

FEED THE FUTURE RWANDA ORORA WIHAZE ACTIVITY

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SOCIAL AND BEHAVIOUR CHANGE COMMUNICATION PLAN (SBCC)

PHASE ONE

DISCLAIMER

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Social and Behaviour Change Communication (SBCC) to Support the SBC Strategy for Improving Animal-Source Food (ASF) Consumption

Introduction

Social and Behaviour Change Communication (SBCC) will serve as a thread uniting Orora Wihaze project activities prioritized for their potential to contribute to the project's goal of creating a profitable market for animal-source foods (ASF) that allows improved household incomes and increased consumption of ASF among families in the eight project districts. This SBC Communication Plan will develop as Orora Wihaze matures with new partnerships and efforts to improve the quantity and quality of ASF, its accessibility to families with limited resources and their desire to purchase these foods and/or use their production for their family.

Phase I Plan

This Phase I SBC Communication Plan demonstrates how Orora Wihaze expects to use communication strategically to support efforts to boost consumption of ASF while other efforts focus on ASF market development and family incomes. This plan is expected to guide activities until approximately mid-PY 3.

This Phase I plan has been developed to address many of the factors inhibiting or motivating consumption that were highlighted in the Consumption Study. During this first phase, prior to more ASF products being available to address the structural issues inhibiting ASF consumption, SBC communication programming will focus on creating a more positive environment within families and the community for ASF as a regular part of their diet. It will focus on the critical social change required, in addition to addressing specific behavior changes tied to increased consumption of those foods with the highest current use and acceptability: fish, particularly dried; eggs; and milk. As Orora Wihaze and other public and private sector efforts increase access to such foods as chicken, cultured milk and fish products like fish powder, SBC communication will keep pace. Additionally, as the project learns from Phase I about what Orora Wihaze families want and need, the SBC Communication Plan will enter a more nuanced and segmented Phase 2.

¹ The Manoff Group and CRS/Rwanda for USAID Orora Wihaze Activity, 2021. "Understanding Influences on Demand for Consumption of Animal-Source Foods: Insights from 8 Rwandan Districts." Kigali, Rwanda and Washington, DC, USA.

Objectives of Phase I SBCC Plan:

- Disseminate a call to action for change in the demand for and consumption of ASF that allows all families to benefit from a healthy diet that includes ASFs.
 - Specifically, promote ASF (identifying foods by name) as part of a healthy Rwandan diet and as value foods for everyone.
- Create an identity or brand for ASF that can carry across all activities.
 - Establish an identity or brand focusing consumer attention on procurement and consumption options for ASF.
- Address attitudinal and informational barriers that prevent caregivers from being able to include these foods in the family's diet (e.g., that these are foods for them, they have many options).
 - Promote specific ASF as they are appropriate for different audience segments.
 - Support couples dialogue about family welfare and the role of healthy diets including ASF and small investments made now feed future dreams.
- Motivate behaviors through positioning foods and modeling behaviors based on values.
 - Support caregivers to feel more confident in their ability to prepare meals for their family and children that contain ASF.
- Nudge behaviors by making positive choices easier to do and achievement of behaviors easy to appreciate.
 - Make change visible: allow families to see progress and discuss their successes and challenges.
- Build skills by modeling the skill and offering mentoring and strategic reminders.
 - Support caregivers with feasible options for offering ASF regularly in family meals to bolster their appreciation that it is within their means to offer ASF with greater frequency.

Reflecting on the specific objective for SBC communication in phase I and drawing on best practices from behavioral and social science, multiple communication tactics were selected to use in phase I and they formed the basis for the development of partnerships. Table I below lays out the potential communication tactics or ideas to meet each objective.

Table I: Potential Tactics to Achieve Phase I SBCC Plan Activities

Priority	Potential Tactic	Notes
Establish an identity or brand for the ASF.	Find a visual symbol like a star—ASF are Star foods; or a slogan that might identify with a Rwandan saying/proverb that easily relays the value proposition of ASF	Should be developed through concept testing
Promote ASF (identify foods specifically) as part of a healthy Rwandan diet	Identify branding (above) with value proposition: ex. Part of a good foundation in life; a building block of health child growth and development; a diet star / powerhouse, etc.	Include in concept testing
and as value foods.	Add ASF to a valued tradition or important passage in life: Community members start including laying hens in the	

Priority	Potential Tactic	Notes
Promote specific ASF as they are appropriate for different audience segments to support the feasible options Support caregivers to know of more and feasible options and commitment to try to	newborn baby gifting ceremony (guhemba) as a way of investing in his/her future & demonstrating value of ASF. Model the value proposition in couple dialogue: Couples discuss preparations for birth and include buying a small animal (layer hen) to improve the household's income while improving the nutrition of the mother and the child. Add the value concept and the call out of ASF on all counseling and group discussion materials—especially as they relate to stunting prevention. Tailor foods mentioned in all materials by region, emphasizing fish in regions near the lakes and milk in areas where cattle and goats are abundant. (Eliminate the feeling of impossibility for those foods out of reach/not available.) Include options for cooked foods for their convenience: brochettes; hard cooked eggs, milk, dried fish. Model choices women might have when purchasing: Ex. buy 2 eggs compared to yam; and extra X grams of dried fish—woman is surprised she can manage ASF amount. Ex. A woman knows she is pregnant, she talks to a neighbor	For mass media and within women's groups.
add ASF Support caregivers to feel	 realizes she can manage ASF within her means. Provide a material in the form of a game for groups that would call on participants to demonstrate how they would plan their food procurement to ensure that they could offer ASF to their child or in a family meal each day of the week. Model discussions and actions: youth praising a delicious 	Needs careful testing of instructions to play the game and the choices of foods
more confident in their ability to prepare ASF and their commitment to try options	sauce with fish; youth saying happy to be eating eggs; fathers taking pride seeing children and wife eating ASF. Discussion among peer groups of preparation techniques and family reaction. Taste tests or cooking demonstrations at ECD parent meetings or other community events.	
Support couple dialogue about family welfare and the role of healthy diets including ASF and the couple's commitment to try to add ASF.	Model behavior: e.g., Caregivers talking with husband to plan how to add ASF to diet of young children—they discuss trade-offs and agree to try; husband supports with money. e.g., Calm, respectful discussion (partners listen to each other) of family desires and needs—couples find a compromise and agree to try.	
	Model behavior in producer HH: e.g., Decision to keep a few eggs each week for family consumption. e.g., decision to spend small portion of money from sale of goat on buying brochettes and eggs for children. Develop system where men and women can practice these dialogues in a safe setting. Male partners learn more about household economy (household expenditures) and how this can shift (less	
Make change visible	spending on beer and more on family welfare matters) Reminder calendars, scorecards prominently displayed to show that change is possible.	Household and community level

Priority Communication Channels, Partnerships and Phase I Materials

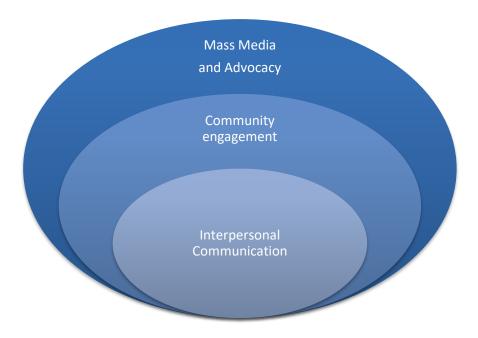
Orora Wihaze's SBC communication will be interactive, engaging, and participatory. It will be tailored to reach both specific audiences and the entire population within the Orora Wihaze districts using a variety of creative expressions. To accommodate the need for different types of messaging and different approaches to meet audience needs,

Communication Channels

Orora Wihaze will create a communication eco-system using a variety of media to reach families in the Orora Wihaze districts and to reinforce key ideas and behaviors. Figure I depicts this eco-system. The community engagement activities and interpersonal communication will be tailored to communities and individuals and to engage directly with their needs for experiential learning and motivation, while mass media will reach everyone.

- Community engagement will be reinforcing of the interpersonal communication and will
 include large community gatherings, community dialogues with key community leaders, and
 events like fairs. It will reinforce practices through a variety of known community voices,
 will offer examples of how families are accomplishing goals in the local context and show
 community mutual support for achieving goals. Mass media, while directed to particular
 audiences through its creative delivery, is available to all and will be used to shift
 perceptions of normative behavior.
- Interpersonal communication, offering two-way communication, offers the possibility for a person's doubts and questions to be resolved. Therefore, interpersonal communication is the core of the SBC communication program. This core component will include community agents and extension workers from a wide variety of programs, retailers, and in the case of IVR (interactive voice response) via mobile phones.
- Mass media includes print materials like posters and billboards, radio, television, and SMS push on mobile phones, even though they can be sent to specific personal phones. Critical to all Orora Wihaze efforts is the support of the Rwandan government and its National Development goals. Networking with the National Child Development Agency (NCDA) and providing critical advocacy support to them and their networks about the importance of improving ASF consumption among women and children and vulnerable families is an important reinforcing element to the communication eco-system like mass media.

Figure 1. SBC Communication Eco-system



Partnerships

To strengthen the market actors who can support SBC communication efforts for improved consumption of ASF and healthy Rwandan diets, Orora Wihaze will establish partnerships during Phase I that can provide the platforms for achieving a full eco-system of communication channels. The breakdown below shows how early partnerships will engage with each aspect of the SBC Communication Plan.



Community engagement

Partnership with RICH (Rwanda Interfaith Council for Health)



Mass media

Partnership with URUNANA DC Faith based radios through RICH Partnership with VIAMO



Interpersonal communication

Partnership with VIAMO
Partnership with RICH

Partnership with Govt. and NGO groups: VSLAs, Village Nutrition Schools; CHWs; Health Providers and Extension Agents

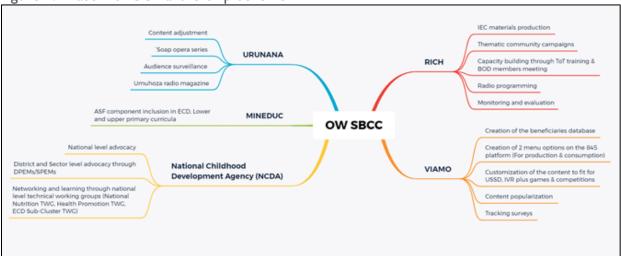


Networking/ Advocacy

Partnership with NCDA
Nutrition extension networks
DPEM committees

The scheme below (Figure 2) summarizes what each Phase I partnership offers to meet SBCC Plan goals. Of note, although these are the Orora Wihaze SBCC partnerships so far, materials and activities developed under these partnerships are planned so they can be used within a multiple Orora Wihaze activities including savings and loan groups and Village Nutrition Schools and shared with other programs. Also, the plan is for these materials to be used by future partnerships that expand Orora Wihaze communication in new ways.

Figure 2. Phase I SBCC Partnership Scheme



The description below elaborates on the scheme laid out in Figure 2, offering more detail on the type of communication activity and material that will be developed and implemented in Phase I.

Phase I Materials by Type of Channel

Interpersonal Communication

Groups: ROW will support effective interpersonal communication (IPC) through facilitated, interactive group discussions within organized groups such as VSLA, RICH organized community groups, Mother's Clubs, early childhood development (ECD) Parents' Meetings, Agriculture Groups and Village Nutrition Schools. A package of materials will support the interactive sessions encouraging people to tell their story on a variety of ASF-related topics, to solve problems related to offering ASF in family meals with daily or near-daily frequency, different options for their preparation, etc. The group work will also build agency and experience in handling intra-couple dialogue and resolving household issues.

Material	Purpose and Use
Menu planning game for parents and families	Spark discussions during community meetings and nutrition counseling for mothers/parents on ASF options available locally and build nutrition planning skills for mothers and family members to include ASF in daily diet of young child/family:
	*Encourage those raising productive animals (with eggs and milk) to consume and sell locally to other members of group.
	*Use to spark conversations on the best ways to include ASF in children's diet, challenges and learning from others who are doing it well.
	*Use to increase caregivers' self-efficacy in their ability to plan feasible ways to offer ASF in the diets of their children and family and increase # of times per week.

Material	Purpose and Use
Dialogue & Decision- making role-playing cards for husbands and wives	Spark a conversation and peer learning between men and between women—offer a time to practice dialogue and consensus. *At parenting sessions to offer modeling of good dialogue and decision-making concerning foods esp. eggs, milk, fish, and meat (per region). *During home visits by volunteers to facilitate couple dialogue about eggs, milk, fish, and meat.

Counseling: Counseling, particularly in the maternal and child health setting, often includes recommendations on diet. Current materials do not give specific advice about how to include ASF in daily diets. Carefully crafted advice and a menu of options is needed to support caregivers to find acceptable practices to try. (Trial is the first step to behavior adoption.) Part of the initial materials package will be supplemental counseling supports and a caregiver monitoring tool.

Material	Purpose and Use
Take-home reminder calendar for parents	Offered to caregivers following a group session or counseling session the calendars remind them to include ASF in the young child's daily diet and to monitor progress to try and reach the goal of including ASF every day. *Calendar to be placed on the wall where everyone can see it. *Parent to mark the day on the calendar when your baby has eaten an ASF. *Parent to discuss progress and share ideas with community volunteers during home visits or at groups gatherings.

Community Engagement

Dialogues: Gatekeepers of community opinion identified through existing structures will be engaged to include consumption of ASF among priority discussion topics with the community. As these leaders talk with community groups about animal ownership, animal husbandry, local market systems, stunting reduction activities and building for resilience, they will include information and questions about the community's ability and needs when it comes to including ASF in daily diets. They will have relevant reference materials and will add a tally on ASF use to score cards that they may be keeping on other community-wide actions. The tally, for example, could be of households serving ASF at least three times / week. Reviewing this total each month would launch discussions about what the community collectively can do to support all families to access and consume ASF. Community dialogues will also offer an opportunity to share lessons and strengthen community availability of local ASF.

Events, Market Days and Fairs: Family Health Days and other community events will offer an opportunity to showcase ways to prepare ASF and new products available to families such as packaged pieces of chicken, fish powder and goat's milk. There will be taste tests and excitement will be generated for these foods. These events will be a time to promote the Orora Wihaze ASF branding—encouraging families to make a small investment now that will have rewards later. And these events will be a time to celebrate success with prizes and testimonials.

Event example	Purpose
Urunana Community Events	These periodic events offer an opportunity to meet with mothers and family members to hear from them about the episodes and discuss in more detail about concepts brought forward in the drama. It could also be an opportunity for the participant to interact with the actors trying their abilities to model some of the behaviors or provide their interpretations of what they have seen.

Community Drama: Skits will be performed before a live audience - in a trading center or during community events. The main objective of the skit to trigger a discussion among the audience. The skits will be performed/acted in a way that action pauses at a critical / provocative /controversial / discussion-triggering moment. After the pause, the community resource person will engage the viewers in a discussion of what they have just seen: what decision they think will be made, or what they believe is the right response is, or if what they just saw is something they would do.

Mass Media

Orora Wihaze will develop radio products to model positive behaviours while addressing the determinants identified from the research. The radio spots and dramas will address norms around gender and family decision-making that are important to all aspects of having ASF in the household—producing/obtaining, and consuming. Radio will foster scenarios that tie together production, retailing at the local level and consumption in the household.

Radio soap opera	Purpose
Urunana soap-opera episodes	The soap-opera will model key Orora Wihaze behaviors as the soap opera characters express views held by our audience and demonstrate good practices in resolving issues around: * Shared decision-making through intra-partner and intra-family dialogues around asset use, family welfare and diet.
	* The concept that ASFs are for everyone—they are needed in everyone's diet and that dried fish is as good as beef, and milk and eggs also count as ASF. * Male engagement in family welfare; especially task sharing and ensuring healthy diet.

Radio PSA	Purpose
10 audio public service announcements (PSAs)	To be aired through 2 local and one national faith-based radio stations affiliated to RICH. These PSAs will serve as reminders of key behaviors and will address known resistances, for example:
	* Shared decision-making through Intra-partner and intra-family dialogue
	* ASFs as a part of a healthy Rwanda diet – they are for everybody.
	* Male engagement; especially task sharing and ensuring healthy diet

Radio magazine	Purpose
Umuhoza Radio Magazine	This magazine, a complement to the soap opera, is aired once in a week (on Saturdays) through the same 2 local radio stations used for the soap opera series: Radio Rwanda and Radio 10. For the radio magazine, Urunana DC records a 15-min. interview with an expert to talk about subjects part of recent soap opera episodes.

General Print: Print materials developed under Orora Wihaze will be developed to support interpersonal communication activities or community activities. They generally will remind people of commitments they have made or in some way will remind them of key information points. General informational print materials will be limited to promotions tied to particular products or to brief points about key behaviors tailored for a well-defined audience.

Material	Purpose
Fliers for fathers	Fliers will be given-away at pubs, restaurants, sports events, and other venues frequented by men to reminder them of a few of their responsibilities: *Talk with your wife about family matters: purchases, sales and use of ASF product/income so family can eat ASF to improve diet *Raise ASFs at home that can provide for the family: chickens, goats/cows for milk. *Bring home ASFs for wife and young children

Mobile technology: This platform will be used to reach participants directly and provide reminders on particular behaviors while availing tailored resources to them to support the adoption of positive behaviors. Mobil devices will also facilitate timely tracking of changes in behaviors through mini surveys while delivering an array of creative packages that are adapted to clearly identified audiences. Figure 3 is a detailed map of the comprehensive package that will be delivered through this platform under a partnership with Viamo.

Audio games uploaded on the 845 platform (accessible to users all the time) To be used as a reminder to perform a particular action (Nudging the behavior) They serve as a trigger to deliberation and These are scheduled and targeted to USSD/Bulk SMSes Wanji games OW to schedule prime-times and incite Messages are in text format Creation of 2 menu options: 1 for Nutrition, 2 for production (Best AH practices) An incentive to promote positive behaviors Uploaded onto the 845 platform in a Competitions 845 platform (IVR) scheduled time they can access it in their own time **VIAMO** To be scheduled by OW - targets to be Messages are in audio format To be used as reminders to perform a Used to gauge the change in terms of key particular action (nudging the behavior) These are scheduled and targeted to Robot calls Tracking surveys 4 standard questions that will be asked Messages are in audio format 1,000 people to be selected as sample

Figure 3. Scheme of Potential Mobile Technology Activities through a Partnership with Viamo

SBCC Implementation

SBC Communication implementation will be done through partnerships selected and developed purposefully. Partner entities can provide needed services within Orora Wihaze districts of operation and have the capacity to continue the service after Orora Wihaze ends. The Phase I partnerships allow access to whole-of-project coverage, influence at the national level and the ability to offer tailored services by district when needed.

Implementation will be adjusted each year within each partnership based on an assessment of progress on each of Orora Wihaze's SBCC objectives and areas of work: Advocacy and

networking; Mass media; Community engagement and Interpersonal communication. Implementation decisions will also be made on advancements within the broader SBC framework and progress made on other needed SBC elements beyond communication such as improved choice architecture, women's empowerment, and market services.

Orientations and Training

Not mentioned above within the description of communication channels and materials, but fundamental to many SBCC activities is the involvement of the Orora Wihaze Communication Advisor in planning the orientation and training of leaders of each partnership and the local cadre working directly with families. Phase I includes a heave emphasis on the development of orientation packages and a few training materials.

For example, under RICH and within other Orora Wihaze activities community agents and volunteers need orientation on the content of the communication messaging and the expected activities and use of the materials. The community agents and volunteers, for example will be responsible for encouraging parents/ families to practice the ASF-supportive behaviors through offering counseling, demonstrations, and peer group meetings. Orora Wihaze under the partnership with RICH will develop a short training manual and an "at-a-glance" brochure for the agents and volunteers on their tasks. Their training will focus on:

- I. Enhancing the agents' ability to become agents of behavior change; believing and trying for themselves the recommended behaviors; discussing and practicing how best to convince people to try them.
- 2. Improving their knowledge of ASF-related behaviors; IPC basics, such as leading group discussions and the effective use of the above mentioned SBCC material.

Monitoring SBC Communication Outcomes Tied to Improved Consumption

Critical to achieving Orora Wihaze's results tied to improved ASF consumption is successful execution of the Social and Behavior Change Strategy. The SBC Strategy makes the point that there are structural, social and individual factors that must be addressed to overcoming the considerable challenges to realizing optimal intakes of ASF for women and children. All of Orora Wihaze's interventions need to be working successfully together to demonstrate improvement in the Activity's nutrition results:

- 1. Increased frequency of use of ASF in children's (6-23mo) diets and an increase in the prevalence of children 6-23 months meeting the minimum recommendation for diversity: DHS indicator MDD (disaggregate specifically ASF)
- 2. Increased frequency of ASF in diets of pregnant and lactating women and an increase in the prevalence of these women meeting the minimum recommendation for diet diversity: DHS indicator MDD-W (disaggregate specifically ASF)

3. Increased percentage of children reaching the recommendation for a Minimum Acceptable Diet (MAD). Note: this indicator is influenced by far more than just use of ASF consumption, however ASF consumption is often the limiting factor in the number of children able to reach the threshold.

SBC Communications Outcomes

While SBC Communications alone cannot overcome the challenges that families face as they try to improve consumption, communication support should underpin all Orora Wihaze actions where there is an interface with individuals and families in the Orora Wihaze districts. Communication obviously cannot ensure that ASF products will be available and accessible/affordable to families that need them, but it can ensure that they know where to find products, they know "best buys", they know how best to prepare ASF with other family foods and they feel confident in asking for these foods.

Looking at the barriers to overcome to reach our results (Figure 4) little can be done by communication to surmount the first hurdle, but the latter two, which include changes in social norms, expectations and individual perceptions and agency required strong SBC Communication support.



Figure 4. Factors Influencing the Consumption of ASF in Orora Wihaze Districts

Monitoring the contribution that the communication activities provide will begin in Phase I. The SBCC Plan calls for continuous monitoring and adaptation of materials and the execution of activities. As described in the Phase I Plan the partnerships have been carefully selected and developed to offer Orora Wihaze a strategic approach to communication to ensure full coverage and the ability to use a wide variety of communication channels and tactics. Therefore, periodically the SBCC Plan will need to be assess holistically for it ability to address the major challenges of desirability and caregivers' agency to change routine behaviors. These are few of the changes to watch.

Desirability

Have more women taken up/engaged in small business related to ASF?

- Do caregivers believe that ASFs are important for their/their children's diet on a regular basis (multiple times a week)?
- Do caregivers list ASFs among "best food buys"?
- Are caregivers asking for ASF from vendors?

Agency

- Is there a heightened sense of agency among caregivers either for making decisions about foods to procure or for asking their partners for money to procure foods?
- Are more women taking ownership and decisions concerning some of the family's animals including selling/use decisions?
- Do men and/or women report increased discussions or joint decision-making regarding family assets, especially those related to animals and ASF procurement?
- Are caregivers able to articulate ASFs that are options for them, even when family resources are low?
- Have caregivers tried to add an ASF to the family diet and/or the diet of their young child in the last week?
- Do caregivers articulate feeling more confident/feeling progress in how they use ASF in family diets?

Each of the communication partnerships plays a role in supporting the elements that must come together to realize the outcome of improved ASF consumption. And each partnership on its own through carefully selected activities supports the objectives of the SBCC Phase I Plan. Under the Market Systems Development approach each partnership is monitored and evaluated separately. As these actions roll-out during Phase I, initially there are some key process indicators to watch for in the early implementation stages depending by audience:

Caregivers:

- Are aware of program/campaign.
- Have participated in at least one activity where ASF was promoted—listened to Urunana drama, been to an event, part of a group, heard about ASF in counselling.
- Can articulate different ways to include ASF in their diet.
- Believe that some ASF are value foods for their family
- Have spoken with their partner:
 - -- about raising an animal that can provide the family with ASF and products to sell.
 - -- to use ASF the family produces for family consumption.
 - -- about having the resources to buy ASF more often for the family.
- Have tried to include at least one ASF in the family diet or in the meals of their children that they learned about from a program activity.

Fathers:

- Are aware of program/campaign.
- Have heard about partner discussing family matters and making decisions together.
- Believe that joint decision-making benefits family welfare.

- Can describe a time when he engaged his partner in a discussion and decision about the use of family assets for family welfare.
- Has allowed own production to be used for/offered money for/directly purchased ASF for the family/child

Community Agents/ Extension Agents:

- Are aware of program/campaign.
- Can articulate their role as change agents.
- Can relate stories about their own experience with ASF in family meals.
- Can articulate various ways families can incorporate ASF into their family diet and into the meals of their youngest children.
- Encourage partner dialogue about family welfare and especially resources for family foods.

Community Leaders:

- Are aware of the program/campaign.
- Have included discussion of serving ASF in family meals at meetings and supported others in doing the same.
- Encourage couples to practice joint decision-making on family matters.

ASF Vendors:

- Are aware of the program/campaign.
- Have modified at least one practice to include a new ASF food not previously sold or packaging for convenience of consumer.

District Officials:

- Are aware of the program/campaign.
- Have incorporated actions into workplans and budget.
- Have ensured that materials and guidance promoting ASF options for families are available and that agents are trained and confident in promoting ASF.
- Promote/support special events such as fairs to promote ASF products.