

# Building Better Systems for Health Equity Using Social and Behavior Change (SBC)

## Authors and Affiliations

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## INTRODUCTION

### The Opportunity

As a project, the Accelerator took on numerous research and learning activities to aid in efforts to integrate social and behavior change (SBC) approaches into health systems strengthening (HSS) programming, particularly in relation to striving for more equitable access to quality health services.

Focusing on the nexus of HSS and SBC importantly directs attention to the actions and behaviors of actors within the government, health system, and citizenry, as well as the structural barriers that impede social and health system change.

### Research and Learning

In FY 2020, funding was made available to undertake a study on the linkages between two prominent practice areas—social accountability (SA) and SBC. Côte d'Ivoire, Ghana, and Guinea were selected for virtual data collection with focus on the SA-SBC linkage including in relation to HSS and increasing equity and efficiency through Universal Health Coverage (UHC). One hundred seventy-nine stakeholders completed an online survey, and 21 key informant interviews were conducted.

### Country Engagement

Findings from the study were shared (virtually) with national-level stakeholders and sub-national level stakeholders. Additional country engagement included:

- **Applying a Behavior Change Lens to Citizen Mobilization around UHC:** The Accelerator facilitated two virtual workshops for the Togolese UHC Task Force and Civil Society Organizations. Participants applied a behavioral lens to assess engagement barriers.
- **Applying a Behavior Change Lens to Budget Advocacy and the Community Health Strategy in Guinea:** The Accelerator developed an SBC-oriented tool for citizen and civil society actors to inform budget advocacy work.

## SOCIAL ACCOUNTABILITY (AND SBC)

Increasingly, there is explicit recognition that SA is fundamentally about changing norms and behaviors and therefore, an SBC undertaking. Indeed, definitionally and conceptually, SA strives to facilitate social change and shifts in how individuals and groups (from the government and citizenry) interact with each other.

Continuing to make the SA-SBC linkage across HSS programming includes understanding system actors' community and institutional contexts while also thinking and working in the following ways:

- Take time to understand and define behavior and norms as they relate to HSS and SA goals
- Engage different actors to create space for local leadership and understanding of SBC needs
- Establish behavior change goals from the onset, incorporate a behavioral lens explicitly and systematically
- Reframe experiences, challenges, and successes in terms of the associated behaviors

## FINANCIAL PROTECTION (AND SBC)

With increasing numbers of people experiencing hardship from health spending, there is need for more nuanced recognition that health financing systems—such as financial protection programs—will benefit from integrating SBC across purchasers, providers, patients, and communities.

Applying SBC principles to financial protection programs can catalyze individual and collective changes and create more supportive implementation environments. Some key insights for doing so include:

- Define behavior and norms as they relate to HSS and financial protection goals
- Make financial protection programs easier to participate in using SBC approaches
- Institutionalize community engagement, including iterative problem-solving
- Target behaviors across all levels of the implementation ecosystem

## RECOMMENDATIONS (HSS AND SBC)

Across the HSS field broadly, integrating SBC approaches can yield important insights and inform both HSS programming and measurement. Key recommended actions include:

- **Be More Intentional:** System strengthening requires addressing the human component, including strategic intent with use of SBC approaches; too often SBC within HSS is not explicitly framed as such
- **Start with Behavior Mapping:** Behavior mapping includes identifying (i.e., mapping out) the actions and behaviors of key actors and assessing what actors are being targeted for behavior change and why
- **Work to Improve Equity:** Striving for greater representativeness is an important strategy that can be achieved by changing behaviors to adopt more inclusive processes with collaborative work between government, health care providers, health care institutions, and citizens

