Career paths related to community and behavioral interventions

Peter Winch

Health Behavior Change at the Individual, Household and Community Levels
224.689
Career paths related to community and behavioral interventions
Four of careers related to behavior change in public health

1. Developing and implementing interventions
   - National-level
   - District or community level

2. Research – advocacy – policy in non-academic institutions

3. Research – advocacy – policy in academic institutions

4. Bilateral and multilateral organizations
#1 - Developing and implementing interventions
#1 - Developing and implementing interventions

- Three kinds of organizations
  - Primary focus on behavior change and communication
  - Broader focus, behavior change is one of many activities in the mix
  - Focus on one health problem or set of problems e.g. reproductive health
Primary focus on behavior change and communication

- FHI 360 www.fhi.org
  - The part in DC that once was Academy for Educational Development
- Center for Communication Programs (CCP) www.jhuccp.org
- The Manoff Group www.manoffgroup.com
- PSI www.psi.org
- Weinreich Communications www.social-marketing.com
Primary focus on behavior change and communication

Advantages

- Depth and expertise in specific components e.g. materials development, video production etc.
- Often have more sophisticated evaluation methods
- Career ladder in behavior change and communication

Disadvantages

- Can feel constraining to work only on behavior change and communication
- Opportunity to work on other aspects of health care may be limited
- Overexposure to company logos
Broader focus, behavior change is one of many activities in the mix

- Contractors
  - Research Triangle Institute - www.rti.org
  - John Snow International - www.jsi.com
  - Management Sciences for Health www.msh.org
  - Chemonix - www.chemonix.com
- NGOs
  - CARE, World Vision, Save the Children, Catholic Relief Services etc.
Broader focus, behavior change is one of many activities in the mix

**Advantages**
- Large organizations, a lot of variety in the work, opportunity to work on range of issues
- Potential for integrated approach to problems

**Disadvantages**
- Behavior change/communication approach may not be well developed
- Fewer colleagues to work with on behavior change, specialized tasks may be contracted out
Focus on one health problem or set of related problems

- **Example:** Focus on reproductive health
  - Pathfinder International
    www.pathfind.org
  - Marie Stopes International
    www.mariestopes.org
  - FHI www.fhi.org (Non-AED part)
  - JHPIEGO www.jhpiego.net

- Others in maternal health, HIV/AIDS, malaria, TB, trachoma, nutrition etc.
Focus on one health problem or set of problems

**Advantages**
- Narrower focus allows you to master the different aspects of prevention and control (i.e. feel like you know something)
- Good institutional linkages: journals, conferences, associations

**Disadvantages**
- Tendency to implement categorical (disease-specific) interventions
- Difficult to address other community problems
#2 - Research – advocacy – policy in non-academic institution
#2 - Research – advocacy – policy in non-academic institution

- Policy-oriented research
- Reviews and policy analysis
- Advocacy and policy dialog
- Often have gender focus, raise issues that are avoided by government agencies
Research – advocacy – policy in non-academic institution

- Gender focus:
  - International Center for Research on Women (ICRW) www.icrw.org
  - Population Council www.popcouncil.org
  - Guttmacher Institute www.guttmacher.org
  - International Women’s Health Coalition www.iwhc.org
Research – advocacy – policy in non-academic institution

- Various topics:
  - Rockefeller Foundation
    www.rockfound.org
  - Ford Foundation www.fordfound.org
  - Center for Global Development
    www.cgdev.org
  - Center for Strategic and International Studies www.csis.org
  - Numerous smaller organizations
Research – advocacy – policy in non-academic institution

**Advantages**
- Possibility for intellectually-challenging work with less stress than in academia
- Often there is a compelling vision behind the work

**Disadvantages**
- Lack of contact with the field can be frustrating: Only office work and reading
- PhD often a requirement
#3- Research – advocacy – policy in academic institution
#3- Research – advocacy – policy in academic institution

- Larger programs: London School, Liverpool, Karolinska Institutet, JHSPH, Harvard, Boston, UNC, Columbia, Tulane, U Washington

- Many smaller programs in Global Health, behavior change etc., some with <5 faculty
Research – advocacy – policy in academic institution

Advantages
- Connected to various networks
- Institution gives credibility & prestige
- Access to other specialized areas of knowledge
- Opportunity for teaching

Disadvantages
- Needs doctoral degree
- Social/behavioral work tends to done by relatively small group
- Many demands on time
#4 - Bilateral and multilateral organizations
#4 - Bilateral and multilateral organizations

- Multilateral: WHO, UNAIDS, World Bank, UNICEF
- Bilateral: USAID, DfID, GTZ, CIDA
Bilateral and multilateral organizations

**Advantages**
- Less need to look for funding
- Constantly changing work and projects
- May be considerable scope for research and analysis

**Disadvantages**
- Internal politics can be disturbing
- No direct contact with the field except for official visits
- A lot of sitting in meetings
## US locations

<table>
<thead>
<tr>
<th>Location</th>
<th>Typical donors</th>
<th>Examples of organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boston</td>
<td>USAID, Foundations</td>
<td>JSI, MSH, Partners in Health, Harvard, BU</td>
</tr>
<tr>
<td>New York</td>
<td>Foundations</td>
<td>Pop Council, Ford F., IWHC, Rockefeller F., Columbia, many small foundations</td>
</tr>
<tr>
<td>Baltimore</td>
<td>USAID, NIH, Gates</td>
<td>JHU, CCP, JHPIEGO, CRS, World Relief, Lutheran WR</td>
</tr>
<tr>
<td>Washington</td>
<td>USAID, NIH, Gates</td>
<td>GW, AED, Africare, CGD, ICRW, APHA, CSIS</td>
</tr>
<tr>
<td>Atlanta</td>
<td>CDC, USAID</td>
<td>Carter Center, CARE, Emory</td>
</tr>
<tr>
<td>Seattle</td>
<td>Gates</td>
<td>PATH, U Washington</td>
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</tbody>
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Future work in promotion of sustainable lifestyles
The challenge

- This will be the largest behavior change initiative ever
- This will involve all countries, all sectors of the economy, all income levels, all ethnic groups
- Direct threat to the underpinnings of the consumer economy
  - Return ‘consume’ to its original meaning of ‘use up destructively’ e.g. TB=consumption
Types of jobs that might appear

- Social marketing of sustainable behaviors
- Promotion of environmental sustainability (reduction of energy use, waste production & use of private cars) for:
  - Hospitals and health care organizations
  - Municipal governments
  - Private businesses
- Mitigation of effect of climate change: Domestic and international
Various books

- Why We Disagree About Climate Change: Understanding Controversy, Inaction and Opportunity - Mike Hulme
- Plan C: Community survival strategies for peak oil and climate change – Pat Murphy
- Overshoot - William Catton
- Peak Everything: Waking Up to the Century of Declines - Richard Heinberg
- Environmental Values in American Culture - Kempton, Boster & Hartley
- The Collapse of Complex Societies - Charles Tainter
- Ultimatum: Matthew Glass
Collapse of Complex Societies by Charles Tainter

- Simple societies are faced with problems in food production, security, public works
- They respond to these problems by becoming increasingly complex
- Overhead costs come with complexity: people working in administration rather than production, maintaining infrastructure, raising taxes
- New problems require yet additional complexity
- Point is reached where overhead costs generated result in diminishing returns in terms of effectiveness
- Society eventually collapses into smaller, less complex units