





The International Social and Behavior Change Communication Summit

SUMMARY REPORT

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TO OUR COLLEAGUES IN THE GLOBAL SBCC COMMUNITY

The first International Social and Behavior Change Communication (SBCC) Summit was conceived with a bold vision: to bring together the global community of SBCC organizations, practitioners and researchers to advance the field of behavior change. And this vision was realized. For four days in February 2016, more than 750 SBCC professionals from over 50 countries came together in Addis Ababa, Ethiopia, to share knowledge and lessons learned, to forge new partnerships and strengthen friendships, to disseminate recent research and tools, to generally enhance the science and art of SBCC for global health and development, and to show the world that our community exists and it is strong.

Never before have so many SBCC professionals come together with the sole purpose of strengthening their professional community and elevating SBCC's contribution to the development agenda. We came together at a critical time. The field is growing rapidly. High profile issues such as Ebola, TB and climate change, to name a few, have drawn attention to the importance of communication and behavior change in successful prevention and social change efforts. We know that when programs use communication, they are more effective at improving health and well-being. But, all too often, SBCC is not recognized as an essential tool in the development toolkit. This summit was designed to change that narrative.

As soon the Summit dates were set, the response from the SBCC community was overwhelming. More than 600 abstracts were received and the number of registrations shocked the conference planners. Attendees came from NGOs, research institutions, universities, government agencies, donors, advertising and public relations agencies and the media, representing all levels of health and development. The breadth and depth of the participants' experience allowed us to showcase a variety of exciting and innovative SBCC work.

Each day of the Summit was thought-provoking and engaging. All three mornings began with keynote speeches delivered by leading SBCC professionals. The speakers hailed from a variety of SBCC disciplines and were intended to urge attendees to think outside of their comfort zone and approach their work in a new or different way. These were followed by technical panels, workshops, exhibits and opportunities for networking. This summary report includes highlights of the Summit's many events. Additional information about these events, as well as videos and presentations, can be found at <u>SBCCSummit.org</u>.

On behalf of the International Steering Committee, I would like to sincerely thank USAID, all our generous sponsors and our local host, the Federal Ethiopian Ministry of Health, for making this first Summit possible. We especially want to thank everyone who attended and made it such a success. We look forward to joining together as a community again in 2018 at the next International SBCC Summit.

Sincerely,

Susan Krenn Executive Director

Johns Hopkins Center for Communication Programs

Chair, International Steering Committee





INTRODUCTION

The first International SBCC Summit 2016 brought together the global community of social and behavior change communication (SBCC) organizations, practitioners and researchers from February 8 - 10, 2016, in Addis Ababa, Ethiopia.

The three-day event offered talks from SBCC field practitioners, a market fair of tools, skills-building workshops, and panels on methodologies, programs and research. Blue Sky sessions allowed participants to consider the way forward in elevating the science and art of SBCC.

Twenty-four technical panels and 10 preformed panels were created from the more than 600 abstracts received. Topics ranged from HIV and Ebola to nutrition and sanitation.





STEERING COMMITTEES

The following organizations were part of the International and National Steering Committees, which were integral to making the International SBCC Summit a success. We thank the following organizations for their time and guidance.

INTERNATIONAL STEERING COMMITTEE























NATIONAL STEERING COMMITTEE







































SPONSORS

The organizers of the International SBCC Summit are grateful to the following sponsors for their support. Sponsor support allowed the Summit to offer scholarships and fund Summit activities.

GOLD LEVEL











SILVER LEVEL







BRONZE LEVEL















HOSTS







(THE ADDIS DECLARATION



THE ADDIS DECLARATION (2016)

Toward a New Declaration of Principles for the Global SBCC Community*

We, the participants in the 2016 SBCC Summit, propose this declaration as a statement of where we are as a field and where we hope to go. Together, as an SBCC community of practice, we believe that:

- I. We support and practice SBCC in order to improve society. Our clients/stakeholders do not just want to live without disease; they want to lead happy and productive lives that improve themselves, their children, their communities, their countries and the world we all inhabit. We want to design and implement programs in partnership with our stakeholders, not for them or in order to change them.
- 2. SBCC is a process that unfolds over time. It is not synonymous with messaging (communication "s"). It is a reciprocal process of dialogue and deliberation that evolves continuously through social interaction.
- **3.** Not all social and behavioral changes are equally important or plausible. Changes can be organized according to different attributes: whether private or public; one-off vs. repeated or sustained; long-term or short term; voluntary or compulsive; stigmatizing or prideinducing; costly, cheap or free behaviors; those with high vs. low cultural significance. Prioritization and strategizing must take these attributes into account.
- 4. Social and behavior change results from interactions between multiple and multilevel factors. Factors at the structural, community, household and individual levels are often complementary, not mutually exclusive, so they need to be addressed in an integrated manner for optimum effect. This will lead us to ask more informative questions and find more powerful solutions. Don't ask, "Is mHealth better than radio?" Instead ask, "Is mHealth better than radio in urban compared to rural settings?" Don't ask, "Does participatory communication reduce economic disparities?" Instead ask, "Does participatory communication reduce economic disparities better in the presence or absence of microfinance opportunities?"
- 5. SBCC is multidisciplinary. The problems we tackle are complex, requiring multiple methods, perspectives and solutions. No one discipline, not even SBCC, can solve these problems alone. We need to involve other disciplines in our work and also infiltrate other disciplines because we have a lot to offer and to learn. We must train ourselves to speak the language of other professions and specializations.

^{*} This declaration stemmed from a Summit keynote speech given by Rajiv Rimal, PhD, Professor and Chair, Dept. of Prevention and Community Health at George Washington University. Please see Appendices II and III for background on SBCC and past declarations related to SBCC developed by Douglas Storey, PhD, Director of Communication Science and Research at Johns Hopkins Center for Communication Programs.



have an obligation to improve our field. We must disseminate our findings, not only to funders, but to the larger SBCC community and to the stakeholder communities which we study and with which we work. We must train and nurture future SBCC professionals by networking, mentoring, role-modeling best practices and promoting SBCC education.



- 7. We must relentlessly pursue rigorous evaluation of SBCC work. Our work depends on a
 - supply of precious public funds, so we must build from an evidence base of programs with known effectiveness and contribute to that evidence base so others can do the same.
- **8.** SBCC should routinely report cost-effectiveness and cost-benefit analyses. Because funding for SBCC is not unlimited and always competes with other priorities, we need to justify our expenditures. What is the unit outcome per dollar spent? What are the savings in dollars that result from the program?
- **9.** SBCC programs must be sensitive to unintended effects. Does exposure to anti-drug messages increase curiosity about drugs among some youth? Does the implementation of more bike paths increase cycling, but also increase traffic fatalities? Does a heightened focus on one cause bring extra funds through policy change, but also take funds away from other causes?
- **10.** SBCC communicators must communicate more clearly. We are sometimes our own worst enemy when we insist on using specialized jargon or a jumble of acronyms that make us incomprehensible and inaccessible to others. And we weaken our public image and undermine trust when we argue among ourselves publicly about whose approach is right and whose is wrong. We must try to speak with one voice.

These beliefs, if widely shared and followed, will strengthen and enrich the SBCC field, link members of the SBCC scholarly and professional community more closely to each other, increase the stature and reputation of SBCC globally, and continue to improve the effectiveness and impact of communication on a local, national and global scale.





OPENING CEREMONY

The Summit was officially opened on February 8, 2016, by H.E. Dr. Kesete Birhanu Admassu, Ethiopia's Federal Minister of Health. His colleague, H.E. Dr. Kebede Worku, State Minister of the Ethiopian Federal Ministry of Health, served as Chair, and Susan Krenn, Executive Director of the Johns Hopkins Center for Communication Programs (CCP), welcomed all attendees on behalf of the International Steering Committee.



Over the past two decades in Ethiopia we have made significant, noteworthy improvements in terms of overall health of our people. One of the key contributory factors to this success was a constant, total and consistent use of health communication to inform, educate, mobilize both citizens and health workers. Contextually calibrated SBCC has been proven to increase knowledge, shift attitudes and cultural norms, and produce changes in a wide variety of behaviors."

H.E. Dr. Kesete Birhanu Admassu Ethiopia's Federal Minister of Health

Never before has our community come together in such numbers, with the purpose of talking about what we do and how we do it. ... This is an opportunity. It's the first of its kind. We want, as a community, to gel our thinking. To think together about how we collectively move forward."

Susan Krenn Executive Director Johns Hopkins Center for Communication Programs





We are thankful to HC3 for the trust and confidence in us to jointly host the conference. I would like to express gratitude for the federal ministries and agencies who facilitated as well, in one way or the other. I express my heartfelt thanks to the members of the local and technical committees for their organization of the conference.

H.E. Dr. Kebede Worku State Minister Ethiopian Federal Ministry of Health



Other speakers included Jimmy Ocitti, Representative of the Economic Commission for Africa, United Nations; H.E. Peter Vrooman, US Deputy Chief of Mission; and Kojo Lokko, Deputy Director of Health Communication Capacity Collaborative at CCP.

We have reached a defining moment in human history and a global conversation on SBCC is long overdue...It is heartwarming to see that over 700 SBCC practitioners, organizations and researchers are here this week to exchange SBCC knowledge and successful practices, allowing you to network on how to improve health delivery among many of the problems affecting the African continent in particular."



Jimmy Ocitti
Representative
Economic Commission for Africa, United Nations



of This conference is an opportunity to recognize the hard work of many of these partners, who've come together, whether they're international organizations, from NGOS, civil society organizations, donors, governments, and communities. Not only to make this Summit happen but also to push out the message that effective behavior change communication is essential for a well-functioning health sector."

H.E. Peter Vrooman US Deputy Chief of Mission

This is the first large-scale Summit ever held focusing solely on social and behavior change communication. While it may be the first, it has been in the offing for some time. We got the opportunity to hold this when USAID agreed to offer seed money through our HC3 project. We knew there was a large community of SBCC practitioners out there and we have brought them all together in one place."

Kojo Lokko

Deputy Director, Health Communication Capacity Collaborative





After the opening ceremony ended, attendees were treated to a traditional Ethiopian dance and reception, offering them the opportunity to learn more about Ethiopian culture and network with fellow SBCC professionals.



KEYNOTES

All three days of the Summit began with a plenary session featuring two keynote speakers. These talks covered a wide range of thought-provoking topics related to communication, behavior, marketing and society.

DAY ONE

Moderator: Kojo Lokko, Deputy Director of HC3

Kumi Naidoo, launch director at the African Civil Society Center: The Role of Communications in a World in Crisis

In a world of multiple crises – economic, refugee, ecological, and health – fundamental and major systemic change is needed. Communication can play a critical role in this change. Naidoo reminded the audience of the power of communication, and especially of SBCC. To truly ensure positive impact, Naidoo concluded, the SBCC community must address inequality and climate change, both professionally and in their personal lives.



David T. Neal, Founder and Managing Partner of Catalyst Behavioral Sciences LLC:

The Habitual Brain: Advances in Creating Disruptive and Sticky Behavior Change

Knowledge alone does not create behavior change. Neal discussed the value of ritual, informing the audience that 45 percent of people's daily life is based on habit. It is thus vital for SBCC to disrupt people's environments or familiar action sequences, creating a window of opportunity where new behaviors and habits can form.



Day Two

Moderator: Rafael Obregon Galvez, UNICEF

Matthew Willcox, Founder and Executive Director of the Institute of Decision Making at FCB West: Make the Shortcuts of Human Nature Work for You

Willcox discussed behavioral economics and how it can be used to develop SBCC programs. Behavioral economics explores people's decision-making processes, seeking to explain why people do not always make objectively rational choices. As Willcox presented, it is only by looking at how people actually behave, rationally or not, and by including behavioral economic principles into SBCC program development, that SBCC will be most effective.





Lebo Ramafoko, Executive Director of the Soul City Institute in South Africa:

The Good, the Bad and the Ugly: Reflections of 20 Years of Proving What We Do Matters

The SBCC community has long struggled with defining SBCC and all it involves. Ramafoko looked at SBCC definitions from 1999 through today, asking the vital question: "Do we all truly have a common understanding of what we are talking about?" As the community looks ahead and continues to ask how best to assess SBCC, its effectiveness and impact, Ramafoko reminded the community they must continue to consider people as agents of their own change, not *objects* of that change, involving them in all stages of SBCC.



Day Three

Moderator: Antje Becker-Benton, formerly with FHI 360, now Save the Children

Norkor Duah, Managing Director of Lowe Accra (Lintas Ghana Ltd.):

Changing Scenes of Life

Duah presented a first-hand history of SBCC in Ghana, looking at its achievements, impacts and challenges over the years. Past campaigns by several SBCC organizations were discussed, including the Goodlife brand and Stop AIDS, Love Life. She noted that social marketing and SBCC efforts have come full circle in Ghana. In the early days, the key channel was personal contact and community engagement, which are the key pillars of social marketing. In the socialled new wave, commercial advertisers called it "activation." And now the circle is complete with the winning formula being personal contact and individual broadcast.



Rajiv Rimal, Professor and Chair, Dept of Prevention and Community Health, George Washington University: Social and Behavior Change Communication at the Crossroads (and Crosshairs): What's Next?

Presenting an early version of what became the Addis Declaration, Rimal reflected on issues within the SBCC community and proposed small changes and refocuses in SBCC to further strengthen the discipline. Along with these suggestions, Rimal reminded attendees that the SBCC community has a lot to celebrate from their work globally, and that often the main criticism of SBCC comes from the community itself. He warned the SBCC community against clipping its own wings.



All six keynote speeches can be viewed on HC3's YouTube channel: http://www.youtube.com/user/healthcommcapacity/



A special thanks to the moderators of the Summit keynotes:



Којо Сокко



ANTJE BECKER-BENTON



RAFAEL OBREGON

(CONFERENCE HIGHLIGHTS



CONFERENCE HIGHLIGHTS

TECHNICAL Sessions and Preformed Panels

Twenty-four technical sessions and ten preformed panels (sponsored by SBCC organizations) were created from more than 600 abstracts received.

The sessions delved into best practices, looking at topics including communication theory, the use of games for SBCC and crisis communication. Presenters and panelists represented a wide range of countries and health topics, bringing a variety of viewpoints, contexts and interpretations to the Summit.



Day 1

- Capacity Strengthening:
 Building Blocks From Micro to Macro
- Connecting the Dots...
 Climate Change, Nutrition and Agriculture
- Ebola: In the Mind of an Epidemic
- Entertainment-Education:
 Stories from Around the World
- Faith-Based Efforts: From the Pulpit to the People
- Monitoring & Evaluation: A Marvelous Mix of Methods
- Adolescent Health: Focus on Youth
- Interpersonal Communication: Intimate Talk – Couples and Family Health

Day 2

- Across the Spectrum of Family Planning
- Coordinating for Maximum Malaria Impact
- Gender in a New Generation
- Support for Infant and Young Child Feeding
- The Social Media in Social Change
- Local Solutions Solve Local Problems
- Integrated Programming:
 Piecing the Puzzle Together
- Storytelling | Fun & Games

Preformed Panels

- Community Mobilization Demystified
- From Silicon Valley to Sierra Leone: Applying Human-Centered Design Principles
- Mainstreaming Global Theories of Health Communication
- Risk and Emergency Communication in Humanitarian Settings
- Using ICT Tools in SBCC Programming

Day 3

- Communication as a Tool Against Violence
- Malaria in the Not So New Millennium
- Moving the Message Through Mobile
- Provider Connection
- Refining the Focus for HIV
- Getting Men Through the Door: Best Practices for VMMC
- Massaging the Message
- Newborn Health: The Right Stuff for the Right Start

Preformed Panels

- Driving Social and Behavior Change with and for Children across Program Contexts
- Aligning Evaluation of Social and Behavior Change with the Realities of Implementation
- Exploring the Future of SBCC Interventions
- ICA Members in Action: Findings From the Field
- Translating a Global Toolkit for Local Solutions



SKILLS-BUILDING WORKSHOPS

Fourteen skills-building workshops provided an opportunity for participants to develop new technical SBCC skills and capacities. They focused on areas such as program planning, implementation, research, and M&E.



- Capacity Strengthening Part I: Making PROGRES Toward Institutional Sustainability
- Capacity Strengthening Part II: Mobilizing Resources for Financial Sustainability
- Capacity Strengthening Part III: Finding and Filling SBCC Gaps
- Communication for Transformation: Action Media – Global Experience and Practice
- Developing Materials and Products for Effective SBCC
- Expending the Menu of Formative Research Methods for Gender Transformative SBCC
- Fun and Games Changing Lives: SBCC in Low Literacy Settings
- How to Leverage a Community Video Approach for Health, Nutrition and Agriculture

- Moving from Inspiration to Impact SDG ICT Playbook
- People, Places, Ideas: SBCC Storytelling through Narrative and Documentary Films
- Scratch to Sketch: A Roadmap to Develop Effective Message
- Seeing is Believing: Direct Observation and other Ethnographic Models for WASH SBCC programming
- Strengthening Sexual and Reproductive Health (SHR) SBCC Programs for Urban Adolescents
- Taking SBCC to Scale: A Comprehensive Approach to Delivering Result



COMM TALKS!

In the style of "TED Talks," Comm Talks were ten-minute informal presentations focusing on an SBCC practitioner's experiences in the field. Innovations, successes and challenges, and lessons learned were among the dynamic topics presented.

Day 1

- Jess Majekodunmi: What's Brand Got to Do With It: Behind the Scenes Of Yegna
- Kellen Eilerts: Free, On-Demand SBCC
- Darriel Harris: Harnessing Religion in South Sudan
- Stephanie Levy: A Case for Accelerator Behaviors
- Hassan Arouni: Using Serial Dramas to Face Ebola

Day 2

- Adelaida Trujillo: Characteristics, Conceptualization and Methodologies of Revela 2
- Alexandre Rideau: C'est La Vie!
- Deo Ng'Wanansabi: Planning and Budgeting for SBCC Programming
- Joanna Murray: Can Mass Media Interventions Reduce Child Mortality?

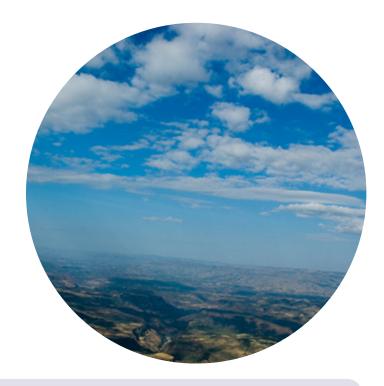
All nine Comm Talks can be viewed on HC3's YouTube channel:

http://www.youtube.com//healthcommcapacity/



BLUE SKY SESSIONS

Three Blue Sky sessions provided a forum for open and reflective discussions about the practice of SBCC.



Day 1



Dr. Douglas Storey, Director of Communication Science and Research at CCP, led a session entitled "What counts as evidence?". The discussion was far-ranging, considering issues such as the difference between evidence and learning, the distinction (and perhaps imbalance) between a focus on proving versus improving program outcomes, and the recognition that "who decides what counts as evidence" often determines what evidence is gathered, how it is used, and how it is disseminated.

Day 2



Julia Rosenbaum, Deputy
Director and Senior Behavior
Change Advisor at FHI360/
USAID WASHplus Project, led
a session about describing
SBCC to people outside
the health communication
community. Participants
discussed the struggle to find
a way to describe all that SBCC
practitioners all do in a way
that is easily understood by the
broader community.

Day 3



William Glass, Director of Strategic Communication Programs at CCP, moderated the final Blue Sky Session, looking ahead to the future of SBCC. This session asked participants to consider what changes they anticipate in the next five years, how they will impact the approaches to SBCC, and whether these changes are likely to affect the SBCC community positively or negatively.



SPECIAL EVENTS

LION'S DEN

Two student groups received support to come to the Summit and participate in the Lion's Den, a competition modeled after the US television show Shark Tank and the Global Health Case Competition at Emory University.

The groups were made up of undergraduate and graduate public health students studying in Kenya and Indonesia who had submitted winning proposals for an innovative behavior change project related to WASH (water, sanitation, and hygiene).

Each group received intensive mentoring from SBCC professionals at the



Summit, before presenting their project idea to a small panel of judges. The Kenya team was awarded first place with a proposal for a community-based theater intervention aimed at men. They won \$5,000 to further develop their concept and are currently implementing a small-scale, six-month pilot project in the Bondo district of Kenya. As of August 2016, the project team, working with a group of young people, has developed, produced and performed eight performances of their "Clean Hands, Healthy People" play.

MULTIMEDIA SHOWCASE

This evening event allowed SBCC practitioners from around the world to share their work with a new audience – their colleagues. Examples of stellar entertainment education were presented from countries such as South Africa, India and Ethiopia.



FIELD TRIP

The Ethiopian Federal Ministry of Health hosted a special field trip to the Wegen AIDS Talkline after the official conclusion of the Summit. This was a unique chance to see the Talkline in action, as it served people across Ethiopia in over 14 local languages.

Started in 2004, the Wegen AIDS Talkline provides free information, telephone counseling and referral services on HIV/AIDS, STIs, TB and related topics. The field trip allowed participants to see the Talkline's state-of-the-art center, including their calling system that records key data for further analysis while ensuring callers remain anonymous.

The Federal Minister of Health, H.E. Dr. Kesete Birhanu Admassu, also spoke to participants about DKT Ethiopia's Higher Education Institutes Initiative, which includes SBCC activities such as the social media website Temarient.com. Temarient is one of the largest social networking platforms in Ethiopia and is targeted at university and college students vulnerable to HIV and unwanted pregnancy.





MARKET FAIR EXHIBITION

The Market Fair exhibition housed nearly 40 booths that allowed SBCC organizations to share their expertise, tools and materials. Additionally, twice-daily tea breaks in the Market Fair gave Summit attendees time to relax and socialize with other SBCC professionals.





POSTER PRESENTATIONS

The SBCC Summit hosted 120 poster presentations from participants all over the world. Each poster was carefully chosen by a panel of expert reviewers, demonstrating a variety of projects, landmark research, and programs. Poster presenters made themselves available for questions or to discuss their findings during lunch and tea breaks.





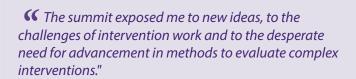






Conference is one conference every SBCC practitioner needs to attend. Every session was very relevant to my job and I wish I could be at many places at the same time to attend all breakout sessions. It was so inspiring to see many SBCC practitioners under one roof; everyone I talked to had a thing to offer to make my practice get one more inch or more further."

Chancy Mauluka SBCC Advisor CCP Malawi



Naira Kalra Doctoral Student Johns Hopkins Bloomberg School of Public Health







PARTICIPANT FEEDBACK

During the Summit, the HC3 project implemented a monitoring and evaluation plan to collect participants' thoughts and comments about the event. On-site surveys were conducted and evaluated during the Summit, as well as online surveys administered after the event.

The results from the demographic sections of the surveys showed the diversity among attendees and the range of countries represented.

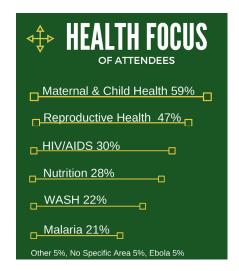
Attendees from 50 countries were present at the Summit, with just under two-thirds of attendees coming from a country in Asia or Africa. The highest proportion of attendees came from the US and Ethiopia.

Results from the survey show that attendees were very happy with the summit. Over 90% agreed with all of the following statements: "Summit reinforced my skill or capacity," "Summit had innovative content", "Summit was hosted at an appropriate facility," "[The attendee] intend[s] to use what [he/she] learned," "Networking opportunities were valuable," and "Summit was engaging."

Open-ended questions in the survey received lots of positive feedback, highlights of which are quoted in this section.

Overall, responses to these questions indicated that attendees enjoyed the summit and found it useful, especially valuing the opportunity to share their work while learning about the work of others.

The chances to network were also commonly cited as one of the best and most useful parts of the Summit. ☼ 753 ATTENDEES
 ⑤ 59 SESSIONS
 ⑨ 50 COUNTRIES
 廿 40 EXHIBITIONS
 ➡ 120 POSTERS







A social media campaign, primarily on Facebook and Twitter, allowed Summit attendees to connect digitally, both with other attendees and with those in the SBCC community not able to attend. On Twitter alone, the #SBCCSummit hashtag received more than 2,500 tweets during the three days of the Summit, with more than 1,750,000 impressions.

IN THEIR OWN WORDS...

"I had an opportunity to meet people from all over the world and the issues presented were crucial."

"It was a great experience. [I] loved having thousands of passionate SBCC people together talking collectively about their work, lessons learned and the way forward.

"It was a real eye opener, so

many of us, doing similar

work, amazing."

"Inspiring keynotes of the speakers at the plenary

"The networking was really good. It was amazing to have such a good worldwide participation. That was an absolute high of the summit."

DIGITAL STATS



Over 2,500 tweets were sent with #SBCCSummit from January 27-March 31, 2016. for a reach of 1,798,991. (Reach = unique individuals who received timeline deliveries of hashtagged messages.)



13,758 unique visitors came to the SBCC Summit website. (Aug 1, 2015 - Feb 29, 2016)

every morning were moving."

> "[The Summit was] not only focused on entertainment but also the power of engaging communities."

"My biggest take away from the Summit: Learn, Re-Learn, and Keep Learning..."



SUMMIT SCHOLARSHIPS

The Summit offered a number of scholarships for Master's and Doctoral-level students and SBCC field practitioners, covering all expenses for the three-day event. Abstracts and essays were submitted from around the world, and a total of 16 scholarships were awarded – 13 to practitioners and three to students interested in SBCC.

Fifteen of the scholarship recipients were from developing countries, helping ensure that the Summit included a variety of voices and viewpoints.

Following the Summit, scholarship recipients reflected on their experiences in a series of blog posts, all available on the Summit website: http://sbccsummit.org/.

BLOG POSTS

Reflections on the SBCC Summit

by Darriel Harris Project Officer, Baltimore Food and Faith Project, Johns Hopkins Center for a Livable Future

A Feeling of Homecoming at the SBCC Summit

by Naira Kalra Doctoral Student, Johns Hopkins Bloomberg School of Public Health

Suggestions for the Next SBCC Summit from a Researcher's Perspective

by Mohammed Umer Doctoral Candidate, Tulane University School of Public Health

Outcome of the First SBCC Summit; Highlighting the Success of Malaria SBCC

by Usman Usman Behavior Change Communication Advisor, FHI 360 Nigeria

Thoughts on the SBCC Summit

by Adelaida Trujillo Director, Citurna Producciones/ Imaginario

Big Ideas from the SBCC Summit 2016

by Adnan R Amin Managing Director & CEO, Unisocial Limited, Bangladesh

First SBCC Summit 2016: Provides Direction to SBCC Activities

by Kiran Bam SBC Specialist, Saath-Saath Project (SSP)/FHI 360 Nepal

Learn, Re-Learn, and Keep Learning...

by Rajendran Jeevanandham Nalamdana, India

The International SBCC Summit - The Much Awaited One

by Nirmalya Mukherjee Director, MANT, India

An Afterthought: Looking into the Potentials

by Yasmin Khan Program Director, Bangladesh Center for Communication Programs (BCCP)

Rwenzori Center for Research and Advocacy Executive Director Reflects on SBCC Summit

by Jostas Mwebembezi Executive Director, Rwenzori Center for Research and Advocacy

Mind Blowing Experience at the SBCC International Conference

by Chancy Mauluka SBCC Advisor, SSDI-Communication, CCP-Malawi

From Coast to Coast: Tried and Tested SBCC Principles

by Sylvia Mariettah Katende SBCC Coordinator, Uganda Health Marketing Group



SUMMIT CLOSING

The closing of the inaugural SBCC Summit – led by Warren Feek, Executive Director of the Communication Initiative – began with an open discussion on next steps for the SBCC community. Panelists from USAID, UNICEF, CCP, BBC Media Action, and Soul City presented their main lessons and takeaways from the Summit, before opening up the discussion to the broader community.

Kojo Lokko celebrated the success of the Summit before introducing Ben Lozare, Director of Training and Capacity Building at CCP. Ben's rousing address looked to the future, encouraging everyone to remain future-oriented in all their SBCC programs.

Dr. Lozare also encouraged everyone to continue the conversations and connection of the Summit on platforms such as HC3's Springboard or the Communication Initiative, and to continue to grow SBCC in their own communities. The 2016 SBCC Summit was officially closed by Kirsten Böse, HC3's Project Director.



•• Over the past 20 years, we've seen massive growth in this field. ... This summit reflects and adds to that growth in scale, depth and importance."

Warren Feek
Executive Director
Communication Initiative



We have many voices, but I believe we need one voice when we speak about the power of our work and the critical importance of our field. We need one voice to advocate successfully for and elevate the role of SBCC in the development agenda. And we need a strategy to do so – to get us from where we are today to what we want to be in the future – a strong and powerful community of social and behavior change champions."

Susan Krenn Executive Director Johns Hopkins Center for Communication Programs

Yes, there are many challenges and challenges that sometimes seem to threaten the identity of this field of work, however, we should not shy away from these challenges - quite the contrary, try to address them heads on. That is, pretty much, what this summit has been doing over the past three days. And this summit is also an opportunity ... to link these discussions with what's going on out there in the world."

Susana Sottoli UNICEF







I think we need to really reflect on what have been our stumbling blocks - and I think there have been many. And I think, especially for me, as an implementer in the south, I want us to articulate what some of those stumbling blocks and frustrations have been. And also to articulate how do we become better advocates about our field."

Lebo Ramafoko Executive Director Soul City Institute



discussion this week and really exciting presentations and a lot of passion, a lot of creativity, dedication and appreciation for the commitment to and the power of communication for social change and for development."

Kama Garrison USAID



Certainly, I think that the response to the Summit has been overwhelming and demonstrates that we had been yearning for something like this."



If there was one compelling conclusion from this conference it was that communication remains hugely under prioritized, under coordinated and under acknowledged by the rest of the development, and especially the public health community."

James Deane
BBC Media Action

Kojo Lokko Deputy Director Health Communication Capacity Collaborative

We need to think and act like architects. Let's think less like historians - always thinking about what we've done. Let's think less like journalists. ... What I mean is we keep talking about what we're doing now, what the lessons are – instead let's be future-oriented and see what we can create."

Ben Lozare

Director, Capacity Strengthening and Training Johns Hopkins Center for Communication Programs





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APPENDIX I: SUMMIT AGENDA

Monday, February 8

08:30-10:30 Plenary with Keynote

10:30-11:00 Tea Break with Poster Presentations and Market Fair

11:00-12:30 *Technical Sessions*

- Building Blogs: From Micro to Macro
- Connecting the Dots... Climate Change, Nutrition and Agriculture
- Ebola: In the Mind of an Epidemic
- Entertainment-Education: Stories from Around the World
- From the Pulpit to the People

Blue Sky Session: What Counts as Evidence?

12:30-14:00 Lunch

14:00-16:00 Technical Sessions

- A Marvelous Mix of Methods
- Focus on Youth
- · Intimate Talk: Couples and Family Health

Skills-Building Workshops

- Capacity Strengthening Part I: Making PROGRES Toward Institutional Sustainability
- Communication for Transformation: Action Media Global Experience and Practice
- Expanding the Menu of Formative Research Methods for Gender Transformative SBCC
- How to Leverage a Community Video Approach for Health, Nutrition and Agriculture
- Moving from Innovation to Impact Sustainable Development Goals ICT Playbook

16:00-16:30 Tea Break with Poster Presentations and Market Fair

16:30-17:30 Comm Talks!

17:30-19:30 Official SBCC Summit Opening Ceremony and Reception

Tuesday, February 9

08:30-09:30 Plenary with Keynote

09:30-11:00 *Preformed Panels*

- Community Mobilization De-mystified as a Social Behavior Change Approach
- From Silicon Valley to Sierra Leone: Applying Human-Centered Design Principles to Change Behaviors and Community Social Norms for Better Maternal, Newborn and Child Health
- Mainstreaming Global Theories of Health Communication
- Risk and Emergency Communication in Humanitarian Settings
- Using ICT Tools in SBCC Programming



11:00-11:30 Tea Break with Poster Presentations and Market Fair

11:30-13:00 Technical Sessions

- Across the Spectrum of Family Planning
- Coordinating for Maximum Malaria Impact
- · Gender in a New Generation
- Support for Infant and Young Child Feeding
- The Social Media in Social Change

Blue Sky Session: How Do We Describe SBCC?

13:00-14:00 Lunch

14:00-16:00 Technical Sessions

- Local Solutions Solve Local Problems
- Piecing the Puzzle Together
- Storytelling | Fun & Games
- Skills-Building Workshop Capacity Strengthening Part 2: Mobilizing Resources for Financial Sustainability
- Fun and Games Changing Lives: SBCC in Low Literacy Settings
- Scratch to Sketch: A Roadmap to Develop Effective Message
- Seeing is Believing: How to Use Direct Observation and other Ethnographic Methods for WASH SBCC Programming
- Taking SBCC to Scale: A Comprehensive Approach for Delivering Results

16:00-16:30 Tea Break with Poster Presentations and Market Fair

16:30-17:30 Comm Talks!

17:30-18:00 Closing Plenary and Daily Wrap Up

18:30-20:00 Multimedia Showcase

Wednesday, February 10

08:30-09:30 Plenary with Keynote

09:30-11:00 *Preformed Panels*

- Communication for Development (C4D) in Action: Driving Social and Behaviour Change with and for Children across Programme Contexts
- Complexity Matters: Aligning the Evaluation of Social and Behavior Change with the Realities of Implementation
- Exploring the Future of SBCC Interventions
- ICA Members in Action: Findings From the Field
- Translating a Global Toolkit for Local Solution

11:00-11:30 Tea Break with Poster Presentations and Market Fair

11:30-13:00 *Technical Sessions*



- Communication as a Tool Against Violence
- Malaria in the Not So New Millennium
- Moving the Message Through Mobile
- Provider Connection
- Refining the Focus for HIV

Blue Sky Session What Changes Can We Anticipate in SBCC? **Event** Lion's Den

13:00-14:00 Lunch

14:00-16:00 *Technical Sessions*

- Getting Men Through the Door: Best Practices for VMMC
- Massaging the Message
- The Right Stuff for the Right Start
- Skills-Building Workshop Capacity Strengthening Part 3: Finding and Filling SBCC Gaps
- Developing Materials and Products for Effective Social and Behavior Change Communication
- People, Places, Ideas: SBCC Storytelling through Narrative and Documentary Films
- Strengthening SRH SBCC Programs for Urban Adolescents

16:00-18:00 Town Hall and Closing

Thursday, February 11

08:30-12:00 Field Trip with the Ethiopian Federal Ministry of Health



APPENDIX II: THE EVOLUTION OF SBCC LEADING TO THE "ADDIS DECLARATION"

For as long as humans have come together to form communities, communication has been used to connect with, inform, mobilize, persuade and express ourselves to each other. In the modern era of communication studies that dates back almost 100 years to the first research on whether or not motion pictures would corrupt youth (The Payne Fund Studies, 1929-1932), how communication can or should be nurtured and mobilized for social good has been a subject of fierce debate. How we label the purposive use of communication has shifted over the years (viz., modernization, devcomm, commdev, BCC, CfSC, C4D, SBCC) to emphasize different aspects of the process and orientations toward its use.

In recent years, some in the development sector have criticized the prominent focus on communication as the main engine of social change when other processes like community mobilization or the introduction of new technologies can cause significant change in their own right. Challenges to a communication-oriented paradigm also have come from non-communication fields like demography, epidemiology and biomedicine that see greater value in other strategies for change.

This historical brief is an attempt to summarize common perspectives on the role of communication in social and behavior change at the time of the First International Summit on Social and Behavior Change Communication in Addis Ababa, Ethiopia, (February 2016) and to suggest future challenges and directions for a growing SBCC global community of practice.

HISTORICAL BACKGROUND

In the 1940s, the instrumental use of communication to achieve national/global, social and political objectives first emerged as a field of academic research and program practice. Some of the earliest formulations of the role of communication – especially of mass media – in modernization and national development (Schramm, 1948, 1964; Lerner, 1958; Rogers, 1962) grew out of the post-WWII Marshall Plan and Cold War era. Those formulations established an interest in how media could help individuals and societies become modern ("modern" being implicitly and, often, explicitly defined by the Western, democratic, industrialized model). UNESCO was an early institutional player in this process with a series of publications and support for research beginning around 1950 on the state of mass communication and mass media policies in countries around the world. UNESCO investments in pilot studies of rural radio for the masses in the 1950s-1960s in India, Pakistan and Burma directed attention to the role of communication in marginalized communities (Mathur & Neurath, 1959; Schramm, 1964). The phrase "development communication" was coined around this time.

Besides UNESCO, one of the first funders of development communication on a large scale was USAID, which supported a series of media-based educational studies in American Samoa, El Salvador and Mexico in the 1960s-1970s (Mayo et al., 1974; Ray et al., 1978) under the influence of Wilbur Schramm during his tenure at the Stanford University Institute for Communication Research and at the East-West Center in Hawaii. But by the mid-1970s, the modernization approach to development was being widely criticized for its pro-Western bias and for overlooking the growing global dominance of media by powerful Western telecommunications institutions. A 1975 conference entitled "Another Development," sponsored by the Dag Hammarskjöld Foundation attempted to redirect the dialogue around international aid and development toward approaches that would be needs-oriented, endogenous in origin, self-reliant, ecologically sound and structurally transformative (McAnany 2012).



Debate about the importance of local control over and participation in communication programs became increasingly animated in the 1970s and 1980s, fueled by neo-Marxist arguments from Paolo Freire (1970), Juan Diaz Bordenave (1976), Luis Ramiro Beltran (1976) and groups like the UNESCO-supported CIESPAL (International Center of Higher Studies in Communication for Latin America) in Ecuador, which funded research and hosted meetings on devcomm theories, policies and practices. An East-West Center conference in 1987 called for the formal incorporation of Freirean principles into a new paradigm of participatory communication that emphasized the people's control over local power structures and liberation/empowerment of marginalized publics at the structural level, and consciousness-raising, self-reliance and knowledge sharing at the individual level (White, Nair & Ascroft, 1994). Terms reflecting this perspective included "development support communication" and "participatory communication for development."

While this debate catalyzed and intensified programmatic emphasis on grassroots communication, international donor agencies like USAID were beginning to fund centrally planned experiments in the use of communication for health, such as the Mass Media & Health Practices project (1978-1983), led by the Academy for Educational Development, in Honduras, Peru, Ecuador, The Gambia and Swaziland. This project overlapped with the Population Information Program (1972-1992) and was followed in succession by the Population Communication Services project (1990-2002), the Health Communication Partnership project (2002-2007) (all three led by the Johns Hopkins Center for Communication Programs [CCP]), the C-Change Project (2007-2012) led by the Academy for Educational Development and FHI/360, and the Health Communication Capacity Collaborative (2012-2017), again led by CCP. Other projects during this same era experimented with communication strategies in similar ways to address other social issues (e.g., AIDSCOMM, 1987-1993 for AIDS prevention and GreenCom I & II, 1993-2006, for environmental resource management, all led by the Academy for Educational Development).

The emphasis on donor-funded health initiatives shifted somewhat with the authorization in 2003 of the President's Emergency Plan for AIDS Relief (PEPFAR). Since then, approximately \$65 billion have been allocated for HIV/AIDS prevention, treatment and care, much of it redirected from population, MCH and other development-related budgets. Management of programs under this mandate fell increasingly to the U.S. Centers for Disease Control and Prevention, which prioritized biomedical solutions to the HIV/AIDS threat, thus de-emphasizing and reducing funding for behavioral solutions, including communication, on the grounds of "soft" evidence of the effectiveness of communication to reduce disease. The result of these competing agendas, perspectives and priorities has been a certain amount of insecurity in some quarters of the SBCC community and the desire for a shared vision and concerted effort to increase advocacy for SBCC in global development.

The past decade or so also has seen intensified efforts to include participatory, grassroots and community-initiated elements in strategies for change. Prior to this period, the primary strategic emphasis was often on mass communication (to a somewhat greater extent than interpersonal or community-based communication) and on changing health-related and other behaviors that offered individual/household benefits, rather than on changing fundamental social, economic and political inequities that weakened health and development progress in the first place.

Critiques of this tendency were highlighted in two other important global conferences: the Bellagio Conference on Communication and Social Change (1997) sponsored by the Rockefeller Foundation and the World Congress on Communication for Development (2006) sponsored by the World Bank and the UN Food and Agriculture Organization. Both conferences – a decade apart – stressed a focus on social rather than (merely) behavior change. The Bellagio Declaration of Principles (see Appendix III) took a particularly strong stance against behavior change communication (BCC) as too narrow and inherently manipulative,



preferring to label the field as "Communication for Social Change." The Rome Consensus, signed at the end of the World Congress a decade later, describes many of the same principles as the Bellagio Declaration, but returns to use of the "Communication for Development" label (see Appendix B).

Consequently, in the years since the World Congress and partly through the leadership of the C-Change Project, a greater emphasis on social change has become typical of large-scale programs. These now are more likely to focus on shifting social norms and other social and structural determinants that facilitate or impede change at the individual and household level – and in sectors other than just health, including gender, poverty reduction, education, human rights, political participation and the environment. This has led to a widespread use of the label "social and behavior change communication" (SBCC), reflected in the title of the 2016 Addis Summit.



APPENDIX III: CONFERENCE DECLARATIONS

This section contains the declarations of principle produced by two global conferences that over the past 20 years helped create and shape the direction of SBCC: the 1997 Bellagio Conference on Communication and Social Change and the 2006 World Congress on Communication for Development.

(1) Bellagio Conference on Communication and Social Change (1997)

http://web.asc.upenn.edu/gerbner/archive.aspx?sectionID=114&packageID=560

Declaration of Principles:

Vision of Communication for Social Change

We recognize that the practice and systems of communications have the power to transform lives, and to influence the behavior of organizations, institutions, communities and nations. We also believe that for too long the processes and systems of communications have been concentrated within the power of too few in industrialized countries who use such power to homogenize cultures and ideologies. Recognizing this, and that communication systems and processes are not easily accessible to all the world's people, we the following joined together to propose a vision of communications for the 21st century thaanimates our collective commitment to positive social change.

This vision is shaped by the following principles:

- 1. Every voice has the right to be heard and should have the means to be heard.
- 2. Communications systems and technology must, therefore, be affordable, accessible to all.
- 3. To work best, the process of communication must allow a free flow from many to many, rather than from one to many.
- 4. Communities must play an essential role in finding their own communications solutions and developing their own communications strategies.

We believe that unmediated communication processes, in which all of us may communicate freely, directly and horizontally with one another, will endow each of us with a greater sense of our own possibilities, enrich our cultures through direct contact with other cultures, create a conversation without limits in which each voice may be heard equally, and from which may evolve enlightened societies that value tolerance, self-determination and active participation.

We believe in the power of strong, vivid and personal images to transform consciousness. And we believe that the images and stories that define and shape a group, a community or a people are primarily theirs alone to make. For we believe that the cultures of the world need not be subsumed by those cultures of industrialized nations which dominate control of channels of communications.

We believe that ideas with the power to enhance our lives are arising from voices too long excluded from the larger human discourse. These are too often the voices of people from the edges of the world, from the margins of society. They may own neither presses nor broadcasting towers, but they do have the capability of taking responsibility for their futures. We've seen how many previously marginalized people, given the opportunity, can create solutions for complex world problems, and may, in fact, well possess the energy and vision that will help ensure the future for all of us.

We believe that communication is essential for strengthening cultural identity and human values,



encouraging further world development, allowing people in communities throughout the world to participate in their own governance, to organize, and to shape our future world.

Moved to action by these principles, we have agreed to work together toward free and open access of all people to the methods, means and tools of communication, to reach out to communities around the world for their ideas and their strength, and to embrace and promote new understanding and new knowledge from wherever it might arise.

Having traveled from 12 countries in late April of 1997 to meet together in Bellagio, Italy, we are:

Alan Alda, actor/writer/director, New York, NY, U.S.A.

Marlene Arnold, The Leadership Institute, Millersville, PA, U.S.A.

Michael Backes, Rocket Science Games, Sherman Oaks, CA, U.S.A.

Oguz Baburoglu, Sabanci University, Istanbul, Turkey

John Perry Barlow, Electronic Frontier Foundation, Pinedale, WY, U.S.A.

James Deane, Panos Institute, London, England

George Gerbner, Temple University, Philadelphia, PA, U.S.A.

Sushmita Ghosh, Ashoka: Innovators for the Public, Calcutta, India

Julie Gipwola, Radio Uganda, Kampala, Uganda

Denise Gray-Felder, The Rockefeller Foundation, New York, NY, U.S.A.

Alfonso Gumucio, Guatemala City, Guatemala (formerly Port-au-Prince, Haiti)

Myoung Joon Kim, Videazimut, Seoul, Korea*

Jim Lowenthal+, Morocco Trade and Development Services, Rabat-Agdal, Morocco

Susan Mach, LS Mach Creative Services, Kearny, New Jersey, U.S.A.

Matthew Moonieya, Moonieya & Associates, East London, South Africa

Jenny Richards, TVE International, London, England

Marcia Sharp, Millenium Communications, Inc., Washington, D.C., U.S.A.

Nadya Seryakova, New Perspectives Foundation, Moscow, Russia *

Julie Su, Asian Pacific American Legal Center, Los Angeles, CA, U.S.A.

Adelaida Trujillo, Citurna Films, Bogota, Colombia

Galina Venediktova, Women, Law & Development International, Arlington, VA,

(Currently U.S.A.; native of Russia)

Muhammad Yunus, Grameen Bank, Dhaka, Bangladesh

(2) World Congress on Communication for Development (2006)

The Rome Consensus

Communication for Development – A Major Pillar for Development and Change

Communication is essential to human, social, and economic development. At the heart of Communication for Development is participation and ownership by communities and individuals most affected by poverty and other development issues. There is a large and growing body of evidence demonstrating the value of Communication for Development.

Below are a few examples of that body of evidence presented at the WCCD:

• In 1959 a study of 145 rural radio fora in India found that forum members learned much more about the topics under discussion than non-forum members. In the words of the researcher, "Radio farm forum as an agent for transmission of knowledge has proved to be a success beyond expectation.

^{*} Translation by Hye-June Park and Edward Kushelov



Increase in knowledge in the forum villages between pre- and post-broadcasts was spectacular, whereas in the non-forum villages it was negligible. What little gain there was in nonforum villages, occurred mostly in those with radio" [Data presented by Dr. Bella Mody from Neurath, P. (1959), "Part Two: Evaluation and Results," in J. C. Mathur and P. Neurath (Eds.), An Indian Experiment in Farm Radio Forums (pp. 59–121), Paris: UNESCO].

- The participatory communication approach adopted in Senegal led to significant reductions in the practice of female genital cutting (FGC). Since 1997, 1,748 communities in Senegal have abandoned FGC. These represent 33 percent of the 5,000 communities that practiced FGC at that time [Tostan data, presented at the WCCD, 2006—http://www.tostan.org].
- In Uganda a national and local communication process related to the corruption of centrally allocated public funds for education at the local level in schools resulted in a very significant decrease in the level of funds that did not reach that local level—from 80 percent "lost" to only 20 percent lost [Reinikka, R., and J. Svensson, "The Power of Information," Policy Research Working Paper # 3239, 2004].
- Communication programs are linked to significant reductions in Acute Respiratory Infection—ARI—in Cambodia. Since the communication campaign started in 2004, awareness of ARI grew from 20 percent to 80 percent and the reported incidence of ARI halved [BBC World Service Trust, Film on Health Communication, presented at the WCCD, 2006 http://www.bbc.co.uk/mediaselector/check/worldservice/meta/dps/2006/10/061027 health wst?size= 16x9&bgc=003399&lang=enws&nbram=1&nbwm=1].
- Use of mobile phones and other communication techniques for farmers to obtain information on market prices in Tanzania resulted in farmers increasing the price they receive per ton of rice from US\$100 to US\$600. A \$200,000 investment resulted in \$1.8 million of gross income [The First Mile Project, presented at the WCCD, 2006—http://www.ifad.org/rural/firstmile/FM_2.pdf].

Development Challenges

As of 2006, it is estimated that 1.3 billion people worldwide still live in absolute poverty. Even though many countries have experienced considerable economic development, far too many remain worse off in economic and social terms.

Nelson Mandela reminds us that "Poverty is not natural—it is man-made and it can be overcome and eradicated by the actions of human beings." People's rights to equality and to communicate are protected and advanced in the Universal Declaration on Human Rights. Related to poverty and rights there are other very considerable and related challenges. These are delineated in the Millennium Development Goals (MDGs), which are often the benchmark for decision making in civil society, national governments, and the international development community.

Achieving improved progress on these issues requires addressing some very sensitive and difficult challenges: respect for cultural diversity, self-determination of people, economic pressures, environment, gender relations, and political dynamics—among others. It also highlights the need to harmonize communication strategies and approaches, as indicated by the 9th UN Roundtable on Communication for Development and in other international fora. These factors often complicate and threaten the success of overall development efforts in the local, national, and international arenas. It is the people-related issues that are the focus of Communication for Development.

Communication for Development

Communication for Development is a social process based on dialogue using a broad range of tools and methods. It is also about seeking change at different levels including listening, building trust, sharing knowledge and skills, building policies, debating and learning for sustained and meaningful change. It is not public relations or corporate communication.



Strategic Requirements

Development organizations must assign a much higher priority to the essential elements of Communication for Development process, as shown by research and practice:

- The right and opportunity people have to participate in the decision-making processes that affect their lives
- Creating opportunities for sharing knowledge and skills
- Ensuring that people have access to communication tools so that they can themselves communicate within their communities and with the people making the decisions that affect them—for example community radio and other community media
- The process of dialogue, debate, and engagement that builds public policies that are relevant, helpful
 and which have committed constituencies willing to implement them—for example on responding to
 preserving the environment
- Recognizing and harnessing the communication trends that are taking place at local, national, and international levels for improved development action—from new media regulations and ICT trends to popular and traditional music
- Adopting an approach that is contextualized within cultures
- Related to all of the above, assigning priority to supporting the people most affected by the
 development issues in their communities and countries to have their say, to voice their perspectives,
 and to contribute and act on their ideas for improving their situation—for example indigenous
 peoples and people living with HIV/AIDS

In order to be more effective in fighting poverty and meeting the other MDGs, the Communication for Development processes just outlined are required in greater scale and at more depth, making sure that the value-added of such initiatives is always properly monitored and evaluated.

Long-Term Foundation

These processes are not just about increasing the effectiveness of overall development efforts. They are also about creating sustainable social and economic processes. In particular:

- Strengthening Citizenship and Good Governance
- Deepening the communication links and processes within communities and societies Those are essential pillars for any development issue.

Recommendations

Based on the arguments above, in order to make much more significant progress on the very difficult development challenges that we all face, we recommend that policy makers and funders do the following:

Overall national development policies should include specific Communication for Development components.

- 1. Development organizations should include Communication for Development as a central element at the inception of programs.
- 2. Strengthen the Communication for Development capacity within countries and organizations at all levels. This includes people in their communities, Communication for Development specialists, and other staff, including through the further development of training courses and academic programs.
- 3. Expand the level of financial investment to ensure adequate, coordinated financing of the core elements of Communication for Development as outlined under Strategic Requirements above. This includes budget line[s] for development communication.
- 4. Adopt and implement policies and legislation that provide an enabling environment for Communication for Development— including free and pluralistic media and the right to information and to communicate.



- 5. Development communication programs should be required to identify and include appropriate monitoring and evaluation indicators and methodologies throughout the process.
- 6. Strengthen partnerships and networks at international, national, and local levels to advance Communication for Development and improve development outcomes.
- 7. Move toward a rights-based approach to Communication for Development.

Conclusion

As Nelson Mandela highlighted, it is people that make the difference. Communication is about people. Communication for Development is essential to making the difference happen.

The Participants
World Congress on Communication for Development
Rome, Italy
October 27, 2006

Presentations, further details and videos of Summit events, as well as SBCC tools and resources, are available on the SBCC Summit website at http://sbccsummit.org/