COVID-19 Behaviour Change Framework

The RCCE Collective Service offers and coordinated services and support to enhance standardise approaches to the systematic collection, analysis and use of socio-behavioural evidence to consistently feed into the response to COVID-19 and beyond. The development of the COVID-19 behaviour change framework is a critical step in supporting the streamlining of data collection processes and the generation of real-time socio-behavioural analysis: it includes socio-behavioural variables that have been identified as essential for slowing COVID-19 transmission or measuring the impacts of COVID-19 transmission on communities. The framework is underpinned by a set of core indicators and a question bank which seeks to enhance the measuring of relevant socio-behavioural and structural factors.

The framework has been developed through a consultative process with RCCE practitioners at global, regional, and national levels and builds on existing best practice. The global behaviour change framework is not designed to measure the delivery of RCCE activities within the strategy. Rather, it focuses on helping RCCE stakeholders to understand communities' capacities, knowledge, practices, behaviours, and perceptions and to use this information to inform strategic and operational decision-making to put people at the centre of the response.
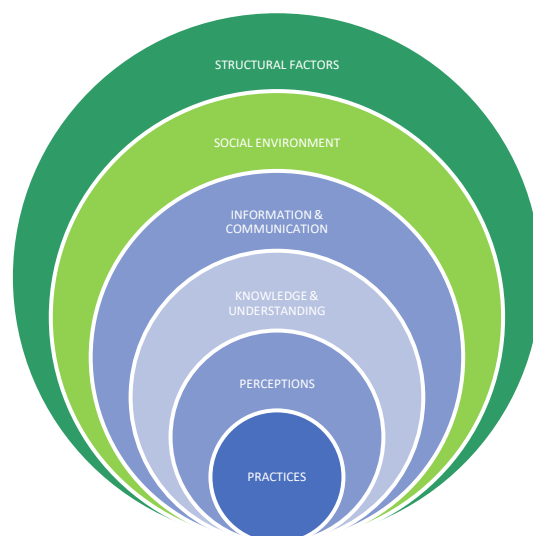
OBJECTIVES

The proposed model is grounded within UNICEF's Behavioural Drivers Model and takes into consideration the latest understanding of behavioural theory as well as lessons learnt since the pandemic has begun. To support RCCE response, this framework aims to:

- **Monitor changes** in human behaviour and help to identify trends and opportunities

- **Help the prioritization of response** activities and inform decision-making amongst all partners;
- Accelerate and support transparency and information, knowledge, perceptions, sharing;
- **Support preparedness and response planning**; and
- **Generate evidence for policy** or strategy revision, operational reviews and lessons learned.

FRAMEWORK

The COVID-19 behaviour change framework is organized around six dimensions which are considered as most relevant to understand how perceptions, knowledge, practices, social and structural variables are impacting on the uptake of positive health behaviours. For each socio-behavioural and structural dimension a set of variables has been developed.

1 Collective Approaches to Communication and Community Engagement: Models, Challenges and Ways Forward, HPG Oct 2020
Public

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Dimensions	Variables				
Information and communication Exposure to information and communication on Covid-19 - interest in learning about Covid-19, exposure to different sources, consumption of information, exposure to disinformation	DEMAND FOR INFORMATION	ACCESS TO INFORMATION	SATISFACTION WITH INFORMATION	TRUST ON INFORMATION	INFODEMIC RISK
Knowledge, awareness, understanding Developing awareness and understanding of Covid-19 - disease transmission mechanisms, preventative measures and treatments and vaccine, level of misinformation	KNOWLEDGE OF DISEASE	KNOWLEDGE OF PROTECTIVE MEASURES	KNOWLEDGE OF HEALT PROTOCOLS		
Perceptions: Inferring risk perception - concern for disease contraction, concern for financial and socio-economic impacts, perceptions on preventative behaviours, treatment and vaccine	PERCEPTION OF SUSCEPTIBILITY	PERCEPTION OF EFFICACY OF PROTECTIVE MEASURES	PERCEPTION OF SAFETY AT HEALTH FACILITY	PERCEPTION OF RISK OF STIGMATISATION	PERCEPTION OF FAIRNESS
Practices Performing health behaviours - preventative behaviours, healthcare-seeking behaviours, participatory action for or against Covid-19	PRACTICES OF PROTECTIVE MEASURES	VACCINE ACCEPTANCE	HEALTH-SEEKING BEHAVIOUR	ACCESS TO NON-COVID-19 RELATED HEALTH CARE	
Social Factors Factors that influence and interact with predictors - individual characteristics and context (personal, psychological, access to resources, etc) and social and environmental context (community and government measures)	STIGMA IN THE COMMUNITY	SOCIAL NORMS	COMMUNITY ENGAGEMENT	INDIVIDUAL IMPACT	COVID-19 RELATED CIVIL UNREST
Structural Factors Please note that the indicators below were prioritized amongst others and are by no mean exhaustive considering that a variety of structural determinants influencing behaviours	HANDWASHING	HEALTH CARE ACCESS	LITERACY	INTERNET ACCESS	

COVID-19 Behaviour change framework

INDICATOR DEFINITIONS

The suggested set of core indicators shall help to measure the socio-behavioural and structural variables included in the COVID-19 behaviour change framework.

The table below provides an overview of indicators in relation to specific socio-behavioural factors. Each indicator is supported by a short description of key terms to illustrate what the indicator intends to measure.

Nominator is the total number of participants who provide the correct or adequate answers according to the different response options in the survey. Then, for each survey or poll,

the nominator calculation will be defined according to the threshold (quantitative or score answer) or list of options contributing to the indicator calculation. The nominator calculation needs to be systematically reported in relation to each data source.

The **denominator** is directly linked with the sample survey or the total number of survey participants according to predefined socio-demographic criteria. It is recommended to use by default a population range from 15 years and above. However, the denominator could be adapted to the country context (e.g. according to legal requirements and data priorities). it is further recommended to disaggregate the denominator by gender, age and socio-economic and/or socio-cultural characteristics.

INFORMATION AND COMMUNICATION

Variable	Indicators	Definition of key terms	Nominator	Denominator
Demand for information	Percentage of individuals who seek information about COVID-19 on a weekly basis	Individuals who seek information about different aspects of COVID-19 at least once a week using channels, they have access to (health care workers, family, friends, community leaders, newspapers, radio, TV, online sources including social media and/or messaging apps, etc)	Total of respondents who report seeking information on COVID-19 on a weekly basis	Total of respondents aged 15 and above
Access to information	Percentage of individuals who have access to appropriate information on COVID-19	Accurate and factual information in the local language which facilitates / helps people to identify local level solutions and adopt (and sustain) key preventive measures	Total of respondents who report accessing to appropriate information on COVID-19	Total of respondents aged 15 and above who report seeking information on COVID-19 on a weekly basis
Satisfaction with information	Percentage of individuals who are satisfied with the information content they receive on COVID-19	Satisfaction with information content received irrelevant from format or channel or information source	Total of respondents who express satisfaction with the information content they received	Total of respondents aged 15 and above who report seeking information on COVID-19 on a weekly basis
Trust information	Percentage of individuals who receive information through a communication channel they trust	Individual's perception of the trustworthiness of the communication channel through which they receive information on COVID-19. Channels may include health care workers, family, friends, community leaders, newspapers, radio, TV, online sources including social media and/or messaging apps, etc.	Total of respondents who report trusting the communication channel through which they receive COVID-19 related information	Total of respondents aged 15 and above who report seeking information on COVID-19 on a weekly basis
Infodemic risk	Proportion of unreliable content vs all content online in a specific geography and population	Potentially unreliable content is referring to false, untrustworthy news or unsupported claims. Content measured at geographical or population level - Geographical or population risk can be a proxy for individual risk	Total of unreliable public posts on Twitter related to COVID-19 during the past month	Total of public posts on Twitter related to COVID-19 during the past month

KNOWLEDGE AND UNDERSTANDING

Variable	Indicators	Definition of key terms	Nominator	Denominator
COVID-19 disease	Percentage of individuals who know correct symptoms of COVID-19	Symptoms as defined in current WHO guidance - https://www.who.int/health-topics/coronavirus#tab=tab_3	Total of respondents who know correct symptoms of COVID-19	Total of respondents aged 15 and above
COVID-19 disease	Percentage of individuals who know correct transmission routes of COVID-19	Transmission routes as defined in current WHO guidance	Total of respondents who know correct transmission routes of COVID-19	Total of respondents aged 15 and above
Protective measures	Percentage of individuals who know how to protect themselves from COVID-19	Knowledge about personal protective measures such as hand washing / physical distancing / limiting social gatherings to reduce individual's infection risk of COVID-19	Total of respondents who know how to protect themselves from COVID-19	Total of respondents aged 15 and above
Protective measures	Percentage of individuals who know how to stop COVID-19 transmission in their community	Knowledge about measures (limit community movements, suspend participation in community events / social gatherings, cancelling of non-essential travels etc.) which are critical to stop COVID-19 transmission in a given geographical area	Total of respondents who know how to stop COVID-19 transmission at community level	Total of respondents aged 15 and above
Health protocols	Percentage of individuals who know what measures should be taken if they have been in contact with someone who has COVID-19.	Triggers for different actions such as self-isolation, testing, agreement to contact tracing will vary across contexts and depend on public health's laboratory testing capacity and / or public health capacity to take care of people	Total of respondents who know about appropriate measures to be taken if in contact with someone who has COVID-19	Total of respondents aged 15 and above

PERCEPTIONS

Variable	Indicators	Definition of key terms	Numerator	Denominator
Perception of susceptibility	Percentage of individuals who believe they are at risk of contracting COVID-19	Individual's subjective approximation of the probability of personally contracting COVID-19	Total of respondents who report being at risk of contracting COVID-19	Total of respondents aged 15 and above
Perception of efficacy of protective measures	Percentage of individuals who believe following recommended measures will protect them from COVID-19	Individual's perception that by following recommended measures they will protect themselves from COVID-19	Total of respondents who report that following recommended measures will protect them from COVID-19	Total of respondents aged 15 and above who know how to protect themselves from COVID-19
Perception of efficacy of protective measures	Percentage of individuals who believe following recommended measures will help stop COVID-19 transmission in their community.	Individual's perception that by following recommended measures they will help to contain the spread of COVID-19 in their community	Total of respondents who report that by following recommended measures will contain the spread of COVID-19 at community level	Total of respondents who know how to stop COVID-19 transmission at community level

Variable	Indicators	Definition of key terms	Nominator	Denominator
Perception of safety at health facility	Percentage of individuals who believe that their health facility is currently safe to go to	Individual's perception that the health facility they normally go to provides medical care (for non-COVID-19 related health issues) without exposing medical personnel, patients and their families to COVID-19 infection risks	Total of respondents who report that their health facility is currently safe to go to	Total of respondents aged 15 and above who have access to health facility
Perception of the risk of stigmatization	Percentage of individuals who think falling ill with COVID-19 leads to stigma	Individual's perception of stigmatization by immediate environment or wider community, that is associated with individuals that have contracted COVID-19	Total of respondents who report falling ill with COVID-19 leads to stigma	Total of respondents aged 15 and above
Perception of public health measures fairness	Percentage of individuals who think locally recommended measures for COVID-19 are fair	Perception of inequity drives frustration that can negatively affect social cohesion and reduce public trust in recommended measures.	Total of respondents who report locally recommended measures for COVID-19 are fair	Total of respondents aged 15 and above who know how to protect themselves and to stop COVID-19 transmission at community level

PRACTICES

Variable	Indicators	Definition of key terms	Nominator	Denominator
Protective measures	Percentage of individuals who report practicing recommended measures to protect themselves from COVID-19	Recommended measures will depend on national / local public health guidelines and local context - which aim to reduce an individual's risk of contracting COVID-19.	Total of respondents who report practicing recommended measures to protect themselves from COVID-19	Total of respondents aged 15 and above who know how to protect themselves from COVID-19
Protective measures	Percentage of individuals who report practicing recommended measures to stop COVID-19 transmission in their community	Recommended measures will depend on national / local public health guidelines and local context - which aim to contain the spread of COVID-19 in a given geographical area	Total of respondents who report practicing recommended measures to stop COVID-19 transmission at community-level	Total of respondents who know how to stop COVID-19 transmission at community level
Vaccine uptake	Percentage of individuals who would get vaccinated once a vaccine is available and recommended	Intended behaviour which will be particularly relevant for targeted groups	Total of respondents who report to get vaccinated once a vaccine is available and recommended	Total of respondents aged 15 and above
Health seeking behaviour	Percentage of individuals who would immediately seek medical care if they had COVID-19 symptoms	Self-reported measure of health seeking behaviour triggered by COVID-19 symptoms. This can include calling a specific and dedicated hotline, consultation of medical staff, testing, treatment.	Total of respondents who report to immediately seek medical care if they have COVID-19 symptoms	Total of respondents aged 15 and above who have access to health facility
Health seeking behaviour	Percentage of individuals who only self-medicate if they have COVID-19 symptoms	Self-reported measure of health seeking behaviour triggered by COVID-19. Individuals do not seek any formal health care advice or service and self-medicates.	Total of respondents who report to self-medicate if they have COVID-19 symptoms	Total of respondents aged 15 and above who have access to health facility
Non-COVID-19 related health care	Percentage of individuals who have difficulty in accessing healthcare for non-COVID-19 related treatment	Measures only access and not the actual demand. Difficulties is defined as Having skipped or delayed health care visits due to the suspension or interruption of non-essential health services (e.g. sexual and reproductive health, immunization, cancer treatment etc.) as response to the pressure of COVID-19 on the national and local health system	Total of respondents who have difficulty in accessing healthcare for non-COVID-19 related treatment	Total of all respondents who require non-COVID-19 related treatment for themselves or their children and normally have access to health facility

SOCIAL ENVIRONMENT

Variable	Indicators	Definition of key terms	Nominator	Denominator
Stigma	Percentage of individuals who have observed people in their community stigmatized because of COVID-19	'Stigma' is defined as individuals and/or groups sharing specific characteristics (gender, ethnical identity, culture etc.) are experience disapproval or discrimination. This might be expressed by verbal, physical and/or emotional abuse / denial of access to services and infrastructure (housing, jobs, education) being shunned in or excluded from social situations because they are COVID-19 patients or being associated with bringing the disease to the community.	Total of respondents who report to have observed people in their community stigmatized because of COVID-19	Total of respondents aged 15 and above
Social norm - self-isolation	Percentage of individuals who believe that their friends / family would want them to self-isolate if they have been in contact with someone who has COVID-19	Individual's perception that self-isolation is a social norm and expected by their immediate environment which will shape the uptake of the measure.	Total of respondents who report that their friends / family would want them to self-isolate if they have been in contact with someone who has COVID-19	Total of respondents aged 15 and above
Community engagement	Percentage of individuals who report that authorities involve the local population to inform public health measures	Authorities (national, local and sub-national government entities) work directly with the local population to inform decision-making processes concerning public health measures	Total of respondents who report that authorities involve the local population to inform public health measures	Total of respondents aged 15 and above
Community engagement	Percentage of individuals who report collaborating in decisions about community actions	Individual's ability to participate in collective decision-making processes affecting the community i.e. – participation in local/community planning or other meeting for COVID-19	Total of respondents who report collaborating in decisions about community actions	Total of respondents aged 15 and above
Community engagement	Percentage of individuals who know how to provide feedback about decision-making processes which affect them	Individual's knowledge about mechanisms to provide feedback and complaints concerning the way they are/were asked to express their viewpoints / opinion and input in decision-making processes which affect their (daily) lives	Total of respondents who report to know how to provide feedback about decision-making processes which affect them	Total of respondents aged 15 and above
Community engagement	Percentage of individuals who trust authorities and partners leading the COVID-19 response	Increase of trust due to community engagement efforts undertaken by authorities (national, local and sub-national government entities) and partners (e.g. local / international NGOs)	Total of respondents who report to trust authorities and partners leading the COVID-19 response	Total of respondents aged 15 and above
COVID-19 individual impact	Percentage of individuals who report COVID-19 has had a negative economic impact on their life	Concerns about economic impact may include for example loss of income, loss of job, purchase food for themselves or their families etc.	Total of respondents who report COVID-19 has had a negative economic impact on their life	Total of respondents aged 15 and above
COVID-19 individual impact	Percentage of individuals who report that COVID-19 has had a negative psycho-social impact on their life.	Psycho-social impact may include feeling of anxiety or fear of the future, pervasive feeling of hopelessness and desperation, frustration, depression, insomnia caused or reinforced by the direct and indirect impact of COVID-19	Total of respondents who report that COVID-19 has had a negative psycho-social impact on their life.	Total of respondents aged 15 and above

Variable	Indicators	Definition of key terms	Nominator	Denominator
COVID-19 related civil unrest	Number of COVID-19 related civil unrest events reported in the last 3 months	The 'number of COVID-19 related civil unrest events' is defined by all events directly linked to the pandemic. These events include recorded protest against government measures made in response to COVID-19, demonstration of conspiracy belief, violent attacks linked to COVID-19 transmission, including violence against healthcare workers responding to the coronavirus. Indirect protest or demonstration such economic shocks or complex social demonstrations are not captured with this indicator.	Total number of COVID-19 related civil unrest events	Past 90 days

STRUCTURAL FACTORS

Variable	Indicators	Definition of key terms	Nominator	Denominator
Handwashing	Percentage of individuals who have at least basic hand washing facilities with soap and water	Basic handwashing facilities are defined by WHO as a sink with tap water, and can also include other devices that contain, transport or regulate the flow of water. Buckets with taps, tippy-taps and portable basins are all examples of handwashing facilities. Bar of soap, liquid soap, powder detergent and soapy water all count as soap for monitoring purposes. Depending on the context people may have also access to alcohol-based hand wash rub.	Total of respondents who report to have access to a basic hand washing facility with soap and water	Total of respondents aged 15 and above
Health care access	Proportion of physicians and nurses per 1,000 people	Key indicator to monitor the availability of health workers. It can serve as a proxy to monitor equity in the allocation of resources by humanitarian actors across different groups within the humanitarian case load and/or crisis affected population versus local populations. No consensus about optimal level of health workers for a population. It can be broken down according to the type of health worker to present the workforce mix.	Total of physicians and nurses in the country	Total of population
Internet access	Percentage of individuals using the internet	Individuals using the internet are defined by the World Bank as individuals who have used the Internet (from any location) in the last 3 months. The Internet can be used via a computer, mobile phone, personal digital assistant, games machine, digital TV etc. It might be relevant to disaggregate by gender as possible	Total of individuals who report to use the internet	Total of individuals aged 16 to 74
Literacy rate of adults	Percentage of individuals aged 15 and above who can both read and write with understanding a short simple statement about their everyday life.	The literacy rate is defined by UNESCO as the percentage of the population of a given age group that can read and write. The adult literacy rate corresponds to ages 15 and above. It is typically measured according to the ability to comprehend a short simple statement on everyday life. The definition of literacy could be adapted by countries: link UNESCO Meta data	Total of respondents who can both read and write according the in-country definition of adult literacy	Total of respondents aged 15 and above

DATA SOURCES

The data collection process should be **nationally-led** and could include Community Rapid Assessments, KAP surveys and/or Community feedbacks. Data collection methods can vary between telephone, in-person interviews or an online survey. Prior to using an internet-based method or phone survey, the partner should consider if the targeted research population has access to the internet and/or phones and is digitally literate (able to use digital technology) or if there is a risk of excluding specific population groups. If there is a risk, the survey findings are not representative for the broader population and can't be generalized.

To increase the frequency of generating socio-behavioural trends, address information gaps or overcome challenges in relation to costs, partners could also draw on additional data sources such as global polls, panel surveys or snowball surveys. This would equally enable to conduct a preliminary analysis and could be complemented with additional data collection processes for example to increase and strengthen the reporting against and/or deepen the understanding about specific population groups.

However, any collection, analysis and interpretation of data requires a sound methodology to identify potential caveats and limitations as well as to ensure a maximum of validity and reliability of the findings.

Explore data available against this framework by country, by month, and additional disaggregation level on our social data tracker and indicators dashboard:

⚛	🖥
SOCIAL DATA TRACKER	**BEHAVIOURAL INDICATOR DASHBOARD**

Find more information about the Collective Service:

✉ rcce.collectiveservice@gmail.com
🖧 https://www.rcce-collective.net/

THE COLLECTIVE SERVICE TOOLS

QUESTION BANK

The Question Bank seeks to facilitate the collection of valuable and insightful information about perceptions, knowledge, practices, social and structural factors in order to tailor RCCE strategies to better address people's needs and priorities - and contribute to the overall public health response to COVID-19. It can be used by field teams in communities with COVID-19 transmission and those at risk using appropriate protective measures.

The questions have been developed by the RCCE CS team in consultation with response partners and experts and are part of the RCCE CS global strategy. The questions draw on existing data sources used at country, regional and global level reflecting the RCCE Collective Service global core indicators. It is a resource for partners to enhance the measuring of relevant RCCE Collective Service indicators and can be used to develop operational social science research in a community setting (e.g., quantitative surveys, qualitative focus group discussions etc.).

It includes key questions in the dimensions of knowledge, perceptions, practices, social and structural factors.

Guidance

Question bank in English, French, Arab and Portuguese