



HEALTH SYSTEM STRENGTHENING EVIDENCE GAP MAP SOCIAL AND BEHAVIOR CHANGE

INTRODUCTION

Health system strengthening (HSS) interventions are most effective in supporting health system capacity, performance, and sustainability when they apply approaches that are evidence based. To promote such approaches, there is a global need to systematically capture the full spectrum of emerging evidence on the effects of HSS in improving health system outcomes. USAID’s HSS Learning Agenda frames efforts to continuously gather evidence, learn, and adapt by articulating six Learning Questions that reflect current HSS priorities across the programming cycle.

In support of that Learning Agenda, the USAID Local Health System Sustainability Project (LHSS) conducted a comprehensive mapping exercise to curate existing evidence for each of the six Learning Questions and identify opportunity areas for strengthening the evidence base. The project accessed the PubMed database and other targeted gray literature websites to identify, screen, review, and catalog relevant evidence from peer-reviewed and gray articles from the past five years. The curated evidence is presented in an interactive Evidence Gap Map.

This two-pager is part of a series of six summarizing LHSS’s findings from the evidence gap mapping process for USAID’s six Learning Agenda questions. The series does not aim to answer the Learning Questions, but rather provides a high-level characterization of the identified state of the evidence for each question. This two-pager focuses on USAID’s Learning Question 6, “*What are key behavioral outcomes that indicate a functioning, integrated health system? In what ways can integrated health system strengthening approaches explicitly include social and behavior change?*”

Health System Strengthening Evidence Gap Map

The Evidence Gap Map identifies existing literature examining the impact of health system strengthening on health outcomes. Evidence is organized around USAID’s Health System Strengthening Learning Agenda.

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What are the key behavioral outcomes that indicate a functioning, integrated health system? In what ways can integrated health system strengthening approaches explicitly include social and behavior change?

	Design, M&E, & Tools for SBC in HSS	Health System Drivers of Behavior	Integrating SBC in HSS
Equity	15	14	20
Quality	41	13	41
Resource Optimization	8	4	11
Resilience	7	3	13

OBJECTIVES

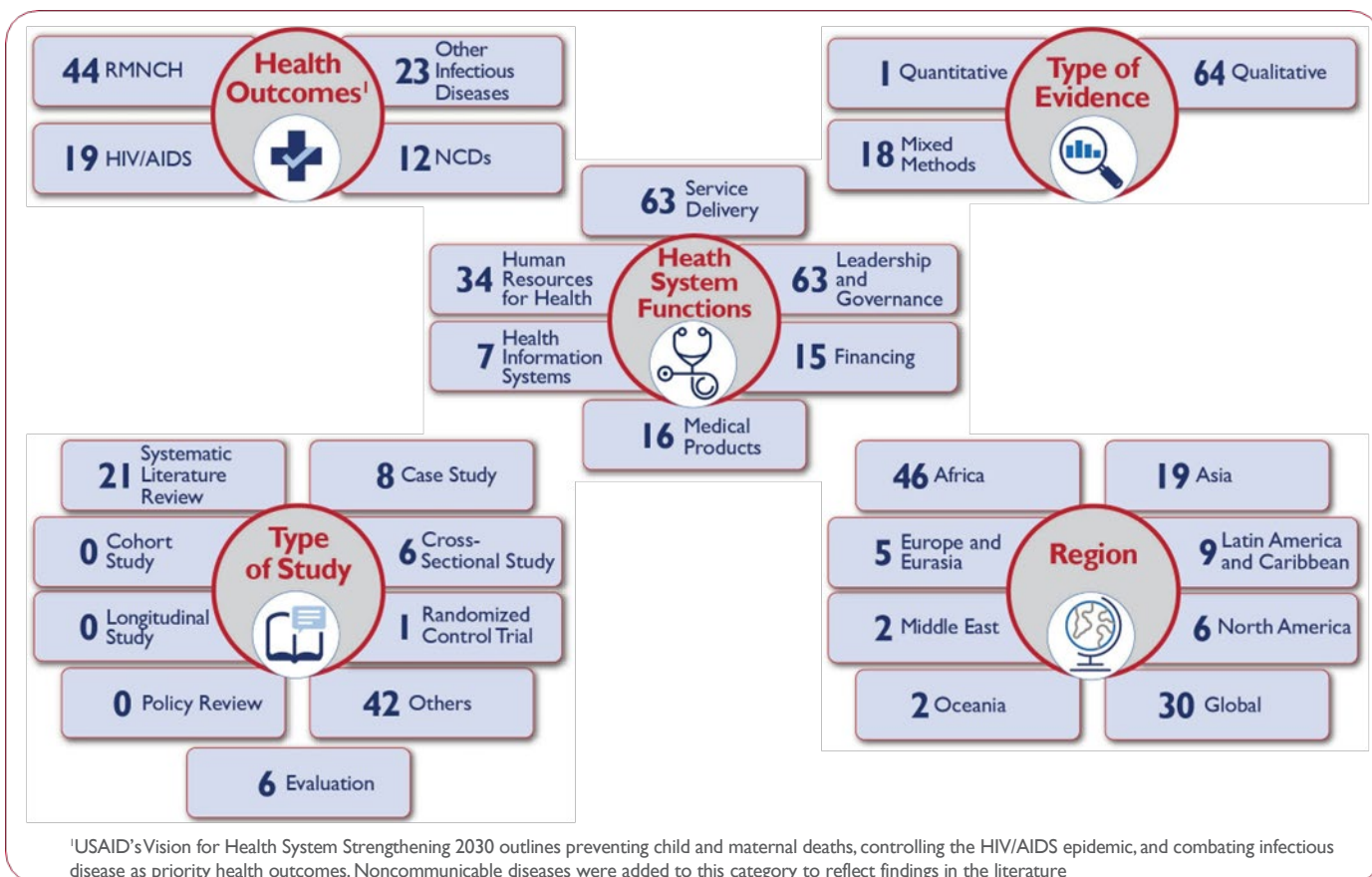
1. Provide a snapshot of the type, range, and extent of identified evidence related to Social and Behavior Change (Learning Agenda Question 6).
2. Provide a high-level summary of themes from the curated evidence as a starting point for users of the Learning Question 6 Evidence Gap Map.
3. Highlight gaps in the curated Learning Question 6 evidence to inform targeted HSS programming by governments, funders, and HSS practitioners.

KEY FINDINGS

Descriptive Analysis

LHSS’s Evidence Gap Map is organized around seven categories that serve as filters: Health Outcomes, Health System Functions, Region, Country, Type of Evidence, Type of Study, and Date Range. The mapping for the Social and Behavior Change Learning Question identified **83** relevant peer-reviewed and gray literature items published from 2017 to 2023. The figures below show the extent of findings in five of the categories.

Figure 1: Articles related to Social and Behavior Change disaggregated by number and type for Health Outcomes, Health System Functions, Type of Evidence, Type of Study, and Region categories of the Evidence Gap Map



Key Themes

- Societal and behavioral factors, including social determinants of health, community norms, and behaviors of health system actors, such as providers and policymakers, influence demand for and access to care. These factors should be explicitly targeted in HSS programming to improve health system performance and health outcomes.
- There is a need to utilize SBC approaches to strengthen the linkages between communities and health system-level actors such as managers, providers, and policymakers. This can be enabled through clear and intentional integration of participatory approaches that promote dialogue, co-creation, intersectoral-collaboration, accountability, and trust.
- There is strong evidence linking SBC and HSS in reproductive, maternal, newborn, and child health. The evidence suggests that SBC interventions are most effective when linked to existing behavioral theories intended to comprehensively target drivers of behavior at structural, societal, and individual levels.
- Embedding SBC experts and approaches in HSS interventions provides a strong foundation for resilient health systems. SBC approaches target and optimize key behaviors and norms among health system actors, thus facilitating more agile responses to and recovery from health emergencies and other health system shocks.

Gaps in the Literature

- Presently, HSS and SBC initiatives are largely fragmented. To bridge this gap, experts across both fields will need to utilize and apply existing HSS and SBC frameworks and approaches to help define the nexus between the two areas and enable more cohesive and integrated programming.
- There is a need to further incorporate SBC indicators related to social, structural, and systemic factors into HSS evaluation frameworks. This can facilitate measurement and learning about integrated HSS approaches as well as inform program design and implementation.
- There is limited evidence related to resource allocation for SBC in HSS. This impacts policymakers' and program implementers' ability to plan for and integrate SBC into HSS programming effectively and explicitly.
- Despite evidence indicating the importance of SBC in facilitating health system resilience, there is a need for guidance on how to operationalize and integrate critical aspects of SBC (i.e., targeted risk communication, population-based and audience-specific behavioral assessments, priority and/or high-impact behaviors) into HSS initiatives to advance disaster preparedness and emergency response policies and framework.

Explore the Evidence Further

Click [here](#) to access the curated evidence around the topic of Social and Behavior Change and learn more.

The LHSS Project wants to hear from you! If you are aware of relevant material that should be included in the Evidence Gap Map, please send it by filling out this [form](#).