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Event: Debating the State of Evidence in Communication for Health

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To: USA East Coast participants in [The Communication Initiative network](#)

From: Warren Feek - Executive Director - The Communication Initiative

Event: Debating the State of the Evidence in Communication for Health - November 19th, 6-15pm at BBC Media Action in New York

Greetings Peter Burgess - I just wanted to quickly let you know about a health communication evidence focused event in New York on November 19th in case you are interested and able to attend. Details follow below. The event is being hosted by BBC Media Action. Other organizations involved in this event include USAID, UNICEF and the Journal of Health Communication.

If you wish to attend please email [Lucy Hunot at BBC Media Action](#)

The Communication Initiative was involved in the [Evidence Summit process](#); the results from which are a key element for this event. I have included below the recent edition of The Drum Beat which provides links to the Evidence Summit process and results. You can also review and filter to your specific Health Communication priorities and interests [further impact data here](#)

ARE WE THERE YET?

Debating the State of the Evidence in Communication for Health

19th November - 6-15pm to 8-30pm

Cocktail reception: 6:30-7:15pm

Panel discussion: 7:15-8:30pm

Address: 1120 Avenue of the Americas, 5th floor, New York, NY 10036-6700

If you wish to attend please email [Lucy Hunot at BBC Media Action](#)

Thanks - I look forward to the possibility of seeing you on the 19th. Best wishes and much strength for your very important work.

Warren

Warren Feek
Executive Director
[The Communication Initiative network](#)



Evidence Summit on Population-Level Behaviour



Change - The Drum Beat 676

This issue highlights the 10 overview papers from the Expert Review Teams (ERTs) that considered the 1,313 papers identified through the [Evidence Summit on Enhancing Child Survival and Development in Lower- and Middle-Income Countries \[LMICs\] by Achieving Population-Level Behavior Change](#). The papers focus on:

- [Community Action](#)
- [Families, Mothers, Caregivers](#)
- [Gender Dynamics](#)
- [Health Systems and Policy Supports](#)
- [Innovations in Science and Technology](#)
- [Stigma and Discrimination](#)
- [Mass Media Interventions](#)

Reflecting on these themes, the 10 papers highlighted in this Drum Beat issue (all peer-reviewed) are published in the [Journal of Health Communication: International Perspectives, Volume 19, Supplement 1, September 2014](#). To access links to all of the 1,313 papers identified as part of the Summit, as well as documents such as an initial priority analysis, concept note, concept paper, process note, and methodology explanation, visit [this dedicated area of The CI website](#).

Please take the [SURVEY: Knowledge and Networking Needs and Practices of People Engaged in Local, National, and International Development - 2014](#) - the more people in the network who take this survey, the better the data produced. Thank you for completing it.

From The Communication Initiative Network - where communication and media are central to social and economic development.

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1. Population-Level Behavior Change to Enhance Child Survival and Development in Low- and Middle-Income Countries

by [Elizabeth Fox and Rafael Obregon](#)

Fox and Obregón provide some overall reflections on the Summit and its purpose, as the following excerpt from their editorial illustrates: "On the basis of the extensive literature that supports such the importance of behaviors such as healthy timing and spacing of pregnancy, breastfeeding, seeking immunization, handwashing etc., we are taking it as given that obtaining population-level changes in these behaviors will have positive impacts on health. The summit focused instead on the important next step, what is the evidence for interventions designed to produce behavior change around these interventions at the individual, community and health systems/policy levels..." [Click here for a summary of the paper and link to the full document](#).

2. Evidence Acquisition and Evaluation for Evidence Summit on Population-Level Behavior Change to Enhance Child Survival and Development in Low- and Middle- Income Countries

by [Robert L. Balster, Stephanie Levy, and Emily Stammer](#)

"The lack of ideal evidence, or an ideal framework in which to evaluate evidence, should not deter the global health development and research communities from reviewing evidence regarding critical global health challenges. Doing so creates a transparent understanding of what is known, enabling better decision-making processes and more targeted and relevant research agendas while leveraging the tremendous resident expertise in the development, academic, and multilateral communities." [Click here for a summary of the paper and link to the full document](#).

3. Systematic Review of the Effectiveness of Mass Media Interventions for Child Survival in Low- and Middle-Income Countries

by [Danielle A. Naugle and Robert C. Hornik](#)

This paper summarises and evaluates evidence for the effectiveness of mass media interventions for child survival in LMICs. Amongst the findings: The potential advantages of mass media include "their reach and frequency,

control over message content and delivery, consistency, ease of translation into multiple languages, and relatively low cost per person exposed. Potential disadvantages include the difficulty of capturing audience attention in an increasingly cluttered media environment, the oft-criticized one-way flow of information, and the inability to individually tailor messages." [Click here for a summary of the paper and link to the full document.](#)

4. Understanding the Role of mHealth and Other Media Interventions for Behavior Change to Enhance Child Survival and Development in Low- and Middle-Income Countries: An Evidence Review

by Elizabeth S. Higgs, Allison B. Goldberg, Alain B. Labrique, Stephanie H. Cook, Carina Schmid, Charlotte F. Cole, and Rafael Obregon

One lesson included in this paper that emerged from the science, technology, and innovation (STI) ERT is that "[a]n integrated approach is needed to ensure greater contribution of mHealth, social/transmedia, and other media strategies to child survival priorities at multiple levels (e.g., individuals, community, and health systems)." The ERT used a structured approach to prioritise "studies that enable causal attribution of the STI intervention on behavior resulting in desired health outcomes, the behavior itself, or on knowledge attitudes and practice." [Click here for a summary of the paper and link to the full document.](#)

Want to know more about the where, when, and who of the Summit? Held in Washington, DC, United States (US), June 3-4 2013, it was hosted by the United States Agency for International Development (USAID), in collaboration with the United Nations Children's Fund (UNICEF) and the National Institute of Mental Health, Eunice Kennedy Shriver National Institute of Child Health and Human Development, the Centers for Disease Control and Prevention, The Communication Initiative, and the American Psychological Association. [Click here to read the agenda \[PDF\]](#)

5. Reducing Stigma and Discrimination to Improve Child Health and Survival in Low- and Middle-Income Countries: Promising Approaches and Implications for Future Research

by Usha S. Nayar, Anne L. Stangl, Barbara De Zaldondo, and Laura M. Brady

This review focuses on stigma related to major causes of child morbidity and mortality, including HIV and AIDS, nutrition, malaria, acute respiratory illness, diarrhoeal disease, and immunisation. Going forward, amongst the suggestions offered: evaluating the success of interventions that proactively include marginalised groups and respect their knowledge and dignity; using "the presence of stigma and discrimination, including differential neglect and exclusion, as indicators of quality in child health intervention programs"; and exploring and expanding upon "the domains of stigma that have been defined from the HIV field..." [Click here for a summary of the paper and link to the full document.](#)

6. The Role of Health Systems and Policy in Producing Behavior and Social Change to Enhance Child Survival and Development in Low- and Middle-Income Countries: An Examination of the Evidence

by Luis F. Vélez, Mary Sanitato, Donna Barry, Martin Alilio, Franklin Apfel, Gloria Coe, Amparo Garcia, Michelle Kaufman, Jonathan Klein, Vesna Kutlesic, Lisa Meadowcroft, Wendy Nilsen, Gael O'Sullivan, Stefan Peterson, Daniel Raiten, Susan Vorkoper

The members of this ERT explain that "[t]he quality of service delivery and health workforce development are the most visible aspects of the health system that affect behavior..." To cite only one finding: The ERT found that community interpersonal communication is effective in increasing the uptake of malaria prevention and treatment. For instance, a study in Burkina Faso involved training a core group of mothers and supplying community health workers (CHWs) with antimalarial drugs. The proportion of mothers seeking help from anyone in the village (primarily a CHW) for their child's malaria episode increased from 21% at baseline to 54% at the end of the study, and use of chloroquine and paracetamol for treatment rose from 25% to 46%. [Click here for a summary of the paper and link to the full document.](#)

7. An Evidence Review of Gender-Integrated Interventions in Reproductive and Maternal-Child Health

by Joan Marie Kraft, Karin Gwinn Wilkins, Guiliana J. Morales, Monique Widyono, and Susan E. Middlestadt

This paper provides a framework for understanding gender-integrated interventions and explores the extent to which these interventions address and change gender dynamics and promote behaviours relevant to child survival and development in LMICs. "Evidence was most compelling for empowerment approaches (i.e., participatory action for maternal-child health; increase educational and economic resources, and modify norms to reduce child marriage)." Though research on engaging men showed mixed effectiveness on increasing their support for women's and children's health, "[a]s a body, these studies suggest that expanding the scope of behavior change

interventions to address social and structural factors, such as gender norms and inequalities, may be beneficial for effective program intervention." [Click here for a summary of the paper and link to the full document.](#)

Want to know more about what the Summit's immediate follow-up activities are? They will include: i) the establishment of programming principles and/or technical strategies for country-led programmes in LMICs to achieve population-level behaviour change for child survival; and (ii) an evidence-to-action strategy to guide application of learning and actively address critical knowledge gaps in country- and donor-funded initiatives. Scientific journal publications will be one of the mechanisms for communicating these outcomes - and we are sharing just a few of these with you here.

8. Community Engagement to Enhance Child Survival and Early Development in Low- and Middle-Income Countries: An Evidence Review

by S. Katherine Farnsworth, Kirsten Böse, Olaoluwa Fajobi, Patricia Portela Souza, Anne Peniston, Leslie L. Davidson, Marcia Griffiths, and Stephen Hodgins

"There is evidence that programs working collaboratively or those that achieve shared leadership with the community can improve critical health behaviors, increase knowledge, improve practices, affect social norms, lower disease incidence, and reduce poor health outcomes and mortality, even in low resource settings where social conditions and practices could otherwise result in poor child health." This is one finding from an exploration of the research literature on the role of community participation in contributing to improved population-level infant and child health outcomes, mediated through improved household practices or better care-seeking behaviour. [Click here for a summary of the paper and link to the full document.](#)

9. Caregiver Behavior Change for Child Survival and Development in Low- and Middle-Income Countries: An Examination of the Evidence

by John P. Elder, Willo Pequegnat, Saifuddin Ahmed, Gretchen Bachman, Merry Bullock, Waldemar A. Carlo, Venkatraman Chandra-Mouli, Nathan A. Fox, Sara Harkness, Gillian Huebner, Joan Lombardi, Velma McBride Murry, Allisyn Moran, Maureen Norton, Jennifer Mulik, Will Parks, Helen H. Raikes, Joseph Smyser, Caroline Sugg, and Michael Sweat

"Looking primarily at the extensive literature on healthy timing and spacing of pregnancy, we see that effective interventions are focused on implementing multidisciplinary, goal-oriented programs that included the following components: (a) multiple caregiver contacts in homes, health care settings, schools, or community meeting places during the antenatal and early childhood periods...;(b) multidisciplinary caregiver teams, including case management by social workers, with trained nurses, trained paraprofessionals, and volunteers...;(c) home visits by caregivers, often over a 2-year postpartum period ...; (d) motivating caregiver behavior, sometimes referred to as mentoring...;(e) use of standardized curricula and protocols...; (f) goal-orientation interventions...; (g) employment/career planning...; (h) health, and/or fertility education...; and (i) achievable parenting goals." [Click here for a summary of the paper and link to the full document.](#)

10. Where Do We Go Next? Behavioral and Social Change for Child Survival

by Silvio Waisbord

In this editorial summarising evidence from the Summit, Waisbord asks, "What Do We Know?....The articles confirm that child survival programs need to be based on realistic, evidence-based expectations to promote behavior change....Among other findings, better knowledge about services (from immunization to counseling), positive attitudes about specific interventions (from certain nutritional foods to bednets), self-efficacy about particular actions (e.g., breastfeeding, child feeding), positive community norms about certain practices (e.g., regular visits to antenatal care centers, HIV testing for mothers and babies), and low barriers of access to service and health technologies, are more likely to lead to positive behaviors and health indicators....These insights yield two important lessons. First, certain interventions might be conducive to change if they are the right way to address specific behavioral obstacles.... Second, the articles demonstrate that no behavioral challenge in child survival should be approached with a single tactic. A combination of policy, technological, communicational, and educational tactics aimed at transforming behavioral obstacles at different levels increases the prospects of effective programming...." [Click here for a summary of the paper and link to the full document.](#)

This issue of The Drum Beat was written by Kier Olsen DeVries.

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