

Breakthrough RESEARCH

Resources for examining the costs and cost-effectiveness
of social and behavior change interventions for health

June 10, 2021

Avenir Health



Today's webinar

- Welcome and introductions
- Importance of SBC costing
- Costing resources developed under Breakthrough RESEARCH
- Challenges in conducting SBC costing and cost-effectiveness studies
- Exploring how unit costs are defined
- Unit costs for Merci Mon Héros videos disseminated via social media
- Looking ahead

Questions

- Please feel free to put questions in the Q&A section
- Questions can be entered in English, French, Portuguese, and Spanish
- The answers to questions not answered during the webinar will be posted to Springboard

Introductions



Amanda Kalamar
Technical Director, Population Council
Breakthrough RESEARCH



Avery Avrakotos
Malaria Technical Advisor, USAID



Lori Bollinger
Vice President, Avenir Health
Breakthrough RESEARCH



Shittu Abdu-Aguye
Deputy Project Director, I-SBC
Breakthrough ACTION - Nigeria



Nicole Bellows
Senior Associate, Avenir Health
Breakthrough RESEARCH



Michel Tcheunche
Senior Health Specialist, Avenir Health
Breakthrough RESEARCH

Importance of understanding the costs and cost-effectiveness of SBC for health



Avery Avrakotos
USAID

Breakthrough RESEARCH

- One of USAID's flagship social and behavior change (SBC) projects aimed at the generation, packaging, and use of innovative SBC research to inform programming (August 2017 to July 2022)
- Works in close collaboration with sister project Breakthrough ACTION
- One of the technical areas under Breakthrough RESEARCH is the examination of cost-effectiveness of SBC interventions



Importance of costing

- SBC is a key component of any strategy to improve global health but little is known about the costs and cost-effectiveness of SBC interventions
- A better understanding of the costs and cost-effectiveness of SBC can:
 - Demonstrate the cost-effectiveness of SBC to advocate for continued funding
 - Elevate the prominence of SBC in budgeting and planning documents, where it is often neglected
 - Assist with budgeting and planning
 - Allow programs to consider the cost-effectiveness when planning interventions to allocate scarce resources most effectively

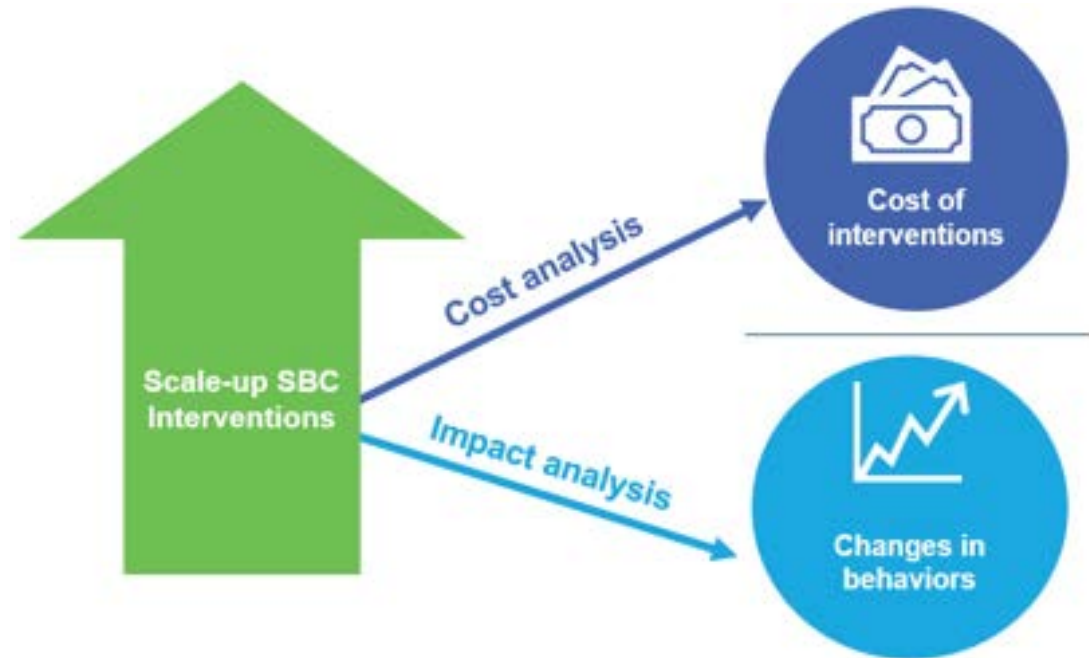
Costing resources developed under Breakthrough RESEARCH



Lori Bollinger, PhD
Avenir Health

Definitions

- **Costing:** The process of data collection and analysis for estimating the cost of a health intervention using a standardized approach based on widely accepted methodological principles.
- **Cost-effectiveness analysis:** Dividing the incremental cost of an intervention by the changes in behavior from an impact analysis resulting in an incremental cost-effective ratio (ICER).



Two main program area objectives

SYNTHESIZE EXISTING EVIDENCE

Literature review and repository of SBC costs

SBC business cases by health area

GENERATE NEW EVIDENCE

Develop guidance for others to conduct SBC costing analyses

Conduct costing and cost-effectiveness studies

Synthesis of SBC cost literature

- Conducted a literature review of SBC costs and created a database from 147 cost studies containing 867 separate cost estimates
- Costs incorporated into the Global Health Cost Consortium's Unit Cost Study Repository (UCSR)
 - <https://ghcosting.org/pages/data/ucsr/app/>
- Full database provides details on intervention, cost components, and methodology that can be used for referencing/benchmarking and for program planning
 - <https://breakthroughactionandresearch.org/creating-sbc-cost-repository/>

Using the UCSR



Filters

All fields marked with * are required

Reset Filters

Apply



SELECT YOUR INTERVENTION

Main Area *

SBC

Secondary Area *

FP

Intervention *

Mass media

Unit of Measurement

All

REGIONAL GROUPING

World Bank

WHO

UNAIDS

LOCATION AND/OR POPULATION

Country/Region

All

Urbanicity

All

Target Group (Clinical)

All

Target Group (Demographic)

All



Examining UCSR search results

Study	Type of cost	Cost in 2017 USD	Unit	Alerts	Unique Trait(s)
Robinson WC, 2003	Unit cost [SBC-only]	\$0.13	per person	●	unit (per person exposed); site (PSI)
Robinson WC, 2003	Unit cost [SBC-only]	\$0.08	per person	●	unit (per person exposed); site (Gold)
Robinson WC, 2003	Unit cost [SBC-only]	\$0.04	per person	●	unit (per person exposed); site
Robinson WC, 2003	Unit cost [SBC-only]	\$0.21	per person	●	unit (per person exposed); site
Schellstede W, 1984	CEA ratio	\$0.00	per outcome	●	
Vernon R, 1998	CEA ratio	\$0.00	per outcome	●	unit (per outcome-CYP) ; intervention
Vernon R,	CEA ratio	\$0.00	per outcome	●	unit (per outcome-CYP); intervention

<https://ghcosting.org>

Study Attributes

Citation

Geography

Intervention

Timing and Coverage

Population

Study Design

Costing Methods

Disaggregated Costs (2017 USD)

Input Categories

Activity Categories

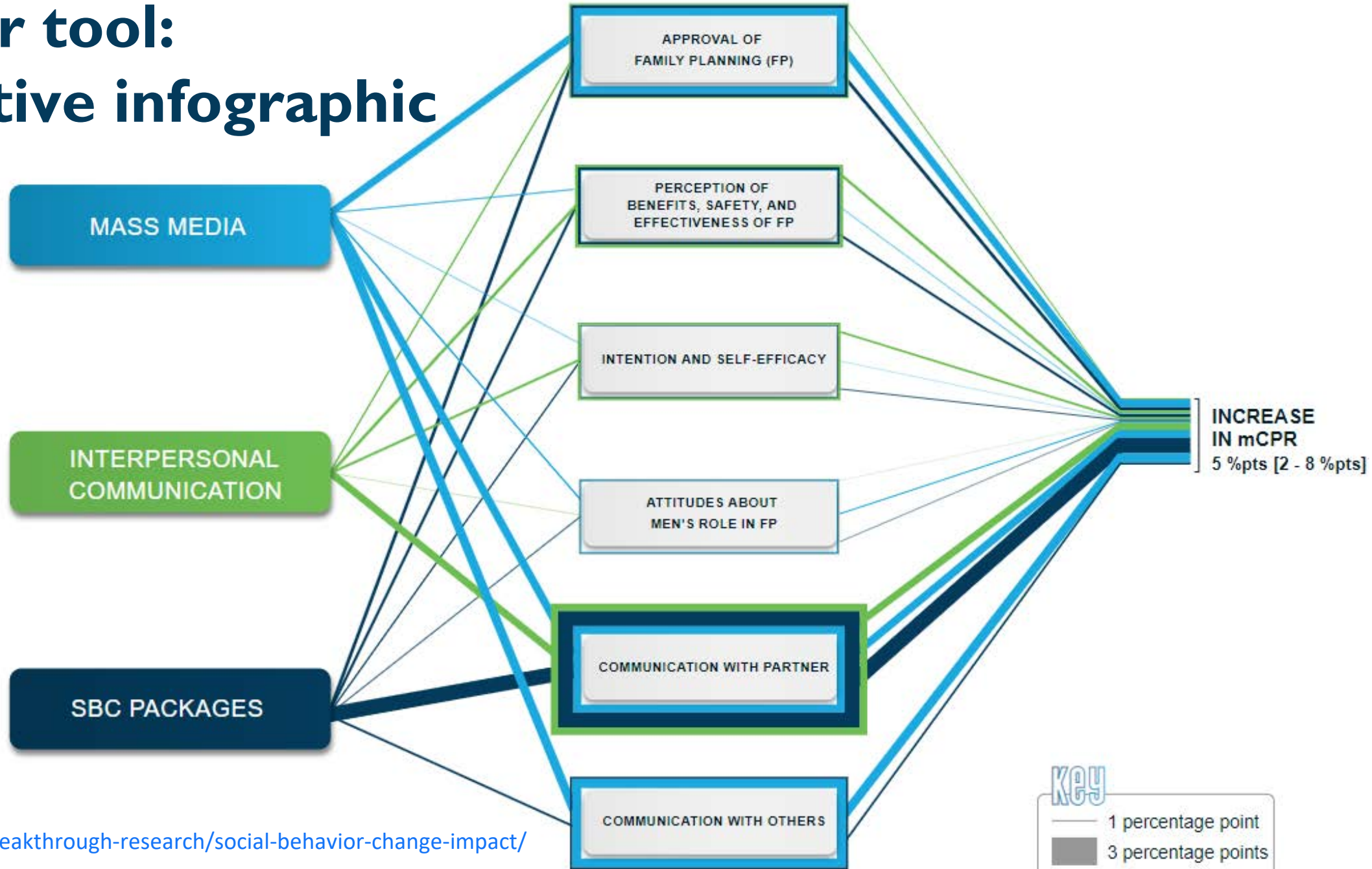
Patient Cost Categories

Alerts

Alerts

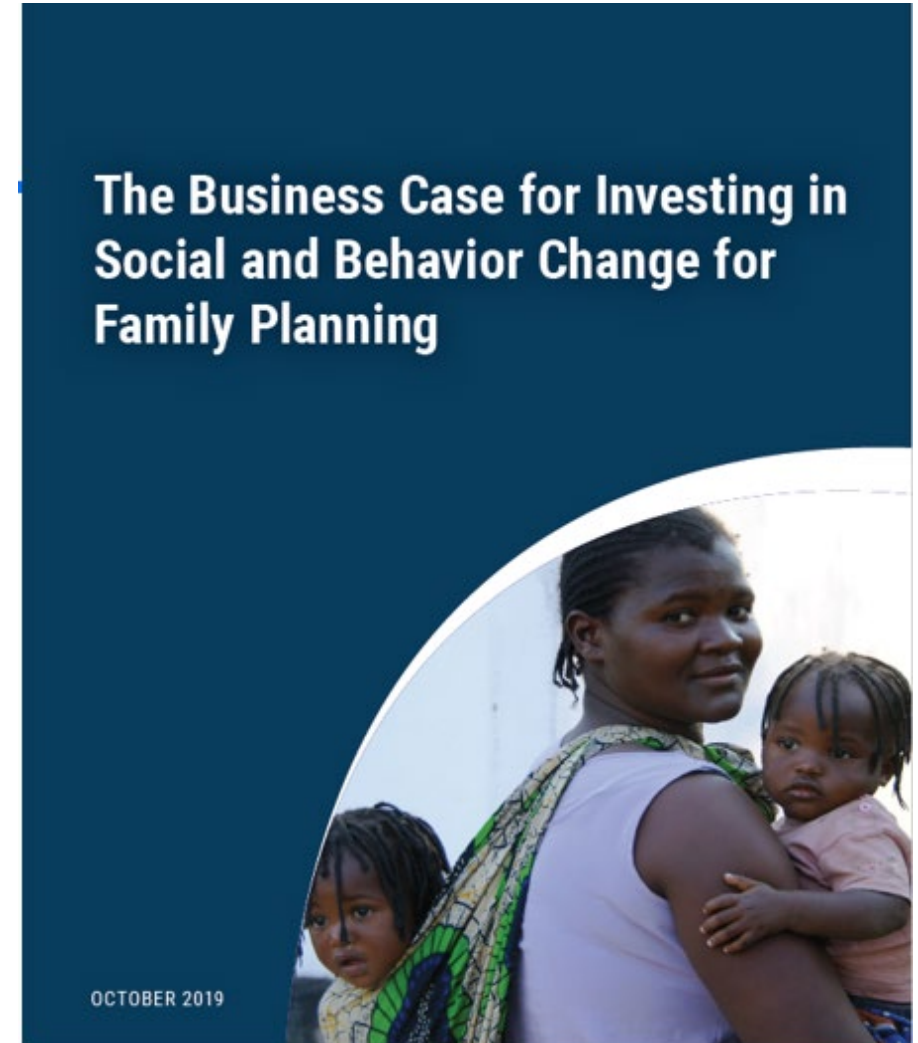
Another tool: Interactive infographic

Synthesizes the evidence to see SBC pathways to impact on modern contraceptive prevalence

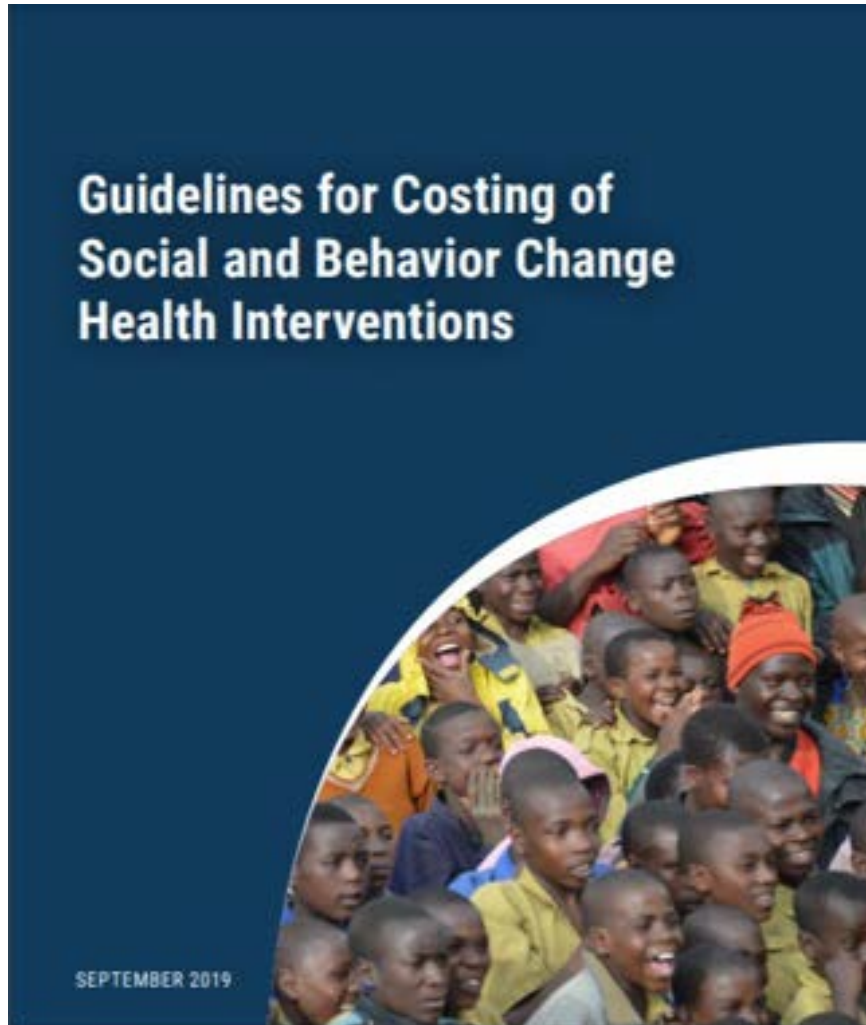


Costs / Impact: Examining cost-effectiveness

- Synthesized literature on SBC costs and effectiveness used to build models that examine cost-effectiveness of interventions for specific health areas
- SBC business cases for family planning and malaria both found SBC investment scenarios to be highly cost-effective
- A new business case on SBC interventions for nutrition is currently in development



Spurring new evidence with SBC costing guidelines



- Details 17 principles of conducting an SBC cost study—organized into four categories
 - Design
 - Measurement
 - Pricing and valuation
 - Analysis and reporting

Generating new evidence on integrated SBC

- Conducting cost-effectiveness studies on integrated SBC approaches
 - Study examining integrated SBC program in three northern Nigeria states (Breakthrough ACTION)
 - Study examining SBC in the Resilience in the Sahel II project in Niger (Breakthrough ACTION)
- Planning for the costing and cost-effectiveness began in the early stages of the program evaluation



Challenges from an implementer's perspective



Shittu Abdu-Aguye
Breakthrough ACTION Nigeria

Challenges of SBC costing

- Skill set for costing not typically part of the training received as SBC implementers and researchers, resulting in:
 - Lack of familiarity with standard classifications of financial costs
 - Lack of knowledge regarding how operational costs are distributed
- SBC is often embedded in other interventions, such as service delivery or systems strengthening, resulting in complexities in isolating the costs of SBC
- Program implementation phases or activities are often difficult to delineate
- Varied approaches for SBC make it challenging to find comparable benchmarks to measure ones' program against

General concerns about cost-effectiveness studies

- Cost-effectiveness studies may not account for the effect of SBC on attitudes, beliefs and intention
- The timeframe for cost-effectiveness studies may not be long enough to see changes in health outcomes
- Cost-effectiveness studies need to be designed to compare different SBC approaches, including any SBC vs. no SBC
- Economies of scale need to be taken into consideration when evaluating results

Exploring how unit costs are defined



Nicole Bellows, PhD
Avenir Health

Developing a community of practice

- Looking to engage with the SBC community to work together in helping generate new SBC costing and cost-effectiveness evidence
- Creating briefs on specific areas of SBC costing, such as:
 - Understanding cost study approaches and the appropriate denominators
 - Social media SBC costing considerations
 - SBC costing in malaria campaigns
 - Capturing SBC design-related costs

Understanding denominators



- SBC Costing Guidelines cover the main principles of generating the appropriate numerator (e.g., total costs)
- Community of practice brief goes into more depth about the role of the denominator in generating the unit cost
- **Unit cost** = the average cost of an intervention, service, or output
- Selecting the denominator is essentially determining what type of SBC costing or cost-effectiveness study one should pursue

Types of denominators for SBC unit costs

Degree of difficulty in measurement and desirability

**Program
outputs**

**Intermediate
determinants**

**Health
behaviors**

Health impacts

Per person
exposed to mass
media campaign
about malaria
prevention

Per attitude
change about
insecticide treated
nets (ITNs)

Per additional
person sleeping
under an ITN

Per malaria
infection averted
or per life saved

Program outputs

Unit cost study

PRIMARY PURPOSE

- Budgeting and planning
- Comparing approaches of the same type of SBC intervention to improve technical efficiency

EXAMPLE UNIT COSTS

- Mass media—per person exposed
- SMS reminders—per person contacted
- Individual or group counseling—per person participating
- Provider behavior change—per provider trained

QUESTIONS ADDRESSED

- How much does the intervention cost per unit of output?
- How do unit costs compare by SBC approach, population, or geographic location?
- Which SBC approach is most cost-efficient in generating outputs?

DATA NEEDED

- Total cost of intervention
- Monitoring data on program reach (e.g., number exposed or participating)

Health behaviors

Cost per behavior

PRIMARY PURPOSE

- Advocating for additional SBC investments within a health area
- Comparing the relative costs of different types of SBC interventions in achieving behavioral outcomes

EXAMPLE UNIT COSTS

- Family planning—per couple year of protection
- Malaria—per additional person under an insecticide treated net
- HIV—per male circumcision

QUESTIONS ADDRESSED

- How much does the intervention cost per desired health behavior?
- How do unit costs per health behavior compare by SBC approach, population, or geographic location?
- Which SBC approach is most cost-efficient in improving the behavior?

DATA NEEDED

- Total cost of intervention
- Effectiveness evaluation of health behaviors

Health impacts

Cost-effectiveness

PRIMARY PURPOSE

- Advocating for additional SBC investments
- Comparing the relative cost-effectiveness of achieving health impact

QUESTIONS ADDRESSED

- How much does the intervention cost per desired health outcome?
- How do costs per health outcome compare by SBC approach, population, or geographic location?
- Which SBC approach is most cost-effective in improving the health outcome or impact?

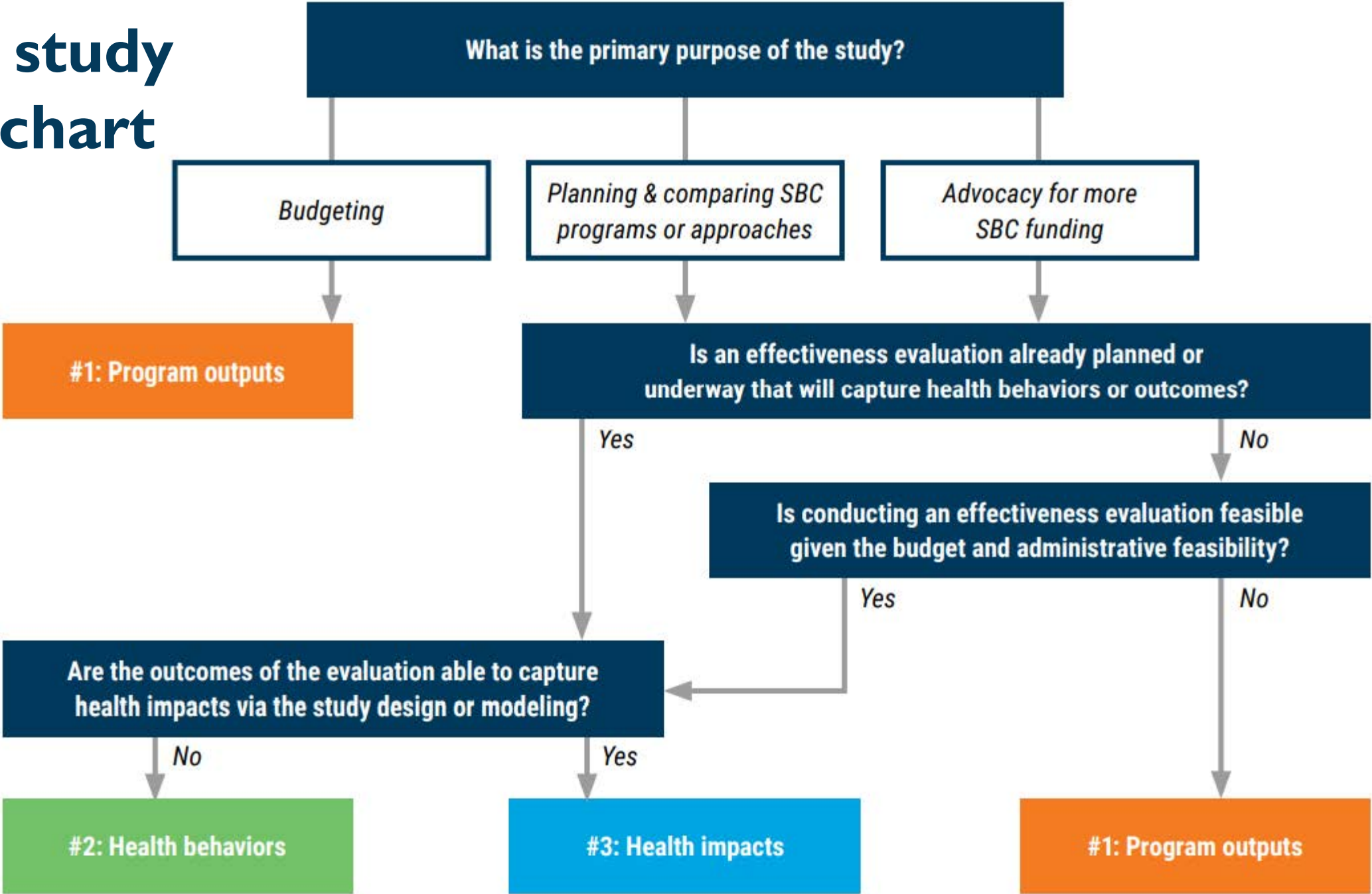
EXAMPLE COST-EFFECTIVENESS RATIOS

- Family planning—per unintended pregnancy averted
- Infectious diseases—cost per infection averted
- Cross-cutting—cost per disability-adjusted life year averted

DATA NEEDED

- Total cost of intervention
- Effectiveness evaluation that measures health impact or allows for modeling of health impact

Cost study flow chart



Concluding comments

- In a costing study, the selected denominator reflects the type of study being conducted
- More SBC costing research is needed at every level, particularly around newer forms of SBC interventions or where there are gaps in existing costing knowledge, such as social media, integrated SBC, provider behavior change, and community engagement
- When possible, it is preferred to move towards cost-effectiveness analysis by including cost studies with program evaluations looking at health behaviors and health outcomes

Unit costs for Merci Mon Héros videos distributed via social media



Michel Tchuente, PhD
Avenir Health

Merci Mon Héros (MMH)



- USAID-funded multi-media campaign conducted by Breakthrough ACTION—radio, television, social media, community events
- Focuses on SRH issues, including encouraging open dialogue on SRH issues between adults and youth where cultural norms and taboos inhibit communication
- One component of MMH is a youth-led social media campaign originally conceived at the Youth Design Challenge of the Francophone Africa SBC Summit in February 2019
- Study objectives: calculate unit costs for the MMH videos disseminated via social media in two countries in the region (Côte d'Ivoire and Niger)

Data collection and analysis

- Cost data collection instrument implemented virtually (due to Covid-19) through consultations via phone, email, and web-based correspondence
- Data on video dissemination captured via social listening reports conducted by Breakthrough RESEARCH in partnership with M&C Saatchi Intelligence
- Proportion of personnel and overhead costs attributed to the MMH videos based on interviews with staff about level of effort—with sensitivity analysis varying personnel level of effort by 5%
- Proportion of total design costs attributed to study countries based on breakdowns of video reach in social listening reports

Three denominators

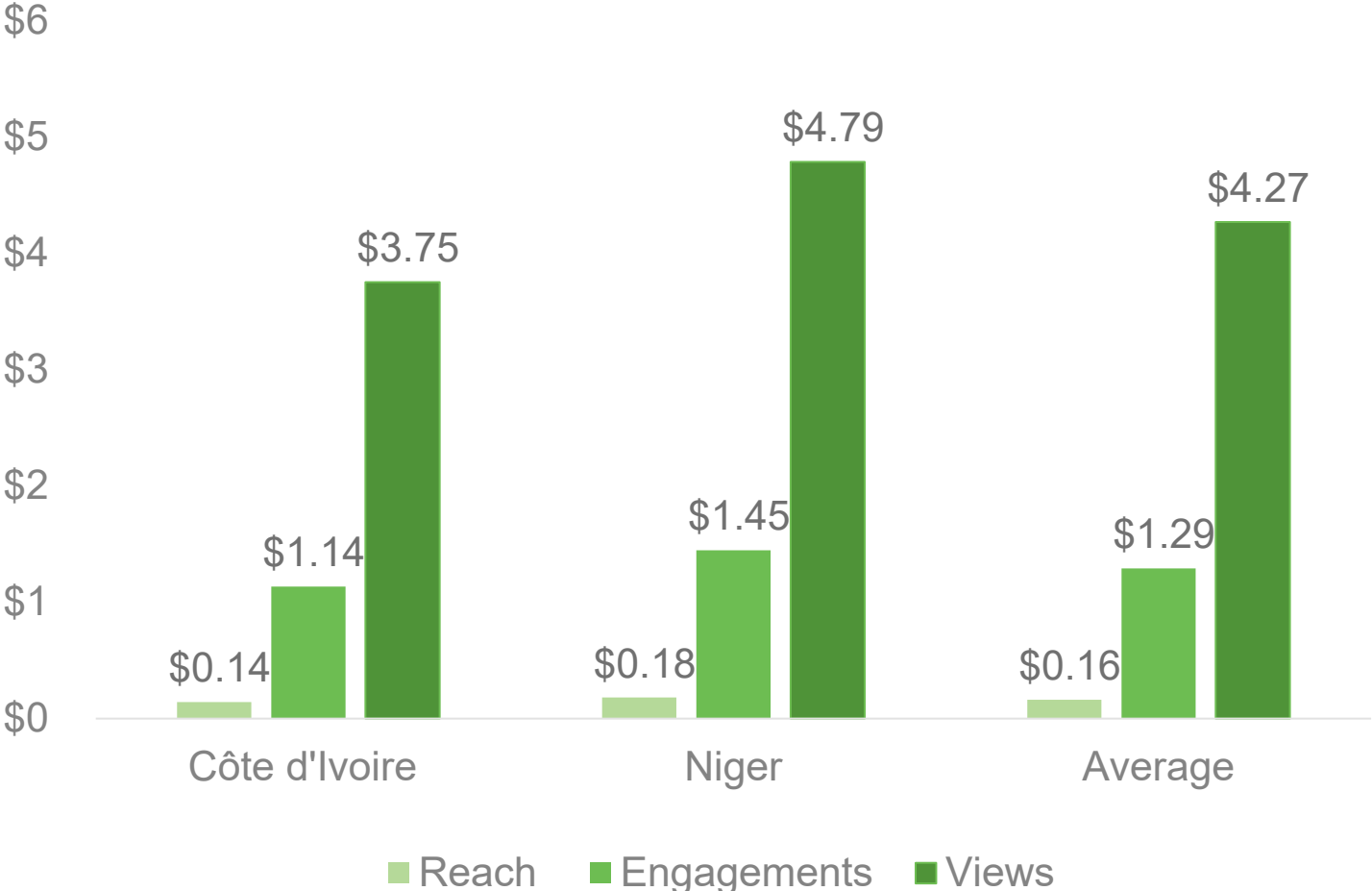
- For MMH, focus on program outputs—the # exposed to the campaign via social media
- Within this, three different options available for calculating unit costs:
 - **Reach**—number of screens the MMH videos entered
 - **Engagements**—number of times people engaged with MMH posts through reactions, comments, shares, retweets, mentions and likes
 - **Views**—number of views of at least 30 seconds, where each video is at least 2 minutes long

Total costs

Cost Category	Cote d'Ivoire		Niger	
	Cost in USD	Percent	Cost in USD	Percent
Personnel	\$ 3,105	10%	\$ 1,072	8%
Consultants	\$ 10,206	33%	\$ 5,422	39%
Travel and Transport	\$ 803	3%	\$ 213	2%
Social Media Advertising and Campaign Launch	\$ 3,532	11%	\$ 4,435	14%
Training (non-personnel)	\$ 2,511	8%	\$ 549	4%
Project Management & Overhead	\$ 11,076	35%	\$ 5,586	33%
Total	\$ 31,233	100%	\$ 13,748	100%

- For the two countries, total cost of **\$44,981**
- Higher costs in Côte d'Ivoire due to higher reach and thus greater proportion of overall design and production costs allocated

Unit costs—total cost/denominators



Sensitivity analysis

Reach: \$0.15–\$0.17

Engagements: \$1.23–\$1.36

Views: \$4.06–\$4.48

Key take-aways

- This study addresses the gap in the literature on the unit costs associated with SBC via social media
- Substantial differences in unit costs depending on which denominator is used
- Determining the most appropriate denominator for social media requires additional insights on the level of engagement needed to generate behavior change
- Having a youth-led design and production like MMH requires more oversight but the long-term skills-building and capacity strengthening benefits of engaging youth in the design and production are important to consider

Looking ahead



Amanda Kalamar
Population Council

Join the SBC costing group on Springboard

- Find all the SBC costing products discussed today
- Engage with colleagues about SBC costing resources and questions
- Additional briefs coming soon
- Follow-up event based on your interests



SBC Costing

Questions

THANK YOU

Breakthrough RESEARCH WEBINAR

June 10, 2021



BreakthroughAR



@Breakthrough_AR



Breakthrough_AR

<https://breakthroughactionandresearch.org/>

Breakthrough RESEARCH catalyzes social and behavior change (SBC) by conducting state-of-the-art research and evaluation and promoting evidence-based solutions to improve health and development programs around the world. Breakthrough RESEARCH is a consortium led by the Population Council in partnership with Avenir Health, ideas42, Institute for Reproductive Health at Georgetown University, Population Reference Bureau, and Tulane University.

Breakthrough RESEARCH is made possible by the generous support of the American people through the United States Agency for International Development (USAID) under the terms of cooperative agreement no. AID-OAA-A-17-00018 . The contents of this document are the sole responsibility of the Breakthrough RESEARCH and Population Council and do not necessarily reflect the views of USAID or the United States Government.

