

RBM SBCC WG 2018 Annual Meeting Report



Background

The Social and Behavior Change Communication Working Group (SBCC WG), consistent with its Terms of Reference, aims to empower partners at the country level to develop, implement, and evaluate effective social and behavior change communication activities to ensure the proper use of treatment and prevention interventions.

The SBCC WG meets annually to share experiences and best practices, take part in skills-building, and identify priority activities for the coming year. The 5th Annual Meeting of the SBCC WG was held at the Radisson Blu Hotel in Lusaka, Zambia from September 25-27, and included plenary sessions, skills-building sessions, poster presentations, and a competition. This face-to-face forum is an important opportunity for SBCC professionals to speak about emerging issues, share common challenges, and highlight successes among their peers.

Top Five Meeting Highlights

- 1- The objectives of the 2018 meeting were to:
 - Identify priority activities for the working group to address the needs of the malaria SBCC communities in 2019;
 - Share experiences, network with colleagues, and learn from one another; and
 - Build skills in SBCC.
- 2- Participants numbered over 100, representing more than 22 countries.
- 3- The working group decided on two 2019 priority activities:
 - An optional question module on malaria SBCC for the Malaria Indicator Survey (MIS); and
 - A package of tools, resources, and guides to support the malaria SBCC aspects of community health worker activities.
- 4- The working group structure was modified to discontinue topic-based task forces in favor of activity-based teams to address the two priorities noted above.

- 5- An important theme of the meeting was engagement with other structures within the RBM Partnership to End Malaria with a plenary presentation from the RBM Secretariat. The Steering Committee retreat featured presentations from members of the Case Management Working Group, the Malaria in Pregnancy Working Group, and the Strategic Communications Partner Committee, and an analysis of opportunities for collaboration.



Day One: Setting the Stage and Identifying Priorities

September 25, 2018

Welcome Remarks

- Jabin Mulwanda, Permanent Secretary of Health Services from the Zambia Ministry of Public Health
- Paul Psychas, PMI Resident Advisor to USAID Zambia
- Daniso Mbewe, Sub-Regional Coordination Officer - East and Southern Africa, RBM Partnership to End Malaria

The meeting was opened with introductory remarks from our speakers and a powerful message from our guest of honor, Dr. Jabin Mulwanda, Permanent Secretary of Health Services from the Zambia Ministry of Public Health. The Permanent Secretary thanked the audience for their dedication to malaria SBCC, noting their participation is crucial to winning the war against malaria. He acknowledged that, as the field moves from control to elimination, malaria specialists will need to push themselves to think differently and be more innovative. Opportunities for knowledge and experience sharing, such as the SBCC WG Annual Meeting, are key to developing the strategies that will escalate their collective efforts and impact.

“Ending malaria will require a lot of hard work on the ground, but also a lot of change in our homes... That’s why we need all of you in reaching the next mile across malaria.”
- Dr. Jabin Mulwanda

Paul Psychas, PMI Resident Advisor to USAID Zambia, and Daniso Mbewe, RBM Partnership to End Malaria also welcomed the group. Mr. Psychas encouraged participants to stay focused on evidence-based, high-quality interventions for at-risk communities. He reflected on the national malaria slogan, “Malaria Ends with Me,” which he sees as evidence of the power of SBCC and advocacy, as well as a personal rallying cry.

Mr. Mbewe introduced RBM’s new vision, mission and targets, as well as a video welcome message from Admasu Kasteberhan, CEO to the RBM Partnership to End Malaria. Mr. Kasteberhan heralded Zambia as a showcase of political leadership, financial commitment, and regional cooperation in the collective efforts to end malaria, and hoped that the discussions held during the meeting would identify best practices that could be scaled up.

“The Zero Malaria Starts with Me campaign has brought incredible success. It straddles between advocacy and reaching out to political and civil-society leaders. At its core, it has the power of igniting grassroots movements, empowering people and individuals to take more responsibility in the fight against malaria.” -Admasu Kasteberhan

Remarks from Co-chairs

- Anna McCartney-Melstad, Johns Hopkins Center for Communication Programs
- Guda Alemayehu, USAID Ethiopia

Anna McCartney-Melstad, co-chair of the SBCC WG, opened the event by focusing on the power in the working group’s growing participation, stating, “There are over 130 countries, representing 22 countries

and 4 continents. Thank you for making the trip.” This engagement is critical to achieving the goals of the meeting: sharing experiences and lessons learned, creating and strengthening networks within the many stakeholders in the fight against malaria, and building and reinforcing key skills in SBCC. These goals were set based on comments submitted in the previous year’s evaluation. Ms. McCartney-Melstad then introduced the Secretariat, Francophone Ambassadors, and Steering Committee members. She noted that three Steering Committee seats will be up for re-election and encouraged participants to consider running. Guda Alemayehu, co-chair of the SBCC WG, introduced the meeting attendants by country.

Brief Overview of SBC

- Anna McCartney-Melstad, Johns Hopkins Center for Communication Programs

“This field is dynamic and ever-progressing. We’ve gone through a transformation.”
-Anna McCartney-Melstad

Anna McCartney-Melstad presented an overview of successful practices and new trends in the field of strategic communication and social and behavior change. Over the years, our discipline has learned that successful programs use behavioral theory and formative research, harmonize messages among partners, change social norms to make the desired behavior the expected or default behavior, and take advantage of multiple channels and strategies. Much of this learning is reflected in the SBCC WG’s *Strategic Framework for Malaria SBCC* and the *Malaria SBCC Indicator Reference Guide* (links in text box below). As far as new trends, Ms. McCartney-Melstad also described how the field has evolved from Information, Education, and Communication (IEC) to SBCC, to the most current change: shifting from “social and behavior change communication” to “social and behavior change” to accommodate the full range of channels or approaches – including communication as well as non-communication-based approaches – that are used to understand and facilitate change in behaviors, social norms, and environmental factors.

Strategic Framework for Malaria Social and Behaviour Change Communication 2018-2030

[English](#) | [French](#) | [Portuguese](#)

Malaria Social and Behavior Change Communication Indicator Reference Guide: Second Edition

[English](#) | [French](#)

PMI SBC Updates and Priorities

- Andrew Tompsett, USAID/PMI SBCC Team

Andrew Tompsett took the stage to discuss PMI’s SBCC priorities across its technical programs. Priorities include: strategic design, formative research, monitoring, quality assurance, coordination, and service provider behaviors. As a community, we face a number of program design, implementation, and evaluation challenges that create barriers to effective social and behavior change. Mr. Tompsett shared several suggestions that the SBCC WG and its members could use to overcome these challenges: 1) conducting consistent formative research (e.g., Malaria Behavior Survey); 2) shifting messaging from behavioral adoption to behavioral maintenance; 3) promoting and utilizing the ITN use: access indicator; 4) expanding output monitoring to capture intermediate outcomes; 5) utilizing a SBC quality assurance

checklist; 6) strengthening coordination with other RBM WGs and NMCPs; and 7) creating a section in the Indicator Reference Guide for service provider behaviors.

Steering Committee Report: Opportunities for Coordination and Collaboration with Other Groups

- Guda Alemayehu, USAID Ethiopia
- Debora Freitas-Lopez, Chemonics International
- Mathias Pollock, Population Services International (PSI)

Each year, the SBCC WG Steering Committee spends the day preceding the Annual Meeting in a leadership retreat. This year, Steering Committee discussions focused on how to best advocate for SBCC, how to work together with other RBM groups, and how to leverage the SBCC WG’s strengths, weaknesses, opportunities, and threats (SWOT analysis). Co-chair Guda Alemayehu reported on these discussions in plenary at the Annual Meeting. The Steering Committee retreat was also attended (either virtually or in person) by representatives from the Malaria in Pregnancy WG (MiPWG), Country/Regional Support Partner Committee (CRSPC), Strategic Communications Partner Committee (SCPC), Case Management Working Group (CMWG), and the Demographic and Health Surveys (DHS) Program.

Steering Committee members Debora Freitas-Lopez and Mathias Pollock presented the results of the SWOT analysis, noting that RBM’s SBCC WG’s deliverables were among its most successful outputs, and recommending the development of similar outputs in the future. The Steering Committee brainstormed several activities for the WG to consider for the upcoming year, including a guidance document or tool to support the malaria SBCC aspects of community health worker activities, an SBCC module for the Malaria Indicator Survey (MIS), and a consultant contact list. Ms. Freitas-Lopez and Mr. Pollock asked the WG to divide into small groups and brainstorm more options for concrete activities with deliverables. Groups submitted suggestions via the Poll Everywhere mobile/online platform, which were consolidated by the Steering Committee and voted on by the working group on the last day of the meeting.

“We found that manageable, time-bound goals were at the heart of our most successful projects as a working group.” -Mathias Pollock

RBM SBCC WG SWOT Analysis

<p>Strengths: Growing attendance, leadership, SBCC is getting prioritized</p>	<p>Opportunities: Identified partnerships with other WGs, growing willingness by private sector and new and non-traditional country donors, increased willingness by local government to finance SBCC, etc.</p>
<p>Weaknesses: Challenges in quantifying SBCC, need to continue and coordinate advocacy, need stronger linkages between evidence and practices, resource constraints, time constraints, communicating across government platforms (NMCP, Francophone countries, other regions, etc.)</p>	<p>Threats: Changing enabling environment, technology and context (e.g., next generation nets, etc.), navigating balance between global framework and local context (how do national/global strategies translate?), competing funding priorities</p>

Day Two: Skills-building Sessions

September 26, 2018

On the second day of the meeting, SBCC WG participants were offered the opportunity to attend two of four skills-building sessions:

Introduction to Real Time Monitoring (RtM) of Malaria SBCC Programs

The Introduction to Real-Time Monitoring (RtM) skills-building session focused on the key concepts, as well as considerations for using RtM data to inform decision-making. In addition to presenting key concepts, the session facilitators shared case studies, interactive polls, and hands-on applications to demonstrate how to use and interpret RtM data. When developing an RtM tool, participants were encouraged to consider the utility of various indicators (e.g., input, process, output, and outcome), monitoring frequency, budget, staff capacity and sustainability, platforms, and available devices. Recommended platforms include Google Sheets/Survey, ODK, Magpi, Kobo Collect, Survey CTO, Comm Care, DHIS 2, and PowerBI.

What is HCD and How Can You Use It in SBC Programs

In this workshop, facilitators used a case study from Côte d'Ivoire to provide an overview of the HCD process phases (i.e., intent, audience exploration, prioritizing segments, ideating and concept development, prototyping and testing, testing for feasibility and scalability). They also reviewed essential elements to the HCD process such as developing empathy, the involvement of an interdisciplinary team, and rapid prototyping and testing. Participants were encouraged to follow key HCD principles, including having a beginner's mind, tolerating ambiguity, not judging, questioning assumptions, and embracing failure. They then applied these principles to a brief prototyping challenge.

ITN Access and Use: Mapping Net Culture in sub-Saharan Africa

This skills-building session focused on the calculation and use of the use:access ratio (i.e., the proportion of the population that slept under an ITN the night before the survey, compared to the proportion of the population with access to an ITN within their household). This ratio is determined by using MIS and DHS datasets and can be overlaid with sub-national climate, rainfall, and parasitemia data using ArcGIS software. It is especially important because it demonstrates the behavioral gap for net use, accounting for issues of ITN availability. During the session, facilitators trained participants in understanding this indicator and how it differs from other ITN coverage and access indicators. Finally, participants practiced reviewing their country's ITN use:access indicators and maps, discussed their observations, and the implications of the data for malaria programming.

Advocacy Challenges, Innovations, and Tools: A Look at Strategies Used Across the Continent

Advocacy can be used to fight malaria by building cross-sector partnerships, political support and visibility, enabling legal frameworks, funding malaria interventions, and engaging communities. Facilitators began this skills-building session with a review of several definitions of advocacy (e.g., scope, objectives, and audiences). Next, they reviewed the ways that different approaches have achieved impact across the continent, including United Against Malaria and the Zero Malaria Starts With Me campaign. The remainder of the workshop was spent using publicly-available templates and tools to focus on private sector engagement, building an action plan, and developing a monitoring and evaluation framework. Participants were encouraged to develop an evidence-based investment case for their cause, convene a stakeholder workshop, and launch a private sector coalition.

Day Three: Defining Activities for 2019

September 27, 2018

Consultation on Task Force Functionality and Utility

- Shelby Cash, USAID/PMI SBCC Team
- Anna McCartney-Melstad, Center for Communication Programs

Shelby Cash, Steering Committee Member, presented the findings of interviews with task force co-chairs and of a quantitative survey with the SBCC WG, which were conducted to assess the quality and usefulness of member engagement with the task forces. Results showed that the members thought the task forces had the potential to serve as a positive platform to raise the profile of the technical areas and exchange experiences and lessons learned, but in some cases engagement was minimal. Task forces could benefit from more engagement with other RBM Working Groups, reminder emails or WhatsApp messages, and advance notice of slides and discussion items. Members also hoped to develop skills in design, routine data collection and use, monitoring and evaluation, and service delivery through participation in the task force. While the interest for the groups are there, limited participation and availability of task force members ultimately is a major barrier to achieving their objectives.

Based on this feedback, and on the Steering Committee retreat deliberations, Ms. McCartney-Melstad suggested that task forces be reorganized to focus on deliverables that will help the malaria SBCC community and WG members in their daily work. Working group members voted on activities and deliverables for 2019; the two receiving the most votes were: a package of tools and resources on SBCC for CHWs, and a SBCC question module for the MIS. Participants broke out into small groups to discuss the direction of these two activities, followed by share-back in plenary.

SBCC Tools for CHWs

The two groups (one anglophone, one francophone) that focused on the SBCC package for CHWs decided to begin with a literature and desk review. The groups first discussed what SBCC activities and materials they know of that already exist in various countries. They profiled two types of CHWs: those who only do SBCC and those who integrate clinical/case management services with SBCC messages. The groups began to compile a list of resources that currently exist and practices that have worked, as well what is needed, and to a lesser extent, what is missing. Participants suggested that, moving forward, they should organize a coordination committee to consolidate and review existing assessments and materials and obtain feedback from SBCC WG members. Along with the literature and desk review, the francophone team listed and prioritized additional CHW needs, which included SBCC activity packet, a reporting tool, and a training tool.

SBCC Module for the MIS

The group started by sharing background information on this request that originated from colleagues within the DHS program. DHS and MIS organizers often receive requests for SBCC questions related to malaria, but there is little guidance on which to base decisions to ensure data utility and comparability over time. The working group will take on the development of a standardized set of malaria SBCC questions to put forward as an optional module for the MIS. The group then began to review a set of proposed questions that had been compiled by the Monitoring and Evaluation Task Force co-chair,

providing feedback on each. These questions measured indicators such as, the proportion of women who believe they are at risk for developing malaria, proportion of women who believe the consequences of malaria are serious, and the proportion of women who believe the recommended practice will reduce their risk. The group suggested conducting secondary analyses of existing data from prior malaria behavioral surveys, the DHS, and the MIS to help evaluate the best candidate questions; developing a draft guidance document; collecting feedback on the document and adapting accordingly; and finalizing the optional SBCC MIS module.

Next Steps

- Steering Committee members will launch a call for volunteers to participate on technical teams to carry forward the two priority activities for 2019
 - Amina Fakir-Knipiler and Debora Frietas-Lopez for the CHW package
 - Angela Acosta for the optional SBCC MIS module
- Hold elections for three open Steering Committee positions
- The Steering Committee will seek opportunities to engage with RBM leadership, other working groups, and the partner committees for coordination and collaboration
- All WG members are encouraged to join and post on Springboard for SBC as the primary engagement platform for members during the year
- Quarterly general calls will continue and the Secretariat will seek options to improve simultaneous interpretation into French
The Secretariat will make a larger effort to translate communications and resources to French
- The Secretariat will continue to build the WG's presence on Springboard for SBC and page on the RBM Partnership website
- The Secretariat will summarize evaluation feedback from the meeting participants and present it to the Steering Committee to inform planning for the 2019 meeting

Member Engagement

There are three channels for SBCC WG members to connect with each other and stay abreast of updates:

- [Subscribe](#) to the SBCC WG listserv
- Become a member of the group's page on Springboard: <https://springboardforsbc.org/topics/7020/home>
- View the RBM SBCC WG website: <https://endmalaria.org/our-work/working-groups/social-and-behaviour-change-communication>



2018 Steering Committee

Anna McCartney-Melstad, Co-chair
Guda Alemayehu, Co-chair
Angela Acosta
Oulèye Beye
Boubacar Bocoum
Shelby Cash
Kwame Dzudzorli Gakpey
Amina Fakir-Knipiler
Debora Freitas Lopez
Wani Lahai
Mathias Pollock
Andrew Tompsett

Center for Communication Programs, USA
U.S. Agency for International Development, Ethiopia
Center for Communication Programs, USA
PNLP, Senegal
Center for Communication Programs, Mali
U.S. President's Malaria Initiative, USA
Ghana Health Service, NMCP, Ghana
Sanofi, France
Chemonics International, USA
NMCP, Sierra Leone
Population Services International, USA
U.S. President's Malaria Initiative, USA

Participant List

Name	Organization	Country
Adaolisa Ezechukwu	National Malaria Elimiation Program	Nigeria
Amina Fakir-Knipiiler	Sanofi	France
Amu Mudenda	National Malaria Elimiation Centre	Zambia
Andrew Tompsett	USAID	USA
Antoine Kouame	Breakthrough ACTION	Côte d'Ivoire
Beauty Chola	PATH Zambia	Zambia
Blandine Olinga	PNLP	Cameroon
Bolanle Olapeju	Johns Hopkins Centre for Communication Programs	USA
Cameron Taylor	ICF	USA
Cecilia Mhiti	Zimbabwe Assistance Program in Malaria	Zimbabwe
Chalwe Kabuswe	Ministry of Health	Zambia
Charles Msiska	Ministry of Health	Zambia
Chelsea Montes de Oca	PATH Zambia	Zambia
Chime Mukwakwa	Breakthrough ACTION	Zambia
Christiana Roberts	NMCP	Sierra Leone
Christie Billingsley	USAID/PMI	Zimbabwe
Christopher Singini	Ministry of Health	Malawi
Chukwu Okoronkwo	NMEP	Nigeria
Clemence Dusingize	MOPDD/RBC	Rwanda
Colette Yah épouse Kokrass	PNLP	Côte d'Ivoire
Corinne Fordham	Johns Hopkins Centre for Communication Programs	USA
Daniel Wacira	USAID	Kenya
Daniso Mbewe	RBM Partnership to End Malaria	Botswana
David Ochieng	Malaria Consortium	Uganda
Debora Freitas Lopez	Chemonics International	USA
Donald Dickerson	USAID/PMI	USA
Monne Théréèse Bleu Bomin	PNLP	Côte d'Ivoire
Edith Nantongo	FHI 360 USAID Communication for Healthy Communities	Uganda
Edson Dembo	NMCP	Malawi
Edwin Oluch Odhiambo	NMCP	Kenya
Eleanor Sey	Ministry of Health	Ghana
Elizabeth Chiyende	PAMO/PATH Zambia	Zambia
Enock Musaana	Breakthrough ACTION	Zambia

Ernest Kakoma	NMEC	Zambia
Eunice Mintah-Agyemang	NMCP	Ghana
Faly Rénaud Andriamalala	NMCP	Madagascar
Fanny Munsaka	Breakthrough ACTION	Zambia
Felix Chola	Ministry of Health	Zambia
Ferdinand Ntoya	USAID	DRC
Fortunate Manjoro	NMCP	Zimbabwe
Francis Liywalii	Ministry of Health	Zambia
Frank Rweikiza	FHI 360	Zambia
Gabrielle Hunter	Johns Hopkins Centre for Communication Programs	USA
Gideon Zulu	Ministry of Health	Zambia
Guda Alemayehu	USAID	Ethiopia
Hilda Dhliwayo	Breakthrough ACTION	Zambia
Ida Savadogo	RAME	Burkina Faso
Jacqueline Jerome Toto	NMCP	Madagascar
Jean Denis Nkongol Elumba	Sumitomo Chemical	
Joel Kisubi	USAID	Uganda
Joel Koffi	Save the Children	Côte d'Ivoire
Joseph Kabungo	Ministry of Health	Zambia
Joseph Mupakile	Ministry of Health	Zambia
Joseph Musonda	Breakthrough ACTION	Zambia
Justine Samantha Bateta	NMCP	Uganda
Kaziya Mulenga	Ministry of Health	Zambia
Keila Nova	Chemonics International	USA
Kizito Kaseketi	PATH	Zambia
Kwame Dzudzorli Gakpey	NMCP	Ghana
Kyaw Zin Thein	Save the Children	Myanmar
Lamine Bangoura	USAID	Guinea
Lauren Smith	Malaria Consortium	United Kingdom
Lawrence Phiri	Ministry of Health	Zambia
Lionel Chipeta	HC4L Project	
Lucky Chifwesa	Ministry of Health	Zambia
Lyndsey Mitchum	Johns Hopkins Centre for Communication Programs	USA
Mariam Nabukenya	NMCP	Uganda
Mathias Pollock	Population Services International	USA
Matthew Boslego	RBM Partnership to End Malaria	United Kingdom

Maureen Nkhoma	HC4L Project	
Michael Toso	Johns Hopkins Centre for Communication Programs	USA
Michel Itabus	PNLP	DRC
Mory Camara	NMCP	Mali
Mpundu Mwanza	Breakthrough ACTION	Zambia
Mutale Bwalya	Breakthrough ACTION	Zambia
Mwinyi Khamis	Zanzibar Malaria Elimination Program	Zanzibar
Nancy Njoki	Population Services Kenya	Kenya
Naomi Kaspar	USAID/PMI	Tanzania
Nduka Iwuchukwu	VectorLink/Abt Associates	Zambia
Nephitaly Benister	CREECOM Malawi	Malawi
Neroh Chilembo	Ministry of Health	Zambia
Ouleye Tall Dieng	NMCP	Senegal
Patrick Nyendwa	PAMO/PATH Zambia	Zambia
Peter Bwalya	Ministry of Health	Zambia
Polite Zulu	Ministry of Health	Zambia
Priya Parikh	Johns Hopkins Centre for Communication Programs	USA
Raoul Kamanda	PNCPS	DRC
Rosemary Ardayfio	Graphic Communications Group Limited	Ghana
Sai Ti	American Refugee Committee	Thailand
Sam Tukei Ojulo	FHI 360 USAID Communication for Healthy Communities	Uganda
Sara Berthe	Johns Hopkins Centre for Communication Programs	USA
Seyum Mengesha	Health, Development & Anti-Malaria Association	Ethiopia
Shelby Cash	CDC/PMI	USA
Theresia Shirima	NMCP	Tanzania
Tiana Ramanatiaray	NMCP	Madagascar
Todd Jennings	PATH	Zambia
Wani Kumba Lahai	NMCP	Sierra Leone
Webby Phiri	Ministry of Health	Zambia
Wilson Mwape Kapenda	Ministry of Health	Zambia
Yembeh Marah	Catholic Relief Services	Sierra Leone
Zacharie Fotso Fokam	Save the Children	Côte d'Ivoire
Zwe Thu Htun	URC Myanmar	Myanmar

Agenda

2018 Meeting Agenda

Social and Behavior Change Communication Working Group Annual Meeting
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Day 1: Tuesday, September 25, 2018 Theme: Coordination and Strategic Vision		Presenter	Location
8:00-8:30am	Arrival coffee & tea <ul style="list-style-type: none"> Registration Hanging of posters 		Big Dome Lobby
8:30-8:40am	Opening remarks from SBCC WG co-chairs	Anna McCartney-Melstad & Guda Alemayehu	Big Dome Plenary Session
8:40-8:50am	Opening remarks by USAID Zambia	Thomas Crubaugh USAID Zambia Acting Mission Director	
8:50-9:05am	Opening remarks by Zambia Ministry of Health	Minister of Health, Zambia, Dr. Chitalu Chilufya	
9:05-9:20am	Message from RBM Partnership to End Malaria	Daniso Mbewe & video message from Kasetebirhan Admasu, CEO RBM Partnership to End Malaria	
9:20-9:40am	Participant introductions	Guda Alemayehu	
9:40-10:00am	Brief overview of social & behavior change (SBC)	Anna McCartney-Melstad	
10:00-10:30am	PMI SBC updates & priorities	Andrew Tompsett, PMI/USAID SBCC Team	
10:30-10:45am	Meeting overview Wall of insights Mini presentations and poster competition	Priya Parikh Angela Acosta Amina Fakir-Knipiler	
10:45-11:15am	Coffee and tea break		Gallery Walk

11:15-12:30pm	Mini presentations and poster competition: Day 1 presenters – Morning		Gallery Walk
12:30-1:30pm	Lunch		Chuma Grill
1:30-3:00pm	Steering Committee report Opportunities for coordination & collaboration with other groups	Guda Alemayehu Mathias Pollock, Debora Freitas Lopez	Big Dome
3:00-4:15pm	Mini presentations and poster competition: Day 1 Presenters – Afternoon Coffee and tea break		Gallery Walk
4:15-4:30pm	Wrap up	Wani Lahai Gabrielle Hunter	Big Dome
4:30-4:45pm	Group photo	Everyone!	Outside
6:00-7:00pm	Welcome reception		Poolside

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Day 2: Wednesday, September 26, 2018 Theme: Skills-building		Presenter	Location
8:30-9am	Arrival coffee & tea <ul style="list-style-type: none"> • Participant sign-in • Hanging of posters 		Big Dome Lobby
9:00-11:30am	Skills building concurrent sessions: Round 1 - Prior registration required <ol style="list-style-type: none"> 1- Introduction to Real-time Monitoring: <u>Boardroom I</u>, Bolanle Olapeju & Nabukenya Mariam Wamala 2- Macro Design for ITN Household Indicators Using DHS/MIS Data: <u>Meeting Room III</u>, Cameron Taylor & Hannah Koenker 3- What is HCD and how can you utilize it for SBC Programs?: <u>Meeting Room IV</u>, Juanita Rodriguez & Fayyaz Khan 4- Advocacy Challenges, Innovations, and Tools: Tools and Examples from Multiple Countries: <u>Big Dome</u>, Matt Boslego & Anna McCartney-Melstad 		Breakout Rooms
11:30-12:30pm	Mini presentations and poster competition: Day 2 presenters – Morning		Gallery Walk
12:30 –1:30pm	Lunch		Chuma Grill
1:30-4:00pm	Skills building concurrent sessions: Round 2 – Prior registration required <i>Room assignments are the same as morning session</i> <i>Note: Advocacy Challenges, Innovations and Tools will be facilitated in FRENCH in the afternoon</i>		Breakout Rooms
4:00-4:45 pm	Mini Presentations and Poster Competition: Day 2 presenters – Afternoon		Gallery Walk
4:45-5:00pm	Wrap Up	Angela Acosta, Priya Parikh, Oulèye Beye	Big Dome

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Day 3: Thursday, September 27, 2018		Presenter	Location
Theme: Breakout Sessions & Member Engagement			
8:30-9:00am	Arrival coffee & tea <ul style="list-style-type: none"> • Participant sign-in • Hanging of posters 		Big Dome Lobby
9:00-9:45am	Consultation on Task Force functionality and utility Instructions for breakout sessions	Shelby Cash Angela Acosta, Amina Fakir- Knipiler	Big Dome
9:45-12:00pm	Breakout sessions	Task Force Co-chairs	Breakout rooms
12:00-1:00pm	Lunch		Chuma Grill
1:00-2:30pm	Mini presentations and poster competition: Day 3 presenters – Afternoon		Gallery Walk
2:30-4:00 pm	Report out: Breakout group mini presentations <ul style="list-style-type: none"> • 10 minutes per presentation • 10 minutes Q&A per presentation 	Andrew Tompsett & Breakout session co-chairs/leads	Big Dome
4:00-5:00pm	Closing plenary	Anna McCartney-Melstad Guda Alemayehu, Angela Acosta, Priya Parikh, Amina Fakir- Knipiler	Big Dome