messages" to educate and persuade regarding chronic disease self-management behaviors. [11] It is also observed that SBCC/BCC represents an integral component of malaria control efforts. [12]

In a study in the field of management of childhood diarrhoea, among the main strategic options that was suggested for relieving the bottlenecks included one option - to develop Information Education Communication/Behaviour Change Communication (IEC/BCC) plan for childhood diarrhoea management at state/district level. [13]

In a study on community-based maternal, newborn and child health services in rural areas of India, the components of the intervention (mHealth strategies), were designed to overcome the gaps in care. [14]

Mobile phone messaging is an inexpensive option to deliver educational and motivational advice about lifestyle modification. In a study by Ramchandran A et al, it was assessed whether mobile phone messaging that encouraged lifestyle change could reduce incident Type 2 diabetes in Indian Asian men with impaired glucose tolerance. [15]

These are only a few examples of use of SBCC for tackling diverse health problems. One should meticulously prepare SBCC program cycle, budget, understand the audience profile, ensure good quality material, consider the 7 Cs of communication in public health, learn to work with news media and evaluate the program after implementation. [16, 17]

However, we must remember that effective communication is only one of the many aspects that need to be look in to influence people and groups for a particular health or programmatic outcome. While it is one of the many cogs in the wheel of providing effective healthcare, it is a vital cog- one sets and keeps the aforementioned wheel in motion.

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