Principles and practice of effective responses
Presentation Overview

- Principles
- Behaviour and Social Change
- Change Framework
- Interventions
Principles

- Participation is not optional
  - Don’t assume you know what it is needed or how to do it
  - Analyse the problems and challenges together
  - Design, plan, implement, monitor and evaluate together
- Be honest – explain what you can and cannot do
- Agree expectations of participation
Principles 2

- Design and planning are essential for success

- Partnerships and collaboration
  - Identify which organisations have a common vision/ambition
  - Working together can often mean you achieve more
  - Solidarity is both a means to achieve a common goal and an end in itself
Principles 3

- Sensitise and train staff/team
  - Training team needs to include MSM as facilitators

- Design programmes that respond holistically to people’s needs
  - Link prevention, support, care and treatment services
Behaviour and social change

- Behaviour is influenced by, among other things
  - socio-economic status – position in society
  - the context/situation – prevalent social and religious norms
  - laws and policies – political governance
Behaviour and social change

- In order for change to happen we need to intervene at multiple levels (change theory), with multiple interventions (dose effect) and with sufficient coverage (scale)

- Interventions need to be based on a hypothesis about how the intervention will effect/produce change and, where possible, should be based on evidence
Behaviour and social change

- Evidence is informed by
  - Programme learning (from monitoring and evaluation, experience, operational research)
  - Good and emerging practice (tools, resources and case studies)
  - Theories of change
  - Quantitative and qualitative research
Change Framework

- Is useful to ensure that you have thought systematically through what you want to achieve and how you might get there.

- Provides a structure to help organise thinking about *why* you are doing what you are doing.

- Is transparent and democratic i.e. It helps everyone involved understand the rationale for what you are doing.
Change Framework

- Recognises that change needs to happen at multiple levels
- Dynamics between internal and external drivers of behaviour are explicitly addressed
- Helps identify the most appropriate intervention at the right level to achieve the overall goal
## Change framework

<table>
<thead>
<tr>
<th>Project goals</th>
<th>Change needed at different levels</th>
<th>Intervention</th>
<th>How will this intervention help make the change happen?</th>
<th>How will we know that the intervention has worked?</th>
<th>Challenges/risks anticipated in implementation</th>
<th>How will I mitigate or overcome these challenges?</th>
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<td>Social normative</td>
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<td>Service</td>
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Programme design

- Must be based on participatory situational/needs analysis triangulated with other sources of information/data
- Realistic and achievable given context
- Needs to identify potential unintended consequences of interventions and how they will be identified early
- Needs to take into account what donors are willing to fund
- Share risks
Individual level

- Increase accurate perception of risk/threat
- Increase efficacy to mitigate that risk and access commodities and services
- Decrease isolation
- Increase social capital
Individual level: approaches

- Community outreach
  - Peer – peer health promotion and condom distribution
  - Services at hotspots
- Informed service user
  - Health and treatment literacy
  - How to get the most out of services
- Support self-help groups and CBOs
  - Resource materials and training
  - Organisational development
  - Small grants
Social normative level

- Address societal factors that inhibit and limit self-determination to create an enabling environment
  - stigma and ignorance
  - discriminatory practices and behaviours
  - homophobia
  - harmful gender norms
Social normative: approaches

- Participatory reflection
  - PLA type activities (peer reflection)
- Community drama
  - Street theatre
  - Story telling (stories/accounts of transformation)
- Mass media
  - Radio spots and soaps and discussions/phone ins
  - TV spots, discussion forums
- Training of influentials/gatekeepers
  - Religious and civic leaders
Service

- Increase access of populations to commodities and services
- Ensure services are able and equipped to meet needs of populations
Procurement of essential commodities e.g. Water-based lubricants and condoms
  ◦ often based on a partnership between public providers e.g. MoH, NAC and NGOs

Effective distribution channels

Synergise services and institutionalise regular communication

Training of health care and other service providers (e.g. Police)
  ◦ Involve MSM where possible and safe
Structural

- Address laws and policies that discriminate and limit self-determination
- Promote public health and human rights
- Promote and monitor the rational allocation of resource to meet needs
Structural: approaches

- Media monitoring
- Journalist training
- Commission reports and document case studies of abuses and successful approaches
- Advocacy training to improve participation of civil society on decision-making bodies and fora
- Monitoring resource distribution
- Produce policy briefings where appropriate
Thank You