Behavior Change Communication: A Client-centered and Professionally Developed Strategy to Modify Health Status in Developing Countries

Saurabh Ram Bihari Lal Shrivastava¹ ¹, Prateek Saurabh Shrivastava² and Jegadeesh Ramasamy³

¹Assistant Professor, Department of Community Medicine, Shri Sathya Sai Medical College & Research Institute, Kancheepuram, India
²Assistant Professor, Department of Community Medicine, Shri Sathya Sai Medical College & Research Institute, Kancheepuram, India
³Professor & Head, Department of Community Medicine, Shri Sathya Sai Medical College & Research Institute, Kancheepuram, India

Abstract

The Behavior Change Communication (BCC) is a process of implementing communication strategies for the welfare of individual or communities to encourage them to adopt positive behaviors suitable to the local problem and the settings. Successful implementation of BCC essentially needs extensive research and meticulous planning based on the level of knowledge and attitude of the target population. Although BCC has shown a significant impact in heterogeneous conditions, but for its successful implementation in different health problems, the cost-effectiveness for the same should be estimated in different local settings. In addition, eventual outcome of the BCC strategy depends upon the knowledge level of the community health worker and their efficacy to share knowledge with the target population. To conclude, Behavior Change Communication is a research-based, client-centered, benefit-oriented, service-linked and professionally developed strategy with significant potential that can influence and eventually modify the bad practices in order to maintain a healthy state both of individual and the society.

Keywords: Communication; Behavior change communication; health; public health; developing countries

Introduction

Communication is described as a two-way process of exchanging ideas, feelings and information [1]. In developing countries, where number of public health concerns (viz. infectious diseases/lifestyle diseases/nutritional disorders/poor health indicators/social problems like juvenile delinquency, child labor, etc.), clearly exceeds the available resources (viz. manpower/financial resources), the public health experts have realized that communication (a cost-effective tool) plays an indispensable role in both the success and the failure of a public health strategy [1-3]. Behavior change communication (BCC) is a specific form of communication strategy which is formulated to promote positive behaviors for ensuring the welfare of individual or communities, customized to their local settings [2]. BCC is not same as routine communication as it is target specific and tailor-made for variable groups and thus assists in enabling a supportive environment which indirectly assists members of society not only to initiate but even sustain positive and desirable behavior outcomes [1,4]. In fact, BCC is an intervention which relies on the appropriate blend of education and communication for ensuring betterment in the lives of people [4].

Critical Elements of a Behavior Change Communication strategy

Prior to formulation of a BCC strategy it is essential to consider some of the key factors that determine the eventual success of the initiative, namely assessment of existing knowledge of the target group about the issue which is going to be dealt with; potential risk factors prevalent in the target group; anticipated conflict/obstacles in the way to achieve a desired change in behavior; message content and type of media employed to reach the target group; and type of resources available [1,2]. In other words, successful Behavior Change Communication essentially needs extensive research and meticulous planning based on the level of knowledge and attitude of the target population [5].

Process of Behavior Change Communication

Overall the process of BCC consists of five stages, beginning from Informed/Aware (viz. initially a person is unaware that a particular behavior may be harmful, and thus it is necessary to make people aware through various mass media channels or interpersonal communication; Concerned (viz. the message should be framed in such a way that the audience feels it applies to them and thus becomes concerned); Knowledge & skill (viz. once concerned, individuals may acquire more knowledge and develop skills by talking to peers, social workers or healthcare providers); Motivated and ready to change (viz. individuals might now seriously begin to think about the need and importance of new health message and measures) and finally Trial change of Behavior is observed. However, the long term adoption occurs, provided the results of trial are beneficial and inter-personal communication is supportive [1,5,6].

Public Health Applications

The process of BCC has been implemented in different public health problems and encouraging results have been obtained in conditions such as for improving the knowledge and perception of people. In a community-based interventional study, done among two comparable groups of antenatal women in a metropolitan city of India...
to counter the rising trends of neonatal mortality, it was observed that in the intervention group (BCC) significant increase was recorded in number of deliveries conducted by trained dais, use of sterile cord tie, keeping the cord clean, giving bath to the baby within six hours of birth, and practice of breastfeeding [4]. In addition, a considerable improvement was observed in women who were exposed to BCC during their antenatal period with regard to their knowledge of danger signals, management of breastfeeding-related problems, and awareness of skin-to-skin technique for the management of hypothermic baby [4]. Similar sort of positive results have been obtained in studies done to minimize trends of abortion [7]; to augment the use of postpartum contraception [8]; utilization of maternal and child health related welfare programs [2]; neonatal care [3]; and prevention of malnutrition [9].

**Key Issues for the Success of the Initiative**

Although BCC has shown a significant impact in heterogeneous conditions, but for its successful implementation in different health problems, the cost-effectiveness for the same (viz. direct and indirect cost/cost of face to face or group counseling/cost of mass media campaigns) should be estimated in different local settings [2,10]. In addition, a lot of the eventual outcome of the BCC strategy depends upon the knowledge level of the community health worker and their efficacy to share knowledge with the target population [11]. Furthermore, it has been recommended to use a program impact pathway for studying the overall implementation, identification of the crucial steps and evaluation of the utilization of the initiative by the target population [6]. To ensure the maximum benefit of the BCC strategy even in remote areas, mobile health technologies and telecommunication have been integrated with the process of BCC, especially in developing countries [12].

**Conclusion**

To conclude, Behavior Change Communication is a research-based, client-centered, benefit-oriented, service-linked and professionally developed strategy with significant potential that can influence and eventually modify the bad practices in order to maintain a healthy state both of individual and the society.

**References**