Social and behavior change (SBC) for service delivery is distinguished by its focus on service interactions: the use of SBC to motivate clients to access services, to improve the client-provider interaction, and to boost adherence and maintenance. This process uses the Circle of Care, a holistic model to show how SBC can be applied across the service continuum—before, during, and after services—to improve health outcomes.

In the After Stage, once services are delivered, clients are often faced with practicing a new behavior or remaining motivated to maintain that behavior, such as taking a daily oral contraceptive pill or returning to scheduled visits to receive a contraceptive injection. SBC interventions encourage clients to stay engaged following their initial provider interaction, while supporting the systems necessary to keep those clients connected to family planning (FP) and reproductive health services. During the After Stage, SBC interventions can be used to:

- Reinforce linkages—Support the development and promotion of referral systems that help to connect clients both from their homes or communities to
health care facilities and from one service to another

- Support behavioral maintenance—Address contextual issues, such as interpersonal relationships, that might negatively influence whether a client continues to practice FP
- Enhance follow-up—Create a supportive environment that encourages FP clients to stay engaged after their initial interaction with a provider

The following 12 articles selected from the SBC for Family Planning Evidence Database show that SBC boosts adherence and maintenance in the After Stage. The SBC for Family Planning Evidence Database, updated in November 2019, compiles and highlights key SBC successes spanning over 20 years (1995–2018). The database presents a collection of over 250 articles describing interventions or studies on low- and middle-income countries addressing FP challenges through SBC approaches.

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**SBC reinforces linkages** by supporting the development and promotion of referral systems to connect clients from their homes or communities to health care facilities and from one service to another.

- **Effects of a community outreach program for maternal health and family planning in Tigray, Ethiopia**
  Bang, K. S., Chae, S. M., Lee, I., Yu, J., & Kim, J.
  Ethiopia | 2018

- **Impact of a “diagonal” intervention on uptake of sexual and reproductive health services by female sex workers in Mozambique: A mixed-methods implementation study**
  Lafort, Y., Lessitala, F., de Melo, M. S. I., Griffin, S., Chersich, M., & Delva, W.
  Mozambique | 2018

- **Community resource centres to improve the health of women and children in informal settlements in Mumbai: A cluster-randomised, controlled trial**
  More, N. S., Das, S., Bapat, U., Alcock, G., Manjrekar, S., Kamble, V., ... Osrin, D.
  India | 2018

- **Engaging with community-based public and private mid-level providers for promoting the use of modern contraceptive methods in rural Pakistan: Results from two innovative birth spacing interventions**
  Azmat, S. K., Hameed, W., Hamza, H. B., Mustafa, G., Ishaque, M., Abbas, G., ... Temmerman, M.
  Pakistan | 2016

- **Linking HIV & family planning services to improve dual methods of contraception among women infected with HIV in Mumbai, Maharashtra, India**
  Joshi, B., Velhal, G., Chauhan, S., Kulkarni, R., Begum, S., & Linkage Study Team
  India | 2016

- **Meeting postpartum women’s family planning needs through integrated family planning and immunization services: Results of a cluster-randomized controlled trial in Rwanda**
  Dulli, L. S., Eichleay, M., Rademaker, K., Sortijas, S., & Nsengiyumva, T.
  Rwanda | 2016

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SBC supports behavioral maintenance by addressing contextual issues, such as interpersonal relationships, that might negatively influence whether a client continues to practice FP.

- **Gender-transformative Bandebereho couples’ intervention to promote male engagement in reproductive and maternal health and violence prevention in Rwanda: Findings from a randomized controlled trial**
  Doyle, K., Levto, R. G., Barker, G., Bastian, G. G., Bingenheimer, J. B., Kazimbaya, S., ... Shattuck, D.
  Rwanda | 2018

- **Cluster randomized controlled trial evaluation of a gender equity and family planning intervention for married men and couples in rural India**
  Raj, A., Ghule, M., Ritter, J., Battala, M., Gajanan, V., Nair, S., ... Saggurti, N.
  India | 2016

SBC enhances follow-up by creating an environment supportive of FP clients staying engaged after their initial interaction with a provider.

- **Involving male partners in maternity care in Burkina Faso: A randomized controlled trial**
  Daniele, M. A. S., Ganaba, R., Sarrassat, S., Cousens, S., Rossier, C., Drabo, S., ... Filippia, V.
  Burkina Faso | 2018

- **Providing support to pregnant women and new mothers through moderated WhatsApp groups: A feasibility study**
  Patel, S. J., Subbiah, S., Jones, R., Muigai, F., Rothschild, C. W., Omwodo, L., ... Nour, N. M.
  Kenya | 2018

- **The Empower Nudge lottery to increase dual protection use: A proof-of-concept randomised pilot trial in South Africa**
  Galárraga, O., Harries, J., Maughan-Brown, B., Cooper, D., Short, S. E., Lurie, M. N., & Harrison, A.
  South Africa | 2018

- **Does integrating family planning into HIV services improve gender equitable attitudes? Results from a cluster randomized trial in Nyanza, Kenya**
  Kenya | 2016

Summaries of these articles and additional studies on the influence of SBC on attitudes and behaviors among clients and providers are accessible through the [SBC for Family Planning Evidence Database](https://sbcforfamilyplanning.org/). The six SBC Evidence Databases, which together host over 600 articles, compile and highlight key SBC successes spanning over 20 years.

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