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Communicating Health, Saving Lives



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Understanding risk and behaviour: a socio-ecological model

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Acknowledgment to my colleagues at CCP/Hopkins

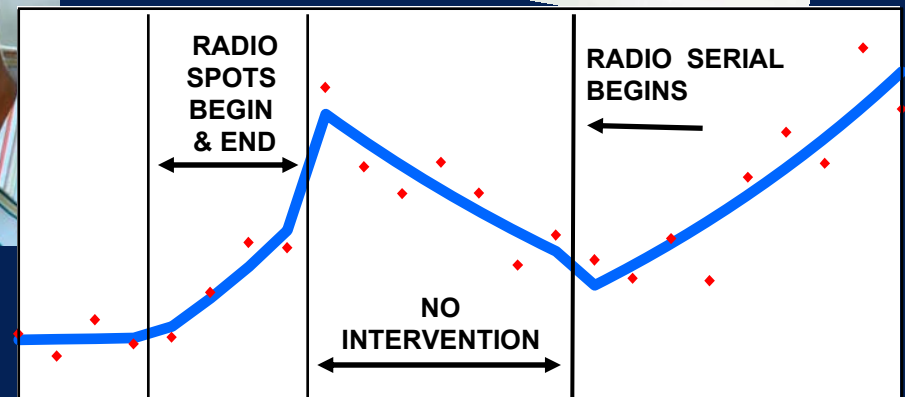
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Overview of today's presentation

- Socio-ecological model
- Implications for BCC
- Implications for M&E



Average monthly clinic visits



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Ecology and Social Ecology

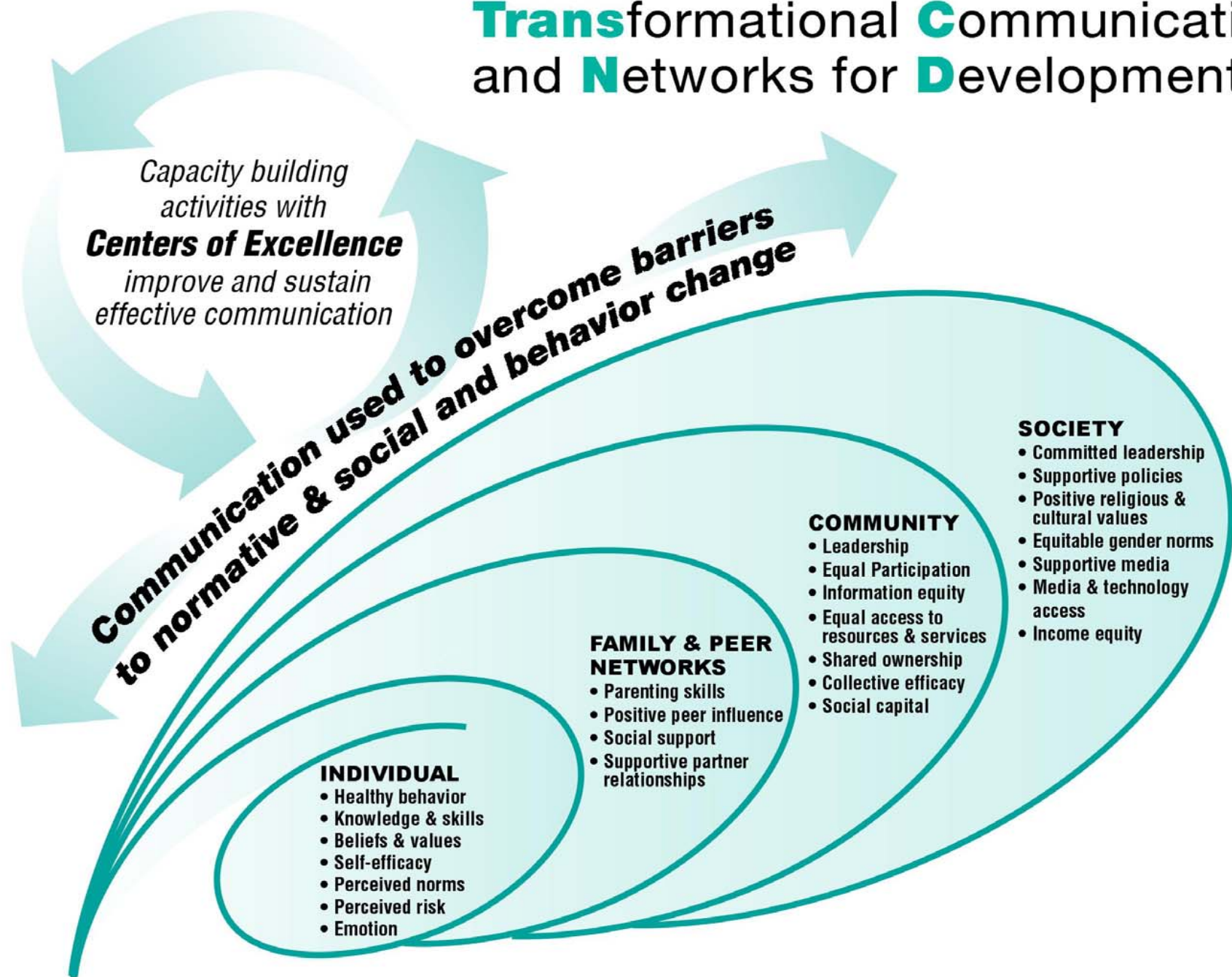
- **Ecology (derived from the biological sciences):**
 - **Describes the complex interrelationships among organisms and the environment in which they are embedded**
- **Social Ecology**
 - **The study of the influence of the social context on behavior, including institutional and cultural variables (Sallis & Owen, 2002)**



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Transformational Communication and Networks for Development





Two key features of social ecology (systems approach)

- **Embeddedness**
 - One system is nested in hierarchy of other systems at different levels of analysis
- **Emergence**
 - System at each level is greater than the sum of its parts



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Key ideas behind S-E model

- **Factors at multiple levels affect human behavior**
- **Essential to understand and address barriers and constraints to behavior change at multiple levels**
- **Unrealistic to expect individuals to change behavior if barriers at higher levels are insurmountable**



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Implications of social ecological approach for behavior change

- Interventions for planned change should address all four levels to be effective:
 - Individual
 - Social network
 - Community
 - Societal
- Communication interventions
 - Can overcome barriers at each level
 - Facilitate change





If social change supports individual change, more self-sustaining

Interaction between Individual and Social Change

		Individual Change	
		NO	YES
Social Change	NO	Maintenance of status quo	Limited health improvement
	YES	Increased potential for health improvement	Self-sustained health improvement



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Implications for Monitoring and Evaluation (M&E)

- **Much of program evaluation has focused on the individual only**
- **Rarely does a single data source measure more than one level**
 - **Example: policy level AND individual behavior**
 - **Exceptions: DHS measures individual and some community variables**



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Main challenges facing evaluators

- **Developing the right indicators**
 - To reflect appropriate levels
- **Indicators must be:**
 - Relevant to the appropriate level
 - Reliably measurable
 - Conceptually sound
 - Amenable to change



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Using the correct measurement and analytic approaches

- Allow inferences about causal links across levels of analysis
- How to make connections about change at two levels
 - Ex: individual and social change
 - How both relate to communication intervention(s)



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Difficulty of testing the effects of the drivers of the epidemic

- **Researchers can test the effects of specific interventions through controlled trials**
 - **Example: male circumcision**
- **Researchers can't “manipulate” the drivers in an experimental sense:**
 - **Example: status of women, poverty**



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...and as with any other evaluation

- **The eternal challenge:**
 - **Standardized indicators endorsed by international agencies**

versus

- **Indicators generated through participatory processes**

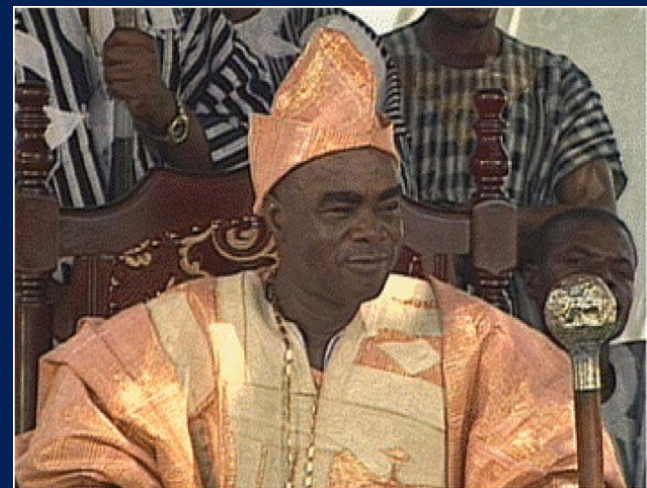


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Questions?



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