

Joint Development Associates

DECEMBER 2017

Catalyzing Transformational Development

Improving Community Health through Behavior Change

Many of the health conditions affecting countries like Afghanistan are caused by risk behaviors such as improper hygiene and sanitation. JDA uses a behavior change technique for promoting community health.

Behavior change refers to the efforts to change people's personal habits to prevent diseases. This is an essential objective in public health interventions, with an increased focus on *preventing* the outbreak of disease. Health behavior change focuses specifically on factors such as the people's knowledge, beliefs and skills.

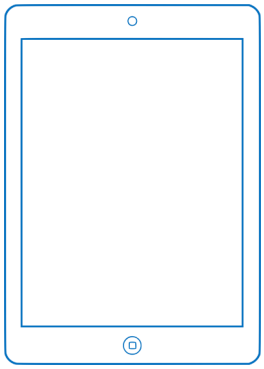
With attending Birth Life Saving Skills (BLiSS), and hygiene and sanitation training, participants increase their knowledge. They also become conscious of their behaviors, and how those behaviors affect their heath. This realization prompts them to make the necessary changes in their daily practices to prevent diseases.

The positive behavioral changes in hygiene and sanitation and proper mother-child care are reflected in JDA's monitoring surveys. Before going into villages a baseline survey is conducted which show that approximately 40% of the children under the age of five have diarrhea. After JDA completes training in the villages, an end survey is conducted which shows that only 3% of the children under the age of five have diarrhea. Typically, the end survey is conducted one to two years after the baseline survey. Those who participate in the program, apply what they have learned in the lessons to their households. They set up a hand washing station with soap to encourage frequent hand washing, use clean water and cover the water containers, wash fruits and vegetables, and clean their yards from feces. In regards to BLiSS, those women who decide to give birth at home, and women who assist births know more about proper pre/post newborn and mother care to better protect the lives of the mother and child.

From Paper to Digital Surveying



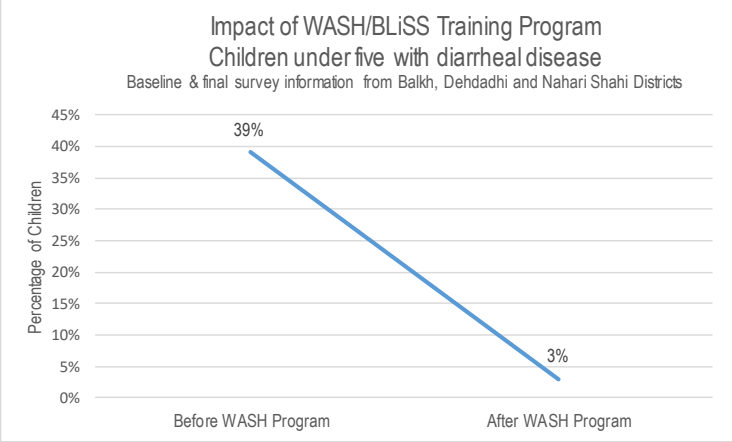
Surveying the villages where we work is essential to evaluate the impact of our programs. JDA trainers have been using paper questionnaires to collect information. Traditional paper based surveying requires extensive work and time. The process involves printing hundreds of forms, and manually scanning, verifying and transcribing the information. This often takes several weeks, therefore, delaying the release of information. This year, JDA transitioned to digital surveying.

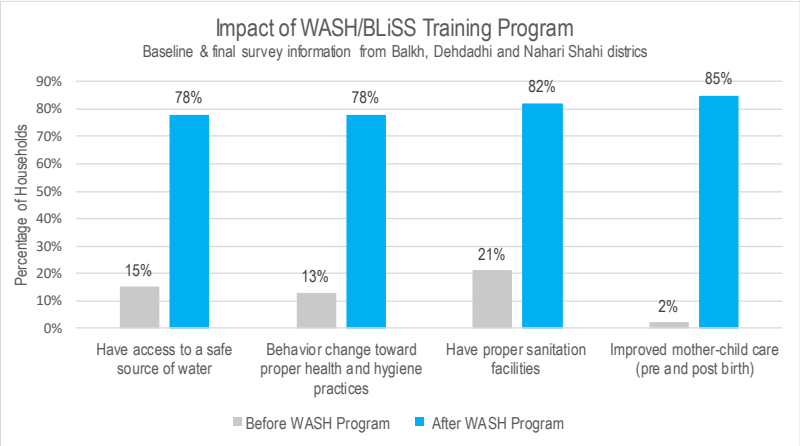


JDA is now using tablets and smart phones and a software called Open Data Kit (ODK) to conduct surveys for the WASH, BLiSS, Hygiene & Nutrition, and our agriculture programs. ODK allows us to build a data collection survey, which we can display on any Android device. When a survey is completed, the device sends the data to an online server, where the results of all of the surveys are gathered. The information is automatically placed into tables and charts for easy and convenient analyzing. ODK supports a wide variety of data types, including GPS coordinates, photos, audio, and video.

ODK has proven to be a great asset for JDA, allowing us to monitor and evaluate the effectiveness of our programs.

The charts below shows the impact of the WASH/BLiSS training in the villages. ODK offers JDA an easier and faster method to monitor the effect of our programs in the villages.





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