Communication for Development (C4D) is a cross-sectoral strategy of UNICEF. In UNICEF India’s Country Program Action Plan for 2018-2022, C4D is weaved within programme outcomes and is accountable for 6 outputs within 6 outcomes and reports against 21 indicators.

C4D’s programme design is based on Social and Behaviour Change Communication (SBCC) - Gender framework of UNICEF India. The framework enlists six strategies—system strengthening, capacity development, building social capital, platforms and mega-partnerships for at-scale and convergent SBCC programming, targeted SBCC campaigns, evidence generation and knowledge management.

This report presents the results C4D has attributed or contributed to against the six outputs, 21 indicators and within the framework of the SBCC-Gender Strategy.
C4D contributes to:

1. **HEALTH**
   Output: By 2022, government and partners have enhanced capacity to generate demand for adoption of positive health practices supported by preventive and responsive health services that improve the health and wellbeing of children and adolescents.

2. **NUTRITION**
   Output: By 2022, government and partners have enhanced capacities to generate demand for positive practices that improve the nutritional status of children, adolescents and women.

3. **WASH**
   Output: By 2022, government, partners, and civil society at national and state level have adequate institutional capacity to support social and behaviour change to enable the most deprived to access and use WASH services in selected states.

4. **CHILD PROTECTION**
   Output: By 2022, key stakeholders have the capacity to engage children and adolescents (girls and boys), parents and community influencers through advocacy, sustained social and behaviour change communication for adolescent empowerment and to prevent child abuse, violence and exploitation.

5. **EDUCATION**
   Output: Government and partners have enhanced capacity to generate demand for quality education through advocacy, sustained behaviour change and social protection.

6. **PROGRAM EFFECTIVENESS**
   Output: Government, civil society partners, academia, media understands and take action to influence social norms that increase the value of girls/women and promote gender equality.
By 2022, government and partners have enhanced capacity to generate demand for adoption of positive health practices supported by preventive and responsive health services that improve the health and wellbeing of children and adolescents.

In line with government’s health priorities, UNICEF support led to health system strengthening through capacity building, strategies, SBCC operational tools, resource leveraging resulting in a pool of 3,500 master trainers, building IPC capacity of 400,000 frontline workers for the Measles Rubella (MR) campaign, including routine immunization and budget leveraging of around $18 million.
UNICEF’s technical support to the Government of India and state counterparts for health mainly focuses on Health System Strengthening (HSS), including enhancing capacities of government staff working at all levels to design, implement and monitor evidence based SBCC strategies. As a result, reproductive, maternal, newborn, child and adolescent health (RMNCH+A) SBCC strategy were costed, budgeted and rolled in seven states, namely Assam, Gujarat, Jharkhand, Madhya Pradesh (MP), Odisha, Uttar Pradesh (UP) and West Bengal. Annual operational plans as costed activities in annual Program Implementation Plans (PIPs) have successfully been achieved by 8 of the 16 UNICEF programing states (UP, MP, Maharashtra, Jharkhand, Bihar, Odisha, West Bengal and Assam). These SBCC strategies in RMNCH+A have been aligned to the gender strategy of ICO to ensure that women and girls have a critical and equal role in the design, management and monitoring of health systems and empowering them while improving health outcomes for the country.
Gender Sensitive Communication Strategy on Childhood Pneumonia has been developed in consultation with other development partners. It gives emphasis on actively engaging women while mobilizing communities through SBCC interventions to avail health services equally for boys and girls and adopt the desired behaviours.

Aligned with the global nurturing care framework, and national inter-sectoral approach for Early Childhood Development (ECD), UNICEF supported the revision of the Mother and Child Protection (MCP) card. It was endorsed and launched by the MoH&FW as a comprehensive communication tool to be rolled out nationwide with comprehensive capacity development through flagship government programmes.

The C4D section supported the communication component of the MR campaign, the largest immunization campaign in the world with a target of 404 million children. By the end of 2018, more than 230 million children have been vaccinated. The communications component includes the preparedness assessment, planning and monitoring tools, Standard Operating Procedures (SOPs) for vaccine introduction campaign and IEC materials.

Two states, Uttar Pradesh and Madhya Pradesh leveraged $12.9m & $4.3m in their PIPs in 2018-19 for RMNCH+A communication. For public health in Emergencies, UNICEF's technical support and advocacy in Uttar Pradesh resulted in $488,443 approved by the state government for SBCC efforts for Japanese Encephalitis (JE)/Acute Encephalitis Syndrome (AES).
UNICEF remained in the forefront in its efforts to boost routine immunization demand generation (BRIDGE) at the community level through developing the capacity of health workers in effective interpersonal communication and planning. C4D-developed IPC skills training was rolled out for 2.7 million health workers in 36 states and UTs through direct funding from state annual PIPs, following UNICEF’s advocacy. An online real-time assessment of post-training shows 8-15 per cent increase in both technical and skills knowledge. Around 4,000 master trainers, 1,800 mid-managers and 412,000 frontline workers have already been trained under BRIDGE for increased vaccine confidence.

In addition, 30,000 Accredited Social Health Activist (ASHA) facilitators were trained in various states for SBCC planning and disease outbreak management. Many others like Panchayati Raj Institution (PRI) members, HIV Counsellors and teachers were also trained. C4D provided technical support to National Institute of Health & Family Welfare (NIHFW) for developing a pool of national and state level master trainers on home base care for young child (HBYC).
Effective engagement with communities, faith-based organizations (FBOs), Nehru Yuva Kendra (NYK), trans-media platforms (e.g. TV, video, digital media, community radio and folk media/participatory theatre) during the MR Campaign were engaged as entry point for introduction of new vaccine and adoption of desired behaviour around RMNCH+A. During the entire process of engaging communities, UNICEF gave special emphasis to harness the potential and developing the capacity of women, particularly those who are associated with self-help groups (SHGs) and PRIs.
Strategic partnerships developed with civil society organizations, professional bodies like Indian Medical Association, Indian Academy of paediatrics, academic institutes, FBOs and the media as critical stakeholders in efforts to create trust in vaccines and address myths around immunization and behaviour related to RMNCH+A to ensure every child in the country gets a fair start.
An innovative health communication planning tool developed by Madhya Pradesh state received appreciation from common review mission members and high-level Ministry of Health and Family Welfare (MoH&FW) officials. In Rajasthan, an innovation in the home-based newborn care (HBNC) voucher (Chirayu Coupon) is helping to identify SNCU referrals and follow-ups from community and health worker role through referrals.
Knowledge management, particularly, documentation for SBCC Health needs to be further strengthened.

SBCC costing as well as budgeting need to be strengthened and harmonized across sectors. There is scope to improve the guidance to develop collective understanding on budgeting for SBCC intervention across sectors. This capacity needs to be developed internally and with partners.

There is a need to further sharpen the reviewing guidelines for capacity development, harmonizing monitoring and strengthening inter-sectoral planning and implementation.

Knowledge management, particularly, documentation for SBCC Health needs to be further strengthened.
By 2022, government and partners have enhanced capacity to generate demand for positive practices that improve nutritional status of children, adolescents and women.

Output Description:

By 2022, government and partners have enhanced capacity to generate demand for positive practices that improve nutritional status of children, adolescents and women.

C4D co-authored guidelines and a comprehensive communication package for the social movement on POSHAN Abhiyaan/National Nutrition Mission. This social mobilization during National Nutrition Month reached 254 million participants through 2.2 million activities organized in September 2018.
The Ministry of Women and Child Development (MoW&CD) was technically assisted by C4D in the launch of POSHAN Abhiyaan and in finalizing the guidelines and communication package on Jan Andolan/Social Movement. The MoH&FW was technically assisted in finalizing the Anemia Mukt Bharat/Anemia Free India guidelines with SBCC as one strategy and a multi-media communication package.

The Poshan Jan Andolan guidelines, supported by UNICEF was used to plan the National Nutrition Month in September 2018 across 36 states and UTs. UNICEF contributed to the plans across three Ministries - Women & Child Development; Health & Family Welfare and Rural Development.

Around 13 states have progressed in finalizing evidence based SBCC strategy on improved foods and feeding, 7 on community-based management of severe and acute malnourished children and 11 states on maternal and adolescent nutrition. Of these, three states each are supporting full state implementation of SBCC strategy/Plan of Action for IYCF and SAM, and 22 districts across six states are implementing SBCC strategy for adolescent nutrition. Most SBCC strategies are now aligned to the Poshan Jan Andolan guidelines.

UNICEF State Offices supported state departments in convergent planning for Poshan Maah and Jan Andolan dashboard data entry focused on the September Poshan campaign.
POSHAN Abhiyaan programme package, under the Ministry of Women and Child Development, includes 21 Incremental Learning Approach modules, whose implementation is being led by CARE India through World Bank. UNICEF was a participant in select state resource group trainings. UNICEF is technically assisting in developing two more modules on Jan Andolan and Convergence and support the government in quality implementation. With the Ministry of Health and Family Welfare, the training package under Mothers’ Absolute Affection programme on IYCF, Anemia Mukt Bharat and relevant SBCC Tarang package are being used by the states.
C4D Nutrition developed following partnerships to achieve results in 2018. With MoW&CD/Central Project Management Unit, POSHAN Abhiyaan, C4D technically assisted the programme team at CPMU resulting in Nutrition communication package, designing nutrition month, finalizing two reports of the nutrition month (National and Aspirational district), publishing a Jan Andolan activity monitoring dashboard and a POSHAN Abhiyaan bi-monthly newsletter. With MoH&FW, the technical assistance led to launch of Anemia Mukt Bharat programme which has SBCC as one of its strong components, including a multi-media package. Regular coordination meetings with World Bank ensured clarity in roles and responsibility in relation to the POSHAN Abhiyaan.

It was agreed that UNICEF will technically lead the Jan Andolan and the Convergence components of the POSHAN Abhiyaan. With Community Radio Station Alliance, UNICEF led partnership with one Community Radio station (Radio Mewat) resulting in Poshan content reach to 100 Community Radio stations through a lead and mentor station system. During Poshan Maah, the stations, through broadcast and outreach activities, contacted close to 15 million people on Poshan messages. The stations were especially felicitated by MoW&CD on their contribution to Poshan Maah. To leverage, coordinate with all partners in SBCC community, the SBCC alliance led by UNICEF is functional at the national level and in nine states. It has resulted in SBCC programme knowledge update, sharing of progress, building synergy and optimizing SBCC resources for nutrition.
C4D led the review, compilation and development of communication assets on Nutrition themes including anaemia prevention. The materials were developed through a consultative process by convening partners, reviewing and shortlisting the best materials and developing new materials. Colour and name branding of the two sets of material is ensured for recall and value-added retention. A multimedia communication package was developed for Anemia Mukt Bharat programme of MoH&FW. An interpersonal communication and outdoor communication package was developed for POSHAN Abhiyaan. A maternal nutrition counselling package on women’s diet, hygiene-sanitation, family planning, diseases and micronutrients was developed which after site testing, will be used nationally in Nutrition Rehabilitation Centre, Infant & Young Child Feeding counselling centre and Antenatal Care centre.
For pan-India online reporting of theme-wise activities in POSHAN Abhiyaan Jan Andolan, a dashboard was developed by UNICEF and partners, used optimally by 36 states and Union Territories to record activities during the Nutrition Month of September 2018. At the National Level, 284 million people participated in 2.2 million Jan Andolan activities at the community and service centre level during the four weeks of September.

C4D’s knowledge management credential contributed to co-authoring two national reports with the Central Project Management Unit of POSHAN Abhiyaan. The reports are: a. National Nutrition Month, (a) National Nutrition Month, A Communique, National Report; (b) National Nutrition Month, Report of 117 Aspirational District. This was complemented by a documentary covering the journey of National Nutrition Month. The materials were presented during the Poshan Awards ceremony chaired by senior officials from NITI Aayog and the Ministry of Women & Child Development on 10 October 2018.
To develop a system to support quality community level communication activities such as community-based events, SHG and PRI meetings on Poshan etc.

To develop and implement a sustained mass media communication plan on POSHAN Abhiyaan as against piece-meal exposures on media.

To ensure quality of 21 modules incremental learning approach training within the system, and integration of two modules on Jan Andolan and convergence within this package.

To develop a system to support quality community level communication activities such as community-based events, SHG and PRI meetings on Poshan etc.
By 2022 government, partners, and civil society at national and state level have adequate institutional capacity to support social and behaviour change to enable the most deprived to access and use WASH services in selected states.

UNICEF’s support to the Government of India for the sanitation flagship, Swachh Bharat Mission (Gramin), lays emphasis on strengthening systems and capacities at all levels of government to design, implement and monitor integrated SBCC strategies. The approach has been multi-layered with technical assistance and advocacy to the Ministry of Drinking Water and Sanitation (MoDW&S) and to state departments in 15 states and 192 districts.

The advocacy and technical assistance to position and implement SBCC interventions at state and district levels have been led by WASH and supported by C4D to jointly achieve this result.
UNICEF supported MoDW&S to strengthen systems by providing technical assistance to develop guidelines, quality standards and tools at national, state and district levels to improve the planning, implementation mechanisms, budgeting, coordination, convergence, and monitoring of SBCC activities. At policy level, UNICEF has drafted jointly with MoDW&S IEC/BCC guidelines on emerging areas of open defecation free (ODF) sustainability and ODF plus.

At the national level, UNICEF’s technical assistance to the MoDW&S has been to institutionalize SBCC planning framework as part of the Annual Implementation Planning (AIP) process of 2018-19. Jointly developed with MoDW&S it was rolled out in all 29 states of the country. This resulted in systematic SBCC planning at national, state and district levels and SBCC integration with the overall Swachh Bharat Mission (SBM) programming to ensure that communication interventions are not implemented in isolation.

The national framework was used to develop evidence based, costed SBCC plans and integrated in the ODF and/or ODF sustainability plans of more than 53 districts in the states of Assam, Jharkhand, Gujarat, Madhya Pradesh, Maharashtra, Odisha, Rajasthan, Tamil Nadu, Uttar Pradesh, and West Bengal through a convergent process, with links to national flagship programmes on health, nutrition and education.
To institutionalize SBCC capacity development, the focus was to strengthen institutional and individual capacities and skills. UNICEF supported MoDW&S in the orientation of new Key Resource Centres (KRCs) at the national and state levels. The Community Approaches to Sanitation (CAS) training package, jointly developed by UNICEF and MoDW&S has been used to equip KRCs, SIRDs, and other key stakeholders with SBCC competencies essential to aid SBM. At the national level, development of Swachhagrahi guidelines supported in providing guidance to states and districts on incentives and payments for fostering and strengthening ground level institutions.

Skilled resource pool of CAS master trainers (MT) have been created at state and district levels in Assam, Bihar, Chhattisgarh, Jharkhand, Gujarat, Madhya Pradesh (MP), Maharashtra, Odisha, Rajasthan, Tamil Nadu, Uttar Pradesh (UP), and West Bengal, Andhra Pradesh (AP), Karnataka and Telangana supporting SBCC planning and implementation. The resource pool is engaged and deployed to further build capacities of PRIs, frontline workers, SHGs, Swacchagrahis and other volunteers. UNICEF’s advocacy for nurturing skilled human resource has resulted trainers being supported through SBM funds. The state governments of Bihar, MP, Gujarat and Jharkhand have been successfully influenced to incentivize trainers and ground level motivators.

To strengthen government systems to monitor SBCC activities and IEC expenditure, the states of Gujarat, Rajasthan, Tamil Nadu, Jharkhand, UP and AP have developed tracking tools.
UNICEF supported multiple targeted campaigns for SBM (G) to reach the last-mile, underserved and marginalized families and communities. One of the largest social mobilization campaign initiated by MoDW&S was the Chalo Champaran campaign in Bihar which was a mass mobilization effort by the government to create SBM momentum in Bihar. UNICEF supported the development of communication materials, training tools, capacity building, multi-media campaign and ground level activation. The campaign concluded with an event at Champaran in the presence of the Hon’ble Prime Minister of India. Many state offices like Assam, Odisha and Madhya Pradesh have supported targeted campaigns in tea gardens and high tribal population districts.

Innovative communication materials and training tools are developed in partnership with Water.org to promote alternative credit models for the provision of affordable WASH loans to households. Piloted in Maharashtra, the interventions are now planned in Madhya Pradesh and Odisha within this partnership. Continued engagement and capacity building of faith leaders/ FBOs in promoting WASH through the Global Inter-faith Alliance (GIWA) is a significant mega partnership.
Building social capital of communities, especially, women and youth, is a key approach of SBM. UNICEF’s focus has been on harnessing the potential of women networks and leaders to understand and promote the benefits of sanitation through their social networks and reference groups. Many UNICEF states are working closely with the State Rural Livelihoods Missions, building capacities of SHGs who have become proactive and have benefitted their communities by providing their support in achieving ODF status.

At the national level, UNICEF supported the joint initiative of the Ministry of Human Resource Development, Ministry of Youth Affairs and Sports and MoDW&S on the ‘Swachh Bharat Summer Internship – 100 Hours of Swachhata’. The programme engaged youth across the country, developed their skill, and orientation for sanitation related work supporting to make SBM a Jan Andolan.

To increase the cohort of sanitation professionals with understanding on demand generation and communication in the sector, SBCC components are integrated in the WASH courses of Tata Institute of Social Sciences and Dibrugarh University.
The partnership with Sigma Foundation supported in assessing SBM (G) IEC/BCC plans of five states for 2018 and its implementation of SBCC activities for the optimum utilization of the IEC budget at state and district levels. The evidence generated will provide recommendations for reviewing the MIS system for IEC/BCC which remains a huge lacunae in the information management system of MoDW&S. In West Bengal, a study was conducted in Nadia and 24 South Parganas districts to understand the key barriers and enablers for ODF sustainability and issues related to solid and liquid waste management and Menstrual Hygiene Management. The findings informed the development of state level ODF sustainability and ODF plus guidelines, and communication strategy.
Challenges in sustaining social norms around ODF as they can be easily abandoned. The reasons could be poor quality of construction, limited availability of water for sanitation, poor knowledge on maintenance and repair of toilets, along with taboos around pit emptying and faecal sludge management.

New emerging issues have multiple components of ODF sustainability and ODF plus. This are unlike ODF focused approach of ‘build and use toilets’ which requires skilled personnel for designing and implementing SBCC strategies for these components.

Sustaining resource need for social and behaviour change interventions with increasing service delivery targets.

Limited utilization of IEC funds.

1. Limited utilization of IEC funds
2. Sustaining resource need for social and behaviour change interventions with increasing service delivery targets.
3. New emerging issues have multiple components of ODF sustainability and ODF plus. This are unlike ODF focused approach of ‘build and use toilets’ which requires skilled personnel for designing and implementing SBCC strategies for these components.
4. Challenges in sustaining social norms around ODF as they can be easily abandoned. The reasons could be poor quality of construction, limited availability of water for sanitation, poor knowledge on maintenance and repair of toilets, along with taboos around pit emptying and faecal sludge management.
By 2022, key stakeholders have the capacity to engage children and adolescents (girls and boys), parents and community influencers through advocacy, sustained social and behaviour change communication for adolescent empowerment and to prevent child abuse, violence and exploitation.

In 13 states, UNICEF contributed to translate the commitment to ‘End Child Marriage’ into actions such as costed and funded SBCC action plans and consolidation of social protection schemes. The programme reached 5 million adolescent girls and boys, 1.9 million parents and community members through social and behavioural change communication programmes.
Ending Child Marriage (ECM) gained momentum at the national level and across 13 states through political commitment, redesigned cash transfer programmes, access to education, engagement with communities and adolescent girls and boys as change agents.

To formalize political commitment and accountability, UNICEF worked with two state governments to develop costed and resourced state plans including for SBCC and work is in progress in five states. The Chief Minister of Jharkhand launched the costed State Plan of Action, with UNICEF’s technical collaboration, for $50 million per year, for five years reaching one million adolescent girls and a cash transfer programme with a budget provision of $59 million to reach 7.6 million girls.
In Bihar, to accelerate a state-wide mobilization on ECM, the state government in partnership with UNICEF launched the following initiatives: (i) strengthen capacities of 9,500 volunteers called Vikas Mitra and 38,000 frontline workers at community level, aiming to reach 1 million adolescents; (ii) establish an adolescent cell at state level for coordination; (iii) implement state and district plans of action with the formation of Task Forces at all three administrative structures i.e., district, block and panchayat level, (iv) form 40,000 adolescent girls and boys group by the government at community level with 4,800 groups formed and (v) implement communication campaign.

In Uttar Pradesh, a women empowerment programme and UNICEF scaled up ECM intervention from 7 to 20 districts in 2018. This resulted in establishment of community platforms to address prevention of child marriage.
UNICEF has a niche role in convening critical stakeholders around a platform that addresses multiple deprivations and support adolescent girls and boys to build skills for life and livelihood. There is a need for critical partnerships and leveraging existing resources and systems – public, private and CSOs. Ending child marriage can be achieved through partnerships and coordination at various levels, not just within government but across non-traditional partners. To operationalize these strategies, large scale, multi-state technical partnerships with state government and district administrations have been established to work with adolescent girls and boys, parents, community structures and frontline workers. These includes Praxis for strategic action plan development, MAMTA, ActionAid and CRY to support implementation of the plan at the district level, NCCDC to support the overall advocacy and SBCC communication package development and capacity development of key functionaries and stakeholders, Community Radio Association for local actions on improving girls’ education and reducing child marriage, and CYC to enhance participation and engagement of adolescents and young people.
This is the evolving role of NGOs for direct implementation, as technical partners with the government and bringing together the CSO alliance. A package of interventions has been developed to support the district administration to operationalize the plans. This includes planning, budgetary analysis, costing, budgeting, capacity building, advocacy and communication packages, adolescent participation, and monitoring and learning. In addition, a strategic partnership with Community Radio Association is established to mobilize and promote key behaviours related to adolescent empowerment.

The programme has been successful in generating political commitment to ECM, creating spaces for collective action and dialogue.
In the first year of the country programme, the focus was on a standardized adolescent participation and engagement framework and guideline across 13 states to build agency and constituencies of adolescents. The ECM and Adolescent Empowerment Programme reached 5 million girls and boys through adolescent groups’ participation and access to information and life skills training. UNICEF reached 1.9 million parents and community members as enablers to ECM and adolescent empowerment through SBCC intervention. This complements the social capital objective by engaging of adolescent groups and peer educators, in inter-gender and inter-generational dialogue through integrated life skills; adolescents linked with various government schemes (IFA, sanitary napkins, scholarships, bicycle schemes) etc. This was further aided through roll out of the life skills-based folklore approach to improve enrolment, attendance and school completion, and behaviour change communication tool roll out (RKS, MHM modules, FFL audio visuals, Meena Radio, AdhaFULL toolkit).

Community members participated in activities that address adolescents’ priority issues through awareness rallies and engagements on the importance of skilling, education, gender, safe health choices and violence against children.
UNICEF developed an evidence generation plan to define what works at scale, resulting in knowledge products to inform UNICEF’s policy advocacy: (i) an overview of prevailing trends, burden and possible drivers of change (ii) summary of findings from high intensity ECM programmes in four districts.
KEY CHALLENGES

1. Implementation of at-scale programme at district and sub-district level

2. Sustaining the skills development and practice standards of frontline workers, community workers and volunteers

3. Connect state government and district administration's commitment, resourced action plans, capacity to implement and monitor the implementation of the programme at scale

4. Implementation of ‘Cash Plus’ component in select states

5. Generating evidence on acceleration of change

6. Ensuring meaningful participation of adolescent girls and boys as change agents taking action and access to socio-economic opportunities
Government and partners have enhanced capacity to generate demand for quality education through advocacy, sustained behaviour change and social protection.

Education department’s capacity to generate demand for quality education was enhanced through a planning framework for the central government’s integrated scheme and implementation of designed SBCC strategies in several states. Innovative and interactive methods capacitated School Management Committees (SMCs) for enhanced community participation in select states. Multiple states integrated the new comprehensive life-skills framework within education plans for enhanced focus on, and integration of life skills in education programming.

C4D has made gradual progress on the six strategies within the education sector. The progress is not uniform across strategies or states.
At the national level, a communication framework for Samagra scheme has been developed with community-based organizations. While some aspects have been achieved under system strengthening, it has not been consistent across states. Some areas within system strengthening, particularly, leadership for SBCC, information management, finance and service delivery, require focus.
Within the institutionalized capacity development strategy, states such as Assam, Rajasthan, West Bengal, Odisha and Chhattisgarh have made some progress. Counselling and facilitation skills of Education Department functionaries has been initiated with Block Education Officers (BEO) in Odisha and Right to Education (RTE) Mitras in Chhattisgarh state. Interpersonal and gender-transformative skills among teachers has started in Rajasthan with the Adhyapika Manch.

The capacity development of SMCs was focused in four states with more than 100,000 SMCs in Assam and Gujarat oriented on Samagra, developing plans, tracking learning outcomes, monitoring and supervision of school activities. In Rajasthan, SMC oriented on engaging mothers and 1,500 supervisory cadre (PEEOs) skilled in mobilizing and ensuring mothers’ participation in parent teachers meetings. Innovative methods such as videos (Rajasthan), satellite (Gujarat), standardized training materials (Assam, MP) were demonstrated. In Uttar Pradesh, activities like Jan Pahal radio, School Connection newspaper and SMS-based Connect engaged the SMCs. Additional content included mothers’ participation in Parent Anganwadi meetings, mobilizing community groups), convergence with BBBP, menstrual hygiene management for teachers/KGBVs, and tackling gender issues in schools.
Building social capital was a strong approach across states. There were multiple examples of this through engaging parents (Rajasthan, Odisha), working with SMCs (Gujarat, Assam, UP, West Bengal and MP), mothers’ participation in Parents Teachers Associations (Rajasthan), networking Adhyapika Manches (Rajasthan) and adolescent groups (Assam, MP, West Bengal, Gujarat). Innovative communication materials, AdhaFULL/ Umang, used for LSE in MP/Jharkhand. Platforms like Sports for Social Development and School Cabinet were also used. Meena/Gargi Manches enhanced life skills and networked adolescents, building social capital. In West Bengal, 389 Meena Manches in seven districts (high Muslim population) engaged 430,000 children through peer education, team building and community mapping. Adolescent girls and boys from “Kanyashree Yodhya” and “Voice of Boys” monitored school drop-out children. Adolescent boys were involved in breaking gender norms through Kanyashree clubs and Raju Manches.
Through service-based platforms, C4D enhanced capacities of system level platforms such as BEOs in Odisha; BRCs and CRCs in Rajasthan and Chhattisgarh; Shiksha Mitras and Nari Gunjan in West Bengal, Assam, Bihar and Rajasthan.

Among the community-based groups, PRIs and SHGs were engaged for promoting girls' education in several states – Bihar, Assam, Rajasthan and Odisha. The artists' federation in Odisha was engaged to promote regular attendance. In 2019, efforts need to be made for further engagement through multimedia and digital platforms such as community radio, television and radio, and increased engagement with other service-based platforms (teachers and block level functionaries).
A comprehensive formative study on parenting and baseline studies were completed in the intervention districts in Rajasthan and Maharashtra. The baseline study found that while majority of Anganwadi Workers (AWWs) and ASHA workers were aware about provision of health services to children (0-6 years), only half of the AWWs reported providing preschool education to 2-6-year-old children as a key function. The formative study found that mothers were the primary caregivers for children up to 3 years while fathers and grandfathers were not directly involved in caring for the child. There is an opportunity to harness the potential of engaging fathers in positive parenting. These findings are being used to develop capacity building modules that focus on early stimulation, safety and violence prevention.
Social acceptance, or the lack of social norms that sanction practices such as keeping children out of school for wage work, child marriage, or children not attending school regularly due to social engagements, wage work or household work is a challenge. As a result, families do not feel any social pressure to ensure that children attend school regularly and complete their schooling.

Lack of a supportive home environment for school and learning outcomes, particularly, among first generation learners.

While there are multiple social protection schemes available to ensure continuity of education, there is poor knowledge about the schemes and entitlements as well as the redressal systems among parents.

Parents do not actively participate in SMCs and parent–teacher meetings. This is coupled with limited knowledge among SMC members on their roles and responsibilities.

The Samagra scheme was launched in 2018. There is a need to identify ‘hooks’ for SBCC within the scheme and identify avenues for system strengthening for SBCC within the scheme.
Output Description:

Government, civil society partners, academia, media understand and take action to influence social norms that increase the value of girls/women and promote gender equality.

The programme effectiveness output focusses on a central social norm that prevents the achievement of child rights - gender inequity resulting in preference of sons and discrimination against girl children. In 2018, partnerships and systems were strengthened to build capacity of government, civil society partners, academia and the media to support SBCC for flagship priorities and enhance knowledge on social norms that promote gender equality.

The progress in 2018 has been outlined under the six SBCC-Gender strategies.
A national level SBCC alliance, comprising 10 organizations and 9 alliances in the state to promote UNICEF’s programme priorities has been established. The Alliance guides the C4D planning and implementation, a notable example being POSHAN Abhiyaan/National Nutrition Mission. UNICEF provided technical assistance to the Ministry of Panchayati Raj resulting in the inclusion of adolescent empowerment and ending child marriage components in their national guidelines to be implemented across the states. SBCC cells or C4D Centres of Excellence continue to expand and strengthen in West Bengal, Hyderabad and Odisha, supporting convergent programming and behaviours.

An innovative partnership developed to focus on mainstreaming infotainment and pro-social content in public and private broadcasting in India. The Change Narratives Alliance was established to convene, catalyze and influence multisector stakeholders to create and distribute transmedia content for social change. The Alliance includes partners like BMGF, World Bank DIME, Ashoka University, ZEE TV, Star, Sesame Street, Indian Television.Com, Producers Guild of India, CINTAA and Screenwriters Association.
UNICEF India organized the C4D Global Learning Course in Hyderabad in collaboration with C4D-HQ and the University of Hyderabad where 54 UNICEF staff from over 40 countries successfully completed the course – demonstrating the CO’s expertise in conducting global learning programmes.

The nine Communication for Social and Behaviour Change (CSBC) modules developed in 2012 for academic institutions is currently under review and update, to infuse latest BCC theories, strategies and learnings from development programmes in India.
C4D partnered with six academic institutions to inform programming on gender based social norms and SBCC capacity building is secured. The National Institute of Rural Development and Panchayati Raj (NIRD&PR), a premier national centre of excellence partnership, was initiated for the establishment of a ‘Child Resource Centre’ in Centre for Gender Studies and to finalize standardized inputs to capacity development in child responsive governance and SBCC.

In order to bridge the gap in capacity development in SBCC, the first batch of Masters in C4D graduated from Tezpur University in June 2018 (probably the first of its kind in South Asia). They have already received placement in organizations. UNICEF was the key technical partner for Tezpur University’s C4D course. Four universities are setting up social norms knowledge hubs to enhance the understanding of social norms within the UNICEF priority areas – violence prevention, child marriage among minority communities, water and sanitation, and health.
On gender equality, the National Girls Education Action Plan was developed with the Ministry of Human Resource Development, which includes a focus on social norm change to make girls complete elementary school. Haryana state is demonstrating an at-scale, government-owned model. The state demonstrated this by improving the BBBP model by improving the safety of women and girls in public spaces in two districts resulting in the Chief Minister’s commitment to guarantee safe mobility of all girls and boys going to school. In 2018, SBCC support during campaigns was provided across all the programme priorities for Poshan Abhiyaan, Swachh Bharat Mission and BBBP/Ending Child Marriage.
During the Kerala floods response, an innovative initiative “Accountability to Affected Population” was designed together with the state government to build resilience with the participation and feedback from people affected by the flood. This initiative has created a system to collect information on the post-disaster needs and feedback of the affected communities with a focus on the most marginalized population – the very essence of social capital. This effort will be continued in 2019 to generate the desired results and potential application across other programmes and states.

UNICEF worked with Haryana state to demonstrate an at-scale, government-owned model for using the BBBP model by improving the safety of women and girls in public spaces in two districts. This included building the capacity of policemen to respond to violence against women and girls, child sexual abuse; positive gender norms for adolescent girls and boys where school children and teachers across 100 government schools exhibited more gender equal behaviour as a result of weekly gender socialization sessions.
C4D led the formative research study on parenting in early childhood years focusing on normative aspects of parental interaction with girls and boys which was conducted in five states. This study has already provided valuable insights for ECD - UNICEF's programme beam. A desk-based study to map prevalence of gender-based differences in the situation of children (0–6 years) in India was initiated. The C4D Results Report documenting best practices from the last CP (2013-2017) was disseminated nationwide and are now being applied in the new country programme. Along with the National Report, a compendium of 15 states' case studies was presented for scale up and SBCC sustainability.
SBCC cells for systems strengthening of C4D in states was a challenge to implement under the programme outcomes. This mechanism is integrated and works on the principle of convergence. It does not focus on one programme resulting in complexities for allocation of resources.

Based on the results structure, it is difficult to report on the behavioural aspects of C4D attribution. An SBCC monitoring framework will be developed in 2019 as a solution.