The following checklist is for the production of Communication for Change activities (in particular those using an information, education and communications (IEC) approach). This document is a quick guide for projects creating communication materials to reflect on their work and ensure that they are safe to use when focusing on safeguarding and children protection and violence against women and girls (VAWG).

**Communication for Change: Checklist:**

<table>
<thead>
<tr>
<th>Do</th>
<th>Do not</th>
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<tbody>
<tr>
<td>Show positive male and female role models</td>
<td>Show women and girls as weak or victims</td>
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<td>Demonstrate ways that survivors can access healthcare and other services</td>
<td>Show men and boys as aggressive</td>
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<tr>
<td>Demonstrate good practice from service providers to build trust</td>
<td>Show violence (you may retraumatise survivors), including emotional violence</td>
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<tr>
<td>Ensure that the community knows the importance of receiving health services first and within 72 hours if promoting gender-based violence (GBV) responses</td>
<td>Use jargon</td>
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<td>Think through the purpose of your material and include a ‘call to action’ where possible. Ensure that there is clarity around what it is that you would like the audience to do once they have viewed your materials.</td>
<td>Encourage the uptake of services which may be dangerous (e.g. reporting to police where you do not know if they will retraumatise or where laws mean survivor may be incarcerated or face further abuse).</td>
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1 Developed by Danielle Cornish-Spencer, Social Development Direct, on behalf of the Girls’ Education Challenge, April 2020  
<table>
<thead>
<tr>
<th>Community test your material</th>
<th>Show images of anyone in a state of undress or inappropriate poses</th>
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<tbody>
<tr>
<td>Promote your reporting mechanisms</td>
<td>Show images of real children in any communications materials</td>
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<tr>
<td></td>
<td>associated with GBV, child abuse or safeguarding</td>
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<tr>
<td>Ensure that the content is child friendly and</td>
<td>Discuss GBV, child abuse or safeguarding within communication</td>
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<td>accessible to those with low/no literacy levels</td>
<td>materials where there are no services available in a particular</td>
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<tr>
<td></td>
<td>context</td>
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<tr>
<td>Ensure that you have multiple communication methods</td>
<td>Use simplistic analysis which demonstrate that violence is caused by</td>
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<tr>
<td>to ensure you are able to reach people with</td>
<td>uptake in drug or alcohol use, or increased stress</td>
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<td>different access needs</td>
<td></td>
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<tr>
<td>Be repetitive – in order for a message to be</td>
<td>Pressure survivors/victims to speak out, or make them feel guilty</td>
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<tr>
<td>effective the audience needs to hear it from more</td>
<td>for speaking out.</td>
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<tr>
<td>than one source</td>
<td></td>
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<tr>
<td>Ground your communications in the evidence of the</td>
<td>Sensationalise violence</td>
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<tr>
<td>problem and particular issues effecting particular</td>
<td></td>
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<tr>
<td>communities</td>
<td></td>
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<td>Define clear and measurable objectives and select</td>
<td></td>
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<tr>
<td>the intended audience</td>
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<td>Continuously monitor and evaluate the effectiveness</td>
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<td>and make changes to it to ensure maximum impact</td>
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<tr>
<td>Focus on one specific problem and provide a solution</td>
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<tr>
<td>Use local languages and common terms</td>
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<td>Make the material attractive and interesting to the audience</td>
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<tr>
<td>If communicating on preventing VAWG, ensure that your communications recognises that gender inequality and discrimination lie at the heart of this issue and these factors must be addressed.</td>
<td></td>
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</tbody>
</table>

**Examples**

**Messages (could be used in broadcast or poster materials)**

<table>
<thead>
<tr>
<th>Positive</th>
<th>Negative</th>
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<tbody>
<tr>
<td>Man speaking to another man on the phone: “I am very angry these days. I have chosen to support my wife whilst I am out of work. This has helped with the tension in my house.”&lt;br&gt;Call XXXXXXXXX if you need to talk to someone about domestic violence, or to get support</td>
<td>Man to another man: “I am so angry these days and I can't help but beat my wife.”&lt;br&gt;Other man: “Try to stay out of the house more.”&lt;br&gt;&lt;em&gt;Assumes perpetrators do not have a choice and does not address root causes&lt;/em&gt;</td>
</tr>
<tr>
<td>Girl is at a distribution point and the goods are held back from her. Staff member asks for sex in exchange for them. Girl looks angry and reports him immediately to the safeguarding officer present.</td>
<td>Girl is at a distribution point and goods are held back from her. Staff member asks for sex in exchange for them. Girl looks sad. We see her with the aid later having exchanged sex for receipt of it.</td>
</tr>
<tr>
<td>Call XXXXXXXX or report [here] if you need support</td>
<td>Shows violence taking place rather than positive behaviours that can be modelled.</td>
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<td>-------------------------------------------------</td>
<td>---------------------------------------------------------------------------------</td>
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<tr>
<td>If you experience violence, go to your nearest healthcare centre [inset name, location and phone]. HIV contraction, pregnancy and other infections can be prevented following sexual violence within 72 hours.</td>
<td></td>
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<tr>
<td>A family are talking. The mother says, “I don’t know how we will keep our daughter safe anymore. Maybe if we accept Frank’s marriage proposal she will be safer”. Father says, “But I heard that girls are more likely to die in childbirth under the age of 24, and that the younger a girl marries the more likely she is to experience violence in the marriage and not access education.” The mother is shocked, “I don’t want that for my daughter… we will think of something else. I thought it would protect her, but it is false hope – she is safer with us.” Call XXXXX if you need to talk to someone about child marriage, or to receive support.</td>
<td></td>
</tr>
</tbody>
</table>
Example of a Poster³

Give Support!

You have a right to live free of violence.

Changing is hard – but we help each other.

If we don’t reach out to them it’s like we agree with the violence.

She can’t provoke you to use violence. It’s YOUR choice.

and our family is happier!

Talk with your partner – decide together how to stay safe.

³ Taken from Raising Voices SASA! Materials
Further information

What are BCI, BCC and IEC?

Behaviour Change Intervention (BCI), Behaviour Change Communication (BCC) and Information Education Communication (IEC) are strategies which enable individuals, families, groups, organisations, communities and, when implemented on a large scale, entire societies to play an active role in changing knowledge, attitudes and practices. These strategies should be used in humanitarian contexts as well as during longer term development work. According to El Jack (2003) ‘the form of gender-based violence during [humanitarian contexts] and how communities respond are deeply rooted in gender inequalities that existed before the onset of [crisis]. In addition, during times of humanitarian crisis, prevention work and behaviour change work which had previously had an affect may need to be reinforced’. Vann (2002) stated that ‘reclaiming traditional practices may represent a sense of continuity during a turbulent time’. In 2020, this is an undisputed fact and in the context of COVID-19 we have already seen, across many contexts, an increase in violence against women and girls (child marriage, intimate partner violence, non-partner sexual violence).

Effective communication programmes, even those centred on the use of media or technology, often build on existing social networks and traditional channels of communication. Dialogue and direct interpersonal exchange play an especially crucial role in successful communication for social change programmes, particularly when they address highly sensitive issues.

BCI, BCC and IEC are linked and prevention work should make use of all three strategies. Often however, development actors do not identify the differences between them and use the terms interchangeably. Although they are linked, use similar methodologies and work together in the larger sense of prevention, practitioners should look at each individually so as to understand the nuanced purpose of each intervention. These are:

**Behaviour Change Intervention (BCI):** Tailored interventions and activities developed for and with a specific group to enable a reduction in perpetration and susceptibility to violence. BCI creates an enabling environment for individual and collective change.

**Behaviour Change Communication (BCC):** A participatory process with target communities to encourage the development of BCI and - in order to further the intervention – use of a variety of communication channels to develop positive behaviours for the individual, community and at a societal level. BCC is also used to maintain the initial behaviour change.

**Information Education Communication (IEC):** A participatory process with target communities to encourage the process of learning which empowers people to make decisions, modify behaviour and change social conditions. IEC usually uses a ‘call to action’ which promotes service seeking behaviour and uses facts rather than cultural beliefs or subtle behaviour change methodologies.
Being effective

1. Effective BCC/IEC approaches should⁴:
   - involve all members of a community (women, men, and youth)
   - develop culturally appropriate messages in local languages
   - ensure the use of appropriate means of communication for awareness campaigns

Use different, targeted methodologies. Tailoring your messaging and the medium by which you communicate with your target audience is important in achieving the desired impact. Working with different target groups prior to developing messages will mean that you are able to understand how to communicate with that group most effectively.

2. Objectives of preventative BCI, BCC and IEC include⁵:

   1) Raising public awareness about the issue of VAWG and its consequences
   2) Providing accurate information and education, and dispelling myths and stereotypes about VAWG
   3) Changing attitudes and social norms that condone violence against women and girls
   4) Building political will to address VAWG
   5) Mobilising actions at different levels of society (individual, communities, organizations, countries and intergovernmental agencies)

3. For BCI, BCC and IEC to work, all actors involved in the design of strategies to be used, must remain informed and fully understand the types and the extent of GBV occurring in the targeted community.

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It is of the utmost importance to be aware of the needs of the target population. Information can be garnered through Rapid Needs Assessments, Knowledge Attitudes and Practices (KAP) surveys, focus groups, from the Gender-based Violence Information Management System (GBV IMS) and other information management tools, or simply by using anecdotal information and observations from the community or members of staff.

4. It is equally important to ensure that activities are part of a broader GBV programme and that service providers are prepared to respond to any increased demand that may be created as a result of effective prevention and promotion of services strategies.

5. The use of a participatory approach ensures that prevention efforts are culturally appropriate and customised to local contexts. Participatory produced materials and campaigns challenge deeply-held beliefs around roles, status and the overall treatment of women and girls. They are able to do this because they engage the community and in problem identification, dialogue and solution-seeking.

Singhal (2003) defined participatory communication as “a dynamic, interactional, and transformative process of dialogue between people, groups, and institutions that enables people, both individually and collectively, to realize their full potential and be engaged in their own welfare”. The process of raising questions and engaging in dialogue encourages what Paulo Freire (1970) called a “critical consciousness” which facilitates action rather than reflection.

Low-participation communication approaches, also called ‘diffusion-oriented’ methods, tend to focus on ‘products’ such as television or radio programmes. This approach often reaches large numbers of people in a short space of time and do not prioritise community engagement either in the development of the product or in the broadcast/publication of it.

Utilising the participatory approach in developing BCI, BCC and IEC creates messages which relate to the daily lives of the targeted group. The resulting locally specific messages resonate with community members in ways that cannot be produced by non-participatory methods.

Key elements of participatory communication include:

• Identification and prioritisation of needs, goals, measures of change, and desired outcomes by community members

• A focus on “horizontal” interactions, such as dialogue and exchange (versus “top-down” or “vertical” activities)

• An emphasis on self-representation to promote collective well-being

• A focus on collaborative processes rather than on “products”

• A focus on identifying solutions and positive models of change from within the community, rather than applying examples from outside

• Explicit integration of social empowerment and capacity-building goals

• Recurring cycles of reflection and action

The strength of participatory communication methods lies in their inherent respect for lived experience and local knowledge. The central role of community members ensures that messages and materials reflect the social and cultural dynamics.

**Key considerations in implementing BCI, BCC and IEC strategies**

Identify existing resources and potential channels for communication that can be mobilised to inform the community about prevention of sexual violence. Consider the following:

• Community-based workers/animators in health, nutrition, water/sanitation, community services, children’s programmes, midwives, traditional birth attendants, etc.
• Women’s leaders, teachers, religious and cultural leaders
• Places where community members gather, where posters or other informational materials could be available, such as distribution points, health centres, registration centres, communal shelter areas for new arrivals.
• Popular radio programmes

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1. Determine the key messages to be disseminated and the resources available in the setting. Some or all of the following messages may be needed and appropriate:
   - Potential health consequences of sexual violence (unwanted pregnancy, injury, reproductive health problems, infection, STIs, including HIV infection)
   - Emotional and social consequences of sexual violence (fear, anxiety, panic attacks, withdrawal, depression, feeling hopeless, social isolation)
   - Who might need help (e.g. girls, adolescents, women, concerned family members)
   - The importance of protection and safety for the survivor/victim
   - The community’s responsibility to protect and care for survivors, not blame them and not reject them

2. Adapt or develop simple methods and materials to communicate the messages.
   - Consult with women and girls to verify that the information is culturally appropriate, clear, and conveys the intended message(s).
   - Inform community leaders about the need for the information dissemination and consult with them to ensure that materials and messages are culturally appropriate.
   - Prepare materials using a variety of methods to ensure communication with literate and nonliterate persons. Some examples are: posters and pamphlets with words and pictures; radio spots; and meetings or groups where women/girls gather, such as health talks and after-school programmes.

3. Establish a plan for information dissemination in the community. The plan should include:
   - Who (which organisations) will disseminate which materials
   - Where/to whom they will conduct the information dissemination
   - What methods they will use for the information dissemination to specific groups in the community
   - How often they will repeat the information dissemination activity

**Examples of Communication for Change methodologies**

Please note that these are general examples and may not be relevant, or may require adaptation, in the context of COVID-19.

- Radio spots to spread information and change attitudes toward VAWG
  - A challenge with radio-based initiatives is that few women own radios or can afford the batteries to operate them, and so messages may not reach the women they intend to reach.
- Theatre to illustrate consequences of GBV and give examples of healthy behaviours
- Focus groups, listening groups, and feedback discussions that actively engage the community as participants, (not just audience) and encourage them to share views and seek solutions together.
- Press conferences to provide information and testimonials to the media
- Work to improve media coverage of the problem of violence against women, so that media is reporting and covering the problem in a way that enhances your cause
- “Edu-tainment” – education through entertainment. For example, television soap operas (telenovelas), radio dramas, plays
- Public services announcements (PSAs) or ads that illustrate the social, economic, and developmental costs of violence for all members of society
- Various print media, such as posters, billboards, brochures, newsletters, pamphlets, comic books, t-shirts, buttons, press releases, newspaper ads or columns
- Poetry, role plays, song and dance as alternative creative media to reach audiences
- Telling stories, testimonials, and eyewitness accounts

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