

Barrier Analysis Facilitator's Guide



**A Tool for Improving
Behavior Change
Communication in Child
Survival and Community
Development Programs**



Food for the Hungry

Food for the Hungry (FH) is a Christian, nonprofit relief and development private voluntary organization (PVO) that seeks to walk with churches, leaders and families in overcoming all forms of poverty by living in healthy relationship with God and His creation. FH was founded in 1971 and helps some of the world's most disadvantaged people in 46 countries through child health and development programs, agriculture and clean-water projects, nutrition programs, education, micro-enterprise loans and emergency relief.

The CORE Group



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needed materials:

- a. Copies of Barrier Analysis Facilitator's Guide
- b. Optional: PowerPoint slides or overheads of these slides
- c. Copies of annexes for each participant
- d. Copies of animal drawings for icebreaker (or cards with names of animals)
- e. Copies of workshop certificates (if you provide these)
- f. Copies of the daily feedback form (Annex 11) (three per participant) and one copy of the end-of-workshop feedback form for each participant
- g. Demographic and Health Survey (DHS) study or local Knowledge, Practice and Coverage (KPC) studies for the area where the practicum will be conducted
- h. Stapler
- i. Photocopier or access to one
- j. Two copies of a sample KPC questionnaire to be used in the role-play on interviewing. You can download a copy of this form at:
<http://gme.fhi.net/fse/isapr/index.htm#KPCQUEST>
(Make notes in the margin of one questionnaire to script the errors you will commit in the role-play. Make notes in the margin of the other questionnaire that prompt the mother how to answer certain questions.)
- k. A copy of a sample KPC questionnaire (not marked up) for each participant
- l. Newsprint, tape, markers and calculators
- m. Prepare one interviewee ahead of time to play the role of the mother in the interviewing technique session (Session 16).
- n. Snack for practicum participants

Barrier Analysis:

**A Tool for Improving Behavior Change Communication
in Child Survival and Community Development Programs**
by Tom Davis, MPH, Food for the Hungry, Inc.

introduction

Purpose and Description

Barrier Analysis is a rapid assessment tool used in community health and other community development projects to identify behavioral determinants associated with a particular behavior. These behavioral determinants are identified so that more effective behavior change communication messages, strategies and supporting activities (e.g., creating support groups) can be developed. It focuses on eight determinants: perceived susceptibility, perceived severity, perceived action efficacy, perceived social acceptability, perceived self-efficacy, cues for action, perception of divine will, and positive and negative attributes of the action (i.e., the behavior).

Barrier Analysis can be used at the start of a behavior change program to determine key messages and activities for intervention. It can also be used in an ongoing program focusing on behaviors that have not changed very much (despite repeated efforts) in order to understand what is keeping people from making a particular change.

This Facilitator's Guide has been written for trainers to teach others about Barrier Analysis and/or to learn the technique themselves. It guides trainers through a step-by-step process for conducting the analysis and provides background information on the technique as well as some basic information on behavior change theory. Trainers are encouraged to adapt the materials to meet their own needs.



Target Groups, Prerequisites and Time Needed

This guide is designed for people who have some experience with social and behavior change communication programs and are interested in learning a new technique for understanding promoters and barriers to behavior change. Trainers should have experience with facilitating groups, developing questionnaires and conducting focus group discussions. Trainees or workshop participants do not necessarily have to know much about social and behavior change since the workshop provides a brief overview of that. However, it is helpful if participants have at least basic experience in developing questionnaires and in conducting interviews, either in focus groups or individually. If they do not, we suggest extending the workshop to five days and spending more time on how to develop effective questionnaires.



This workshop is designed to take four days, which includes a field practicum. As noted above, if participants have limited experience with developing questionnaires and interviewing, the workshop can be extended to five days to allow sessions on these two topics.

How this Guide is Organized

After an introduction, this Facilitator's Guide outlines a four-day training program consisting of 23 sessions, along with a field practicum. The 23 sessions in the guide have been divided into two parts:

Part One: What Is Barrier Analysis?

This section defines the key concepts upon which the Barrier Analysis approach is based, outlines the seven steps of the process and illustrates the approach with two examples from the field.

Part Two: How To Conduct Barrier Analysis

This section leads participants through the seven steps in the Barrier Analysis process and includes a field practicum.

How to Organize the Field Practicum

Organization of the practicum should begin prior to the workshop. The practicum should take place in two communities. Leaders in each of these communities should be contacted to explain the purpose of the study and to gain their approval. The behaviors for analysis can be chosen by workshop organizers prior to the workshop or during the workshop with the input of the participants.

Choose one behavior to explore during the practicum. This behavior will be explored using the two ways to do Barrier Analysis: through focus groups and through individual interviews. If behaviors for analysis are chosen during the workshop, workshop participants should use local KPC or regional DHS data to pick one behavior that they want to explore with Barrier Analysis. To facilitate the identification of interviewees, choose a behavior that is being done by a significant portion (e.g., 20-60%) of your target group (e.g., mothers of young children). Do not choose a behavior that is being done by a very small proportion of the population (e.g., < 20%) or one that is being done by almost everyone (e.g., > 80%). Decide who the target group for this behavior will be—whose behavior should be changed.

Local health workers (e.g., Community Health Workers [CHWs]) in two project communities should be contacted and asked to recruit people in the target group (e.g., mothers of children under 24 months of age) to participate in the Barrier Analysis practicum. Interviewees should be told that their participation is voluntary but greatly encouraged. These potential interviewees should also be told that they will be interviewed about a health care topic and that a snack will be provided. It is not necessary or desirable to tell them the behavior that will be discussed prior to the practicum. The health worker should try to get commitments from people who plan to attend and keep a list of their names. Those who give a commitment to attend should be told to meet at a designated place (preferably indoors, such as in a school building) where they will participate in either a focus group or in individual interviews.



In the first community, where focus groups will be used, the health worker will need to recruit a total of 12 people who are doing the behavior that you are studying (“Doers”) and 12 people who are not (“Non-Doers”). In the second community, where individual interviews will be done, the health worker should recruit at least 60 people for the individual interviews who are in the target group (e.g., mothers of children under 24 months). For the behavior, “use of Oral Rehydration Solution (ORS)” with mothers of children under 24 months as the target group, the breakdown would look like this:

Community A:

Recruit 12 mothers of children under 24 months who used ORS the last time their child had diarrhea, and 12 mothers of children under 24 months who did not use ORS the last time their child had diarrhea. The person doing the recruiting will need to use screening questions in order to do this. For example, “Has your child ever had diarrhea? [If so,] what did you do for the child when he/she had diarrhea? Did you use ORS? Have you ever used ORS?” If you cannot find 12 people, you could use different selection criteria, such as those who have ever tried ORS and those who have never tried it. These mothers will participate in the two focus groups.

Community B:

Use the same process as in Community A, but recruit at least 30 mothers of children under 24 months who used ORS the last time their child had diarrhea, and at least 30 mothers of children under 24 months who did not use ORS the last time their child had diarrhea. These mothers will be interviewed individually.

It may be necessary to go out and recruit additional participants on the morning of the field practicum in order to assure that adequate numbers of participants are available for each method (8-14 people for each focus group and 60 people or more for each set of individual interviews).

Sample Agenda for a Four-day Workshop

Finally, we offer a sample training agenda for a four-day workshop.

day 1:

8:30 – 9:30	Workshop Opening, Ice Breaker, Introductions and Expectations
9:30 – 9:35	Workshop Objectives
9:35 – 10:05	Introduction to Barrier Analysis and Behavior Change Theory
10:05 – 10:20	Morning Break
10:20 – 10:25	Seeing the Need
10:25 – 11:10	A Story: The Fisherman Who Ran Out of Excuses Before He Ran Out of Time
11:10 – 12:10	Determinants: Factors that Influence Our Decisions about Behaviors
12:10 – 1:15	Lunch
1:15 – 1:35	The Seven Steps in Barrier Analysis
1:35 – 2:20	Example #1—Using Barrier Analysis: Why Don't Mothers Purify Their Water in the Sugar Cane Camps of the Dominican Republic?
2:20 – 2:35	Afternoon Break
2:35 – 3:50	Example #2—Using Barrier Analysis: Why Don't Mothers Purify Their Water in Kenya?
3:50 – 4:50	The "Exercise" Exercise
4:50 – 5:10	End-of-Day Evaluation

Sample Agenda for a Four-day Workshop

day 2:

8:30 – 8:50	Two Ways of Conducting Barrier Analysis
8:50 – 9:10	Step 1—Defining the Goal, Behavior and Target Group
9:10 – 9:20	Step 2—Developing the Behavior Question
9:20 – 10:05	Step 3—Developing Questions about Determinants— Option #1: Focus Groups
10:05 – 10:20	Morning Break
10:20 – 11:05	Step 3—Developing Questions about Determinants— Option #1: Focus Groups (continued)
11:05 – 12:10	Step 3—Developing Questions about Determinants— Option #2: Individual Interviews
12:10 – 1:10	Lunch
1:10 – 2:20	Step 3—Developing Questions about Determinants— Option #2: Individual Interviews (continued)
2:20 – 3:05	Good Interviewing Techniques
3:05 – 3:20	Afternoon Break
3:20 – 3:50	Step 4—Organizing the Analysis Sessions
3:50 – 4:20	Step 5—Collecting Field Data for Barrier Analysis— Option #1: Focus Groups
4:20 – 4:50	Step 5—Collecting Field Data for Barrier Analysis— Option #2: Individual Interviews
4:50 – 5:05	End-of-Day Evaluation

**Sample Agenda for
a Four-day Workshop**

day 3:

All Day Field Practicum in Project Communities

day 4:

8:30 – 10:00 Step 6—Organizing and Analyzing the Results of Barrier Analysis
Option #1: Focus Groups

10:00 – 10:15 Morning Break

10:15 – 12:15 Step 6—Organizing and Analyzing the Results of Barrier Analysis
Option #2: Individual Interviews

12:15 – 1:15 Lunch

1:15 – 3:15 Step 6—Organizing and Analyzing the Results of Barrier Analysis
Option #2: Individual Interviews (continued)

3:15 – 3:30 Afternoon Break

3:30 – 5:00 Step 7—Using the Results of Barrier Analysis

5:00 – 5:30 Workshop Evaluation and Closing