Enabling young women and men to live gender-equitable lives free of violence, coerced sex, and unintended pregnancy is a critical global challenge.

Early pregnancy and child marriage are a reality for millions of young women worldwide, curtailing educational and vocational opportunities, leading to poor sexual and reproductive health and contributing to the intergenerational cycle of poverty. A focus on individual change is important but insufficient to meet this challenge. Young people’s ability to forge healthy sexual relationships is influenced by social norms enforced by their peers, families and communities.

Social norms shape behaviors related to sexual debut, intimate partner and sexual violence and early marriage, as well as access to education and the services and information they need to protect their health. Research has shown that investing in social norm change at the community (rather than individual) level, while ensuring supportive policies and access to good quality services, can bring about significant improvements in sexual and reproductive health.

Passages project aims to address a broad range of social norms, at scale, to achieve sustained improvements in family planning and reproductive health. This research project is building the evidence base and contributing to the capacity of the global community to strengthen normative environments that support reproductive health, especially among very young adolescents, newly married youth, and first-time parents. Passages capitalizes on these formative life course transitions to test and scale up interventions that promote collective change and foster an enabling environment for healthy timing and spacing of pregnancies and family planning.
42 people from 18 organizations gathered together at PSI headquarters in Washington, DC on February 29th and March 1st, 2016

ABOUT THE MEETING

1. Advancing measurement of social norm change in research and program evaluation
2. Good practice in developing and implementing effective, scalable normative interventions
3. Selection of two promising normative interventions for scale-up practice technical support
THE PARTICIPANTS: Passages Team
THE PARTICIPANTS: Technical Experts

Sohail Agha
Senior Program Officer; Integrated Delivery, Demand and Behavior Change
Bill and Melinda Gates Foundation

Doris Bartel
Senior Director, Gender & Empowerment Unit
CARE USA

Cristina Bicchieri
S.J.P. Harvie Professor of Social Thought and Comparative Ethics
University of Pennsylvania

Angie Brasington
Senior Behavior Change Advisor
Office of Population & Reproductive Health, USAID

Betsy Costenbader
Social Scientist
Social and Behavioral Health Sciences, FHI360

Jeffrey Edmeades
Senior Social Demographer
International Center for Research on Women

Marcia Griffiths
President
Manoff Group

Nicole Haberland
Senior Associate
Poverty, Gender and Youth Program, Population Council

Lori Heise
Director, Gender Violence and Health Science Center
London School of Hygiene and Tropical Medicine

Muriel Kahane
Strategic Learning Manager
Overseas Development Institute

Mihira Karra
Chief
Office of Population & Reproductive Health, USAID

Joan Kraft
Gender Advisor
Office of Population & Reproductive Health, USAID

Rachel Lenzi
Research Associate
Social and Behavioral Health Sciences, FHI360

Ruti Levtov
Program Officer
Promundo

Margo Mullinax
Associate Director of Strategic Learning, Research and Evaluation
American Jewish World Service

Jennifer Parsons
Senior Policy Associate for Early/Child Marriage
American Jewish World Service

Shegufta Shefa Sikder
Technical Advisor for Research
Office of Population & Reproductive Health, USAID

Beth Skorochod
Senior Advisor for Social and Behavior Change
PSI

Leigh Stefanik
Gender-Based Violence Program Advisor
CARE USA

Doug Storey
Associate Director, Center for Communications Programs
John Hopkins University

Linda Sussman
Senior Research Advisor
Office of Population & Reproductive Health, USAID
MEETING AGENDA

DAY 1

Measurement: How to Measure Social Norms
- Developing A Common Understanding
- What Do We Know About Measuring Social Norms?
- What is the State of the Evidence on Measuring Social Norms?
- Social Norm Measurement in Action
- Expert Reflection and Guidance

DAY 2

Practice: Transforming Social Norms at Scale
- The Intersection of Normative Interventions and Scale-Up
- What We Know Regarding Scale-Up of Normative Interventions
- Fostering Normative Interventions at Scale: How Realist Evaluation Can Help
- Selection of Two Normative Interventions with Promise for Scale to Receive Passages Support in 2016-2017
- Wrap Up: The Way Forward
  - Principles: Social Norms and Scale Up Research and Action
  - Collaborative Learning
  - Legacy: How Can Passages Best Contribute?
- Experts Advise Passages
Measurement:
How to Measure
Social Norms
Develop a common project understanding of terms related to social norms as they apply to adolescent and youth sexual and reproductive health programming.

Discuss what we know regarding social norm measurement, including the strength of the evidence and validity in measuring social norm change.

Identify next steps in measure and method development, including recommendations for developing social norm change measures, methods, and indicators for adolescent and youth sexual and reproductive health program monitoring, evaluation, and scale-up.
Developing a Common Understanding:
WHAT IS A SOCIAL NORM?
WHY DO PEOPLE DO WHAT THEY DO?
Laying the foundation for discussion

As participants arrived for registration and coffee, they noticed a large life course timeline posted on the wall. They were asked to recall moments from their adolescence when they were affected by a social norm, write it on a post-it note, and add it to the timeline under the relevant life stage.

The meeting began with a welcome and introductions, an overview of the Passages Project and review of the meeting objectives by the Institute for Reproductive Health’s Victoria Jennings and Rebecka Lundgren and USAID’s Linda Sussman.

After opening remarks, Kate Plourde (FHI 360) and Ashley Jackson (PSI) led an interactive session to identify and distinguish beliefs and expectations that shape social norms relating to adolescent sexual and reproductive health.

PARTICIPANTS DISCUSSED QUESTIONS SUCH AS:

1. How do social norms shift over the life course?
2. Who and what communicate, teach and reinforce social norms at each stage?
3. What are the costs and challenging of adhering to social norms?
A common lexicon: We need clarity in concepts and language.

Don’t get lost in social norm language. Approach it like an AA meeting—take what is useful.

Keep it simple
- Norms are simply the rules that govern behavior.
- Use simple language to describe norms: What is typical? What is appropriate?

Be positive: Focus on positive social norms, rather than emphasizing negative norms.

Norms language is inherently social, relational, interactive and interdependent.
Social Norms Defined

**SOCIAL NORMS** *noun*  
A set of social expectations shared within a valued reference group.

**REFERENCE GROUP** *noun*  
Those individuals whose opinions matter to you and shape your behavior. Frequently, social sanctions play a role in aligning behavior with established social norms.

**SOCIAL NORM THEORY** *noun*  
Distinguishes between descriptive norms (what you think others are doing) and injunctive norms (what you think others expect of you).

An important characteristic of social norms is that they are “interdependent”—essentially “social” in nature. By contrast, attitudes and personal beliefs are held by an individual.
What do we need to take into account to transform social norms?

Social norms are local and specific. It is important to identify which networks are relevant to a specific situation.

Ongoing support is needed. New norms are fragile until expectations catch up.

Multiple sets of norms may interact to influence a single behavior.

There are costs and opportunities for adhering or challenging social norms such as physical harm, shame, loss of opportunities.

Norm challengers tend to be people on the periphery, but with some level of power/influence. They are often good communicators and serve as bridges for new ideas.

KEY IDEAS
Social norms are important, but don’t forget about other factors that drive behavior.

CAUTION

• Not every thing is a norm; not every norm matters.

• Social norms are not the next “magic bullet.”

• Social norms are important, but don’t forget about other factors that drive behavior.
KEY IDEAS

What do we know about social norms over the life course?

Reference groups, their influence, and individual agency shifts over the life course.
What do we know about measuring social norms?

INTRODUCTION
After discussing and exploring social norms over the life course, participants prepared to delve into discussions about measurement with a presentation by Cristina Bicchieri from the University of Pennsylvania. Cristina provided a historical perspective on social norm theories and the evolution of measurement of social norms, and shared the approaches she and her team have developed for measuring social norms.
Measuring Social Norms

Presented by: Cristina Bicchieri
University of Pennsylvania, Penn Song
Defined: A social norm
(Bicchieri 2006)

is a rule of behavior

such that individuals prefer

to conform to it

on condition that they believe

- most people in their reference network conform to it (empirical expectations)
- most people in their reference network believe they ought to conform to it (normative expectations)

How can we measure these social expectations and preferences?
How to measure a norm

Cristina explained that one way to measure social norms is to monitor behavior. Since that can be complicated, it is common practice to ask people directly. Unfortunately, however, this approach often provides biased results.

To reduce social bias, she suggests that researchers:

- Incentivize accuracy
- Reduce demand effects by hiding the true response
- Construct a scale with multiple questions to reduce noise
- Ask about a hypothetical situation (although that can be difficult for some participants to answer, especially for those with less education)
- Use vignettes and vary the variables (easier to understand and creates enough distance for honest responses)
What is the State of the Evidence on Measuring Social Norms?
Literature reviews on social norm measurement followed, discussed by Nicole Haberland (Population Council) and Betsy Costenbrader and Rachel Lenzi (FHI 360). After providing an overview of the EVIDENCE review which is just getting underway, Nicole discussed two ongoing randomized trials on adolescent empowerment—the Adolescent Girls Empowerment Program in Zambia, and Balika in Bangladesh. Betsy and Rachel shared the results of the Passages systematic review of social norm measurement and family planning use. Their review found very little rigorous work in this area, with only five articles with modern contraceptive use as an outcome which used both normative and empirical expectations to measure social norms.
Theory into Practice:
Measuring Social Norms for Gender Transformative Programming

Presented by: Nicole Haberland
Population Council
Nicole Haberland presented highlights of the Population Council’s Poverty, Gender, and Youth Program on empowering adolescent girls. She explained the key elements of their “girl-centered” approach: including socially isolated girls, linking girls to adult female mentors, meeting in small groups, addressing the “whole girl” and building assets. She described a randomized control trial of the Adolescent Girls Empowerment Program in Zambia, which includes safe spaces groups, “Girls Dream” savings accounts and health vouchers. She also shared information on Balika, a cluster randomized control trial in Bangladesh with three intervention strategies: gender, education and livelihoods.
Review of Literature on Social Norm Measurement Related to Modern Method Use: Approach & Results to Date

Presented By: Betsy Costenbader & Rachel Lenzi

FHI360
Social Norm Measurement Related To Modern Family Planning Method Use

Of over 21,000 articles searched using keyword terms related to modern methods, only 11% mentioned "family planning" and only 4% included a normative measure.

Since PopLine had the richest sources—and is largely utilized by the public and global health field and includes grey literature—the team focused their limited time on PopLine results.

<table>
<thead>
<tr>
<th>Database</th>
<th>Popline</th>
<th>PubMed</th>
<th>PsychInfo</th>
<th>Total</th>
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<td># Articles in search results</td>
<td>2,242</td>
<td>6,210</td>
<td>13,493</td>
<td>21,945</td>
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<td>Duplicates</td>
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<td>1,114</td>
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<tr>
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<td>12,379</td>
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<td>1,467</td>
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<td>819 (43%)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Abstract contained quantitative measure of modern method use</td>
<td>211 (11%)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Also contained quantitative “norm” measure</td>
<td>82 (4%)</td>
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</table>
WHAT WE LEARNED
measurement of empirical & normative expectations

<table>
<thead>
<tr>
<th></th>
<th>Measured</th>
<th>Not Measured</th>
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<tbody>
<tr>
<td>NORMATIVE:</td>
<td></td>
<td></td>
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<tr>
<td>What others think I should do?</td>
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<td></td>
</tr>
<tr>
<td>EMPIRICAL:</td>
<td></td>
<td></td>
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<tr>
<td>What I think others do?</td>
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<td>Not Measured</td>
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<td>32</td>
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<tr>
<td>Measured</td>
<td>10</td>
<td>5</td>
</tr>
</tbody>
</table>

Only 5 articles measuring both empirical and normative expectations from PopLine search
Social Norm Measurement in Action
EXPERIENCES FROM THE FIELD
Invited experts
from CARE, the Center for Communications Programs/Johns Hopkins University, the Global Early Adolescent Study (GEAS)/Johns Hopkins University and Strive/London School of Hygiene and Tropical Medicine shared their experiences during a panel discussion on social norm measurement in action. Experts were asked to discuss their theoretical approaches, the social norms their work aims to address, how they measure social norms and limitations of their measurement choices and challenges.
Initial Thoughts on Conceptualizing and Measuring Social Norms

Presented by: Lori Heise, PhD
London School of Hygiene and Tropical Medicine, STRIVE
During Lori Heise’s presentation, she made the point that norms are only one element of what sustains harmful behaviors. It is important to “diagnose” the situation before designing an intervention. What matrix of norms, structural factors, empirical expectations, and/or beliefs is driving the practice or holding it in place? She also asked participants to consider what insights from social norm theory can help inform efforts to change a harmful practice.

Interventions might seek to build a new positive norm or establish new scripts. They should be careful to avoid strategies that communicate that a harmful practice is common.

She also discussed the creative dynamic between empowerment and norms-based strategies. Empowerment focuses on building agency, for example by building horizons/aspirations, self efficacy or encouraging critical reflection. Norms, however, often serve as a brake on social change. Agency helps girls resist social expectations, but it doesn’t transform social expectations.
Final Outcome Measure

FOUR DIMENSIONS

1. Protecting Family Honor
2. Husband’s Right to Use Violence
3. Gender Equality
4. Cycle of Sexual Violence

Each measured from
THREE PERSPECTIVES

1. Community Behavior: What people see happening in their community
2. Personal beliefs
3. Social norms: What others expect of you
Measure Subscale: Protecting Family Honor

What do people important to you expect from you and others?

1. Women/girls not to report rape to protect the family dignity

2. Sexual violence to be handled within the family and not reported to authorities

3. Husbands or fathers will retaliate against alleged perpetrators

Responses on Likert scale from 1-5 (1=strongly disagree to 5=strongly agree) with higher scores indicate that participants think more of the people who are important/influential to them endorse protecting family honor.
Theory into Practice:
Measuring Social Norms for Gender Transformative Programming

Presented by: Leigh Stefanik
CARE
Leigh Stefanik shared reflections on CARE’s journey over the last few years as they have deepened their work in the domain of social norms. CARE is looking at social norms through an implementer lens—driven by an intensive two-year period of learning. They found there was a dearth of literature and much of what existed was related to college drinking. She remarked that the social norms approach has been useful and is helping CARE make sense of how social forces, especially peer pressure, influence behavior – but that it is important to think through measurement and analysis demands on staff capacity.

Leigh suggests that it is important to train research staff and facilitators in the basics of social norms theory, especially for focus group discussions, so they know how to probe and what information is needed. Further, she notes that there is a need for a clear analysis framework for the vignette data centered around identifying and understanding the key signs and symptoms for social norms change. Vignette scenarios need to be carefully tailored to each community and sub-group in order to resonate and elicit useful data.
Global Early Adolescent Study (GEAS):
15 country study of the evolving nature of gender and social relations

Presented by: Robert Blum
Department of Population, Family and Reproductive Health
Johns Hopkins Urban Health Institute
Johns Hopkins Bloomberg School of Public Health
Bob Blum explained the process of developing a gender scale for 10-14 year olds as part of the Global Early Adolescent Study. The gender scales draw from narrative interviews with 30 parent/child dyads in seven countries. Transcripts of those interviews were coded in real—time using Dedoose, yielding a common list of codes, identification of emerging domains, and scale items. The scale domains include healthy sexuality, gender equitability, gender norms and empowerment. 55 items related to masculinities and femininities were included in the pilot tools. These will be reduced to 20 after pre-testing. The team is now working on psychometric testing of the scales, using the pilot data.

According to Bob, this measurement approach is based on Cristina Bicchieri’s work showing limited evidence of a direct correlation between personal beliefs (what I think should be done) and behaviors. Rather, personal beliefs have a predictive effect on behaviors only when they coincide with what individuals expect others will do or think.
Example of GEAS Domains Related to Norms about Masculinities & Femininities

• Adolescent boys are on their own/are unsupervised
• Boys need to show they are strong/tough (to gain respect)
• Boys are naturally attracted to girls
• Boys have girlfriends to gain social status
• Boys fool girls
• Boys should be gentle with/protect girls/treat girls with respect

• Girl’s lack independence
• Girls are weak/afraid/in need of protection
• Girls show deference; are proper/composed
• Girls are responsible for arousing boys
• Girls are responsible for their own safety by behaving properly
• Girls shouldn’t be in romantic relationships/Negative consequences of relationships
How do gender norms inform behaviors?

<table>
<thead>
<tr>
<th>Personal Belief: How much do you agree?</th>
<th>Social Norm: How much would your friends agree?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls are weak/afraid/ in need protection.</td>
<td></td>
</tr>
<tr>
<td>Girls are responsible for their own safety by behaving properly.</td>
<td></td>
</tr>
<tr>
<td>Girls are responsible for arousing boys.</td>
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</tbody>
</table>

Example of questions from GEAS survey on femininities
Social Norms Measurement in Action: Contraceptive Use

Presented by: Doug Storey
Center for Communication Programs, Johns Hopkins University
During his remarks, Doug Storey commented that although we think that people are individual psychosocial units, in reality, there are important clusters. The people who link those clusters have a profound influence on how the two groups become more similar or more different.

Doug presented two useful concepts relevant to interventions that seek to transform social norms to influence behavior:

1. **Spiral of Silence** (Elizabeth Noelle-Neuman): People tend to remain silent when they feel that their views are in the minority.

2. **Bounded normative influence** (Lawrence Kincaid): A minority position can become the social norm by means of the process of bounded normative influence. As long as a minority maintains its majority status within its own, locally—bounded portion of the network, then it can survive, and establish its behavior as the norm for the network as a whole.
Expert Reflection and Guidance
ON MEASURING SOCIAL NORMS
The day closed with discussion of the priorities for advancing social norm measurement in the context of adolescent sexual and reproductive health normative interventions. Participants visited three stations to reflect on three questions:

1. What specific social norms affecting adolescent sexual and reproductive health and family planning use should be a focus of Passages?

2. What should the Passages team prioritize to advance the field of social norm measurement relative to adolescent family planning use?

3. What tools or resources would help you apply Passages findings to your work?
Priority Social Norms

Tim Shand (IRH) and Brad Kerner (Save the Children) facilitated a discussion where participants brainstormed a list of social norms that influence adolescent sexual and reproductive health and family planning use, across the life course, covering very young adolescents, newly married couples and first-time parents. They were also asked to come up with a list of behaviors influenced by these social norms.

Emerging insights:

- Most of the norms and behaviors applied across the life course, and were not limited to a single life stage.

- Many norms were overlapping and intertwined, with multiple norms influencing multiple behaviors.

- It may be possible to identify “mega norms” such as those related to masculinities and femininities which influence multiple behaviors. A focus on those norms may be an efficient strategy to achieve social change.
<table>
<thead>
<tr>
<th>PRIORITY SOCIAL NORMS</th>
<th>BODY &amp; REPRODUCTION</th>
<th>PARTNERSHIP &amp; MARRIAGE</th>
<th>ROLES &amp; RESPONSIBILITIES</th>
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<tr>
<td></td>
<td>Body Comfort</td>
<td>Age at Marriage</td>
<td>Girl’s Education</td>
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<td></td>
<td>Sexuality</td>
<td>Men as Virile</td>
<td>Masculinities (Men as Providers)</td>
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<td></td>
<td>Menstruation</td>
<td>Women as Obedient</td>
<td>Femininities (Women as Nurturers)</td>
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<td></td>
<td>Fertility and Family Size</td>
<td>Men as the Authority</td>
<td>Division of Labor</td>
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<td></td>
<td>Women as Chaste and Pure</td>
<td>Appropriate Communication</td>
<td></td>
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<td></td>
<td>Family Honor</td>
<td>with Peers, Partners, Parents</td>
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<td></td>
<td></td>
<td>Couple Decision-Making</td>
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</table>

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<tr>
<th>THE BEHAVIORS THEY INFLUENCE</th>
<th>BODY &amp; REPRODUCTION</th>
<th>PARTNERSHIP &amp; MARRIAGE</th>
<th>ROLES &amp; RESPONSIBILITIES</th>
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<tbody>
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<td></td>
<td>School Attendance while Menstruating</td>
<td>Conflict Resolution</td>
<td>Care Giving</td>
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<td></td>
<td>Accessing Health Services</td>
<td>Intimate Partner and Sexual Violence</td>
<td>Sharing Household Chores</td>
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<td>Timing and Spacing of Pregnancy</td>
<td>Couple Communication</td>
<td>Task Sharing</td>
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<td>Family Size</td>
<td></td>
<td>Staying in School</td>
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<td>Shared Responsibility for FP</td>
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<td></td>
<td>Men’s Support during Antenatal Period</td>
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<td></td>
<td>Male Circumcision</td>
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<td></td>
<td>Female Genital Cutting</td>
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</table>
Kim Ashburn (IRH) and Betsy Costenbader (FHI 360) facilitated a discussion on measurement, exploring issues related to ways of bounding reference groups and the advantage of a standard set of questions and recommendations for validated scales measuring norms. Participants also pondered how to measure social norms.

Questions considered:

- Is it necessary to measure attitudes, empirical expectations and normative expectations?
- What type of measures, other than scales, could be used?

Key insights from the discussions follow.
KEY IDEAS from the Discussion

Diagnose the Norm

Start with a diagnosis to identify the target behavior and corresponding norms and reference groups. Remember norm change is not an end in itself, it is a pathway to change. We are interested in norms that lead to the behaviors and outcomes of interest to our program.

Don’t put the cart before the horse and assume you know what norm is influencing the outcome or behavior you are interested in, without checking your assumptions.

Ask yourself:

What behaviors are of interest?
Which norms influence those behaviors?
To assess a norm, we need to measure:

- What is typical?
- What is appropriate?
- What do people actually do?
- Who matters? (reference group)

Common approaches include:

- Scales
- Vignettes (qualitative and quantitative)

Ideal measures would:

- Be simple and streamlined
- Be cognitive and life-course specific
- Be adaptable to different contexts
- Embed stages of change in response categories
- Measure incremental change over time
- Monitor cracks in normative structures
Participants identified many measurement challenges including social desirability bias, the need to measure indicators at multiple levels and weak capacity in social norm measurement.

Some commented that the information needed to measure a norm following the Bicchieri quadrant requires a lot of ‘real estate’ in research instruments and has proved difficult to translate and for some respondents to answer.

Another challenge expressed is that norms are often conflicting and competing. What do we measure and when do we measure it? How do we make these choices?
Participants agreed that we should not shut down innovation in measurement too soon. **It is important to continue testing alternative approaches.**
Sophie Savage (IRH) and Kate Plourde (FHI 360) led a discussion on strategic knowledge management and research utilization for passages. Participants emphasized the importance of tailoring approaches to the needs of different audiences, for example, academics or researchers, program managers/designers and policy makers.

The importance of a centralized clearing house or resource hub was also highlighted, along with the challenges of internet connection for many outside of the U.S. While face-to-face learning and sharing was considered most effective, webinars were deemed a practical substitute to provide both immediate and long-term access to information.

Questions considered:

- What type of information is needed to advance social norm measurement with adolescents/family planning?

- What tools and resources would help you apply Passages findings to your own work?
### PRODUCTS
- **Online Toolkits** *(examples: K4H, HC3)*
- Training resources
- Idea book
- Dictionary/glossary of definitions and terms
- Compendium of indicators, scales, measures *(example: gender compendium)*
- Webinars *(recorded for long term access)*
- Reports and syntheses such as evidence briefs
- Data collection tools/templates
- Slide decks/docs that are brief and visual
- eNewsletters
- In-country, in person meetings and workshops

### TIPS
- Tailor approaches for unique needs of donors, implementers, researchers, advocates
- Don’t rely solely on web-based tools due to limited connectivity
- Include detailed documentation of process
- Consider needs for multiple languages and diverse contexts
- Share what we don’t know/what doesn’t work, what works, for what
- Use storytelling—make the case for social norms with compelling stories

Passages will be sharing the results of a global stakeholder analysis outlining responses to similar questions/preferences in the coming months.
Practice:
Transforming Social Norms at Scale
DAY 2 OBJECTIVES

Scale-Up of Normative Interventions

- Develop a common project understanding of terms (e.g. normative change interventions, scale-up)

- Discuss what we know regarding scale-up of normative interventions and scale-up practices for adolescent and youth sexual and reproductive health

- Provide inputs and ideas on a process for identifying critical mechanisms that foster scale-up of normative change interventions

- Guide selection of two normative interventions with promise for scale to receive Passages support in 2016-2017
The Intersection of Normative Interventions and Scale-Up
Transition from research to programs

We began Day 2 with reflections to facilitate the transition from a focus on measurement to a discussion of issues related to program implementation. Nicole Haberland (Population Council), Ruti Levto (Promundo) and Rena Greifinger (PSI) shared their experiences with normative interventions, discussing community, policy, institutional and social norms marketing interventions.

Brad Kerner (Save the Children) presented a reflection on the GREAT Project experience in Uganda, highlighting factors such as scalability, reach and tipping points of normative change, the feasibility of platforms for expansion and the critical role of M&E to guide the scale-up process and keep stakeholders engaged.

Brad Kerner and Susan Igras (IRH) led an interactive session on the definition of normative interventions and scale up, posing the following questions:

1. What is and is not a normative change intervention?
2. What defines scale and sustainability of scale up? Why does this intersection matter?
3. What are some of the unique challenges of scaling up normative interventions?
The Intersection of Normative Interventions and Scale Up: Implications for Passages

Presented by: Brad Kerner, Save the Children
Susan Igras, Institute of Reproductive Health, Georgetown University
## Critical Factors to Consider in Scaling Up Normative Interventions: Lessons from GREAT

### Scalability of Intervention
- Simple enough for other organizations to integrate (they must see the benefit)
- Reasonable cost
- Compatible with receiving organization structures and values

### Coverage and Reach
- Existing platforms to ‘hold’ the intervention
- Multiple user organizations interested in integrating the intervention
- A central coordinator within district structures
- Enabling political, policy, social environment
During the discussion Participants considered:

**Which of these are normative interventions?**

- Comprehensive sexuality education
- Safe spaces for very young adolescent girls
- Youth friendly services in health facilities
- Health posts in schools
- School club discussions and debates
- Serial radio drama
- Serial radio drama combined with community discussions

**Which of these interventions is working at scale?**

- Mass media
- Conditional cash transfer program to keep girls in school and delay marriage
- Digital platforms for adolescents to engage in gender role games and story telling
- Advocacy networks to promote use of male friendly vSRH services
- Community social mobilization
- Social mobilization at a district level to build parental support of girls education
- Safe spaces for girls and boys
- PDQ-defined services to engage providers and community in defining YFSA access
Scale Up and Normative Interventions Defined

Brad and Susan’s presentation was followed by discussion of operational definitions of scale up and normative interventions and reflection on why this intersection is critical in global health.

**SCALE-UP** noun

: deliberate efforts to increase the impact of health service innovations successfully tested in pilot or experimental projects so as to benefit more people and to foster policy and program development on a lasting basis. —ExpandNet

**NORMS INTERVENTIONS** noun

: prevention strategies designed to challenge cultural and social norms that support individual attitudes and behaviors leading to poor AYSRH (e.g., multi-level efforts to end child marriage). The term “intervention” may refer to programs, campaigns, and initiatives.
What is needed to advance the scale up of normative interventions?

Participants gathered in small groups to discuss what is needed to advance scale-up of normative interventions.

Better understanding of how change works. Theory of change, logic model, understanding of unintended consequences, better understanding of what key components lead to impact, clear diagnosis of social norms and their influence on outcomes, understanding of relative contribution of multi-component interventions.

“How to” knowledge, capacity and resources. Resources to implement and evaluate interventions, knowledge of delivery systems that can foster normative change at scale, guidelines to implement and scale up normative interventions, greater capacity in normative interventions.

Measurement approaches. Measures of incremental change, how to measure normative change.

Estimates of costs. Costing studies.

Advocacy. Translation of knowledge to build political will for scale up, documentation of the costs and validity of social norm interventions compared to other approaches.

Scale up models. A better model for scale up of normative interventions.
Scale-Up Matters

There is a gap between effective pilots and those that are simple and sufficiently cost-effective to be scaled. We need to challenge ourselves to develop norms interventions that can be scaled and sustained. There are too many pilots to nowhere.

We need a new learning paradigm to achieve impact at the population level.

The key to scalability is to understand the key elements of change and extrapolate them at the population level. We must move away from replicating packages to an adapted design approach.

If you find that the mechanism to improve educational achievement is a vlight to read by—do you replicate the intervention which was giving everyone a candle or electrify the village?

—Lori Heise
What We Know Regarding Scale-Up of Normative Interventions
Scaling Up Adolescent and Youth Sexual and Reproductive Health (AYSRH) Social Norm Interventions: Literature Review Findings

Presented by: Stephanie Oum
Save the Children
Stephanie Oum from Save the Children presented results of a program review and interviews with key informants conducted by the Passages Scale-Up and Capacity Building Task Team. The program review sought to identify normative change interventions operating at scale and identify factors that influence scale-up.

The review found little evidence or documentation of: scale-up strategies or process, sustainability of norm change, cost of scaling-up or assessment of scale-up outcomes. Stephanie suggested integrating scale-up strategies into intervention design at the planning stage and emphasized the need for materials and resources, such as clear process guidelines, to support scale-up. Different levels of support will be needed for effective scale-up and staff must be flexible to address emerging challenges.

The presentation was followed by small group discussions of implementers and researchers to identify information and practice gaps and suggest areas where Passages can make significant contributions.
Review of the literature:
Scaling up AYSRH Social Norm Interventions

303 Peer-reviewed & grey literature

49 Interventions

✓ 31 Gender Norms
✓ 10 HIV/AIDS
✓ 6 Family Planning
✓ 2 Early Marriage
## Review of the literature:
### Scale-Up and Normative Interventions

<table>
<thead>
<tr>
<th>Entry Point</th>
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<tbody>
<tr>
<td>✓ 37% Communities</td>
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<tr>
<td>✓ 17% Media</td>
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<table>
<thead>
<tr>
<th>Beneficiaries</th>
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<tbody>
<tr>
<td>✓ 23% Adolescent Girls</td>
<td></td>
</tr>
<tr>
<td>✓ 17% Adolescent Boys</td>
<td></td>
</tr>
<tr>
<td>✓ 20% Mixed</td>
<td></td>
</tr>
<tr>
<td>✓ 11% Vya</td>
<td></td>
</tr>
<tr>
<td>✓ 10% Newly Married/Parents</td>
<td></td>
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<tr>
<td>✓ 5% Parents/Children</td>
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<table>
<thead>
<tr>
<th>Key Strategies</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ 38% Community Mobilization</td>
<td></td>
</tr>
<tr>
<td>✓ 13% Marketing/Communication</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Scale-Up Knowledge</th>
<th></th>
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<tbody>
<tr>
<td>✓ 11% Evaluated</td>
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<tr>
<th>Gaps</th>
<th></th>
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<tbody>
<tr>
<td>✓ Scale-Up Strategy and Process</td>
<td></td>
</tr>
<tr>
<td>✓ Costs</td>
<td></td>
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<tr>
<td>✓ Assessment of Effect</td>
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</table>
What does the literature tell us about the scale-up of normative interventions?

- Half of the interventions used multiple strategies
- Public discussion can create critical mass movement leading to change (Bell Bajao)
- Fostering community-driven collective action contributes to new ideation within communities (SASA!)
- Staff need training to help them understand their own values and norms and apply this understanding to transformative approaches
- Interventions should be flexible to account for external factors and challenges
- Engage communities by integrating interventions into local government or other mechanisms
Participants Reflect on the Results of the Review

• Critical reflection is needed to create a new norm or deconstruct an existing norm
• Mass media works at scale, but what about media dark communities?
• Consider diffusion theory and the need to reach a tipping point
• Different normative interventions are needed in different contexts (e.g. high vs. low contraceptive prevalence)
• Design for scale
• Consider innovative partnerships
• Where should we intervene? At the individual or structural level?
Passages Pilot and Replication Studies

The Passages team shared information on research underway in DRC:

1. Pilot of an FBO-based intervention addressing intimate partner violence and FP use—Masculinite, Famille et Foi (TearFund, PSI, IRH)

2. Replication of the GREAT intervention package adapted for the Kinshasa context—Growing up GREAT. (Save the Children, GEAS)
Does a faith-based intervention promoting positive masculinities shift social norms and result in reduced IPV, increased bystander intervention, improved family planning?

SNAPSHOT
Scope:
17 Protestant congregations, Kinshasa
Target:
Newly married youth & first time parents (18-30 yrs)
Design:
Cluster RCT with pre/post design following 1700 women/men, diffusion survey, in-depth interviews
Intervention Package

**COUPLES**
Targeting newly married couples and first time parents within church congregations

**FAITH LEADERS**
Engaging faith leaders at national, regional and parish level

**CONGREGATION**
Targeting broader congregation members to diffuse FP/IPV social norm change

**GENDER CHAMPIONS**
Engaging male/female youth leaders to train couples (through community dialogues), act as models for gender transformation within congregation

**ENABLING SERVICE ENVIRONMENT**
Provision of quality Youth-Friendly Services, GBV response
Growing Up GREAT! Gender Role Equality through School-Based Clubs and Family Engagement

What are effects of a primary and out-of school club-based gender norm change intervention package on girls and boys as they transition through and beyond puberty?

SNAPSHOT
Scope:
2 peri-urban communes in Kinshasa
Target:
10-14 year boys/girls in primary schools; out-of-school 10-14 year boys/girls and parents
Design:
Quasi-experimental longitudinal study following 2,000 VYAs over 4 years
**Intervention Package**

**INDIVIDUAL**
Engaging VYAs participating in after-school clubs & CBO-supported activities

**SCHOOL**
Strengthening support by school-linked providers, teachers and health agents

**FAMILY**
Engaging parents and caregivers through trigger videos

**COMMUNITY**
Engaging adults through community forums
Fostering Normative Interventions At Scale: How Realist Evaluation Can Help
What is Realist Evaluation?
What does it offer

Susan Igras (IRH) provided an introduction to realist evaluation and its role in the Passages Project. Realist evaluation can be a first step in defining normative change mechanisms and connecting causes and effects within a specific social and cultural context. This understanding can create knowledge and evidence that informs program theories of change, improve implementation and foster expansion. Diagraming social change theory can also help identify missing evidence that is needed prior to intervention scale up.

After the presentation, participants broke into groups to discuss the critical contextual factors which foster successful scale-up of normative interventions and identify mechanisms that lead to successful normative change.
Fostering successful scale up of normative change interventions: How Realist Evaluation Can Help

Presented by: Susan Igras
Institute of Reproductive Health, Georgetown University
HOW REALIST EVALUATION CAN HELP

Practice

✓ Identify Evidence Gaps Prior to Scale Up

✓ Inform Theories of Change To:
  • Guide scale up implementation
  • Serve as fidelity check

✓ Help Manage Non-Linear Social Change Processes

Theory

✓ Develop Grounded Theory:
  What works, for whom, in what respects, to what extent, in what contexts, how?
Realist Evaluation: Mechanisms, Contexts & Outcomes

Don’t ask ‘what works?’

Rather, investigate: ‘what works for whom in what circumstances?’

The same program mechanism will have different outcomes in different contexts.
The nature of programs:

• Programs are ‘embedded’
• Programs are ‘active’
• Programs are ‘theories’

Principal research tasks:

• Hypothesize the key mechanisms (M)
• Hypothesize the key contexts (C)
• Explain the outcome pattern (O)
“Realist review does not provide simple answers to complex questions.

It will not tell policy-makers or managers whether something works or not,

but it will provide the policy and practice community with the kind of rich, detailed and highly practical understanding of complex social interventions, which is likely to be of much more use to them when planning and implementing programmes at a national, regional or local level.”

Selection of Two Normative Interventions With Promise for Scale to Receive Passages Support In 2016-2017
Passages will provide technical assistance to 4-6 interventions to elucidate program theory, assess scalability and support scale-up.

Circulate request for scale-up opportunities

Leadership team selects opportunities

Support 4 to 6 promising innovations
Process: Fostering Successful Scale Up of Normative Change Interventions

1. Realist evaluation to understand change process and sustained effect of social norm change.

2. Apply knowledge to improve interventions and move them into scale-up phase.

3. Provide catalytic support for scale-up by helping partners strategically engage new user org systems/actors.
The Passages team presented ten normative interventions to the TEG for consideration of potential support. They were asked to consider the following criteria:

1. Is the intervention scalable?
2. Are platforms available to expand and sustain the intervention?
3. What knowledge or practice gap can we fill by working with this intervention?

After discussion, participants were given five stickers to vote for the interventions that Passages should prioritize. The Husband’s Schools and Girls Holistic Project were selected because they provide the opportunity to inform ongoing scale-up, yield information on the degree to which the interventions are gender-transformative, and examine the potential of scaling an intervention which is strongly embedded in cultural context.
<table>
<thead>
<tr>
<th>POTENTIAL CROSS-ANALYSIS PAIRINGS</th>
<th>NORMS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ishraq (Egypt) Turanawura Safe Spaces (Nigeria)</td>
<td>Early marriage protects girls and communities, education less important for girls and discussions of sexual and reproductive health taboo.</td>
</tr>
<tr>
<td>Husbands’ Schools (Niger) Male Motivators (Malawi)</td>
<td>Real men do not engage in family planning and maternal-newborn health issues as advocates or partners</td>
</tr>
<tr>
<td>Holistic Girls (Senegal) GrowUp Smart (Rwanda)</td>
<td>Early marriage beneficial to girls and communities, girls do not need education and adolescents should not discuss sexual and reproductive health. Appropriate family roles education VYAs entering puberty</td>
</tr>
<tr>
<td>Men as Equitable Partners (Tanzania) MenCare (TBD)</td>
<td>Men should not be involved in sexual and reproductive health decisions and men are providers not caregivers.</td>
</tr>
<tr>
<td>Youth Alert (Malawi) m4RH (Kenya)</td>
<td>Public discussion on adolescent sexuality and diversity taboo, adolescent discussion of sexual and reproductive health inappropriate.</td>
</tr>
</tbody>
</table>
‘Husbands Schools’ (Écoles des Maris)

RESEARCH OPPORTUNITIES

1. Evaluate sustained effects among individuals, reference groups, and community—beyond increased services use, including gender transformation.

2. Assess scalability of combined model (husband and future husband schools) and support strategic planning for expansion to new districts.

SOCIAL NORM ADDRESSED

Real men do not engage in family planning and maternal health.

SNAPSHOT

Resource Organization:
UNFPA Niger

Target Population:
Young men 17-24 (Future Husbands School),
Men 25+ (Husbands School)

Location:
15 health districts in Zinder, Tahoua, Maradi and Dossi regions of Niger

Current Scope:
284 schools, 52 integrated health centers (pilot)
‘Girls Holistic Development’ Project

RESEARCH OPPORTUNITIES
1. Develop program theory of social change using realist evaluation lens; assess scalability.
2. Evaluate the effectiveness of the intergenerational approach.
3. Evaluate scaling up a culturally grounded approach without losing its inherent values.

SOCIAL NORM ADDRESSED
- Early marriage protects girls
- Girls do not need to be as educated as boys
- Discussion of sexuality/Reproductive health with girls or boys is taboo

SNAPSHOT
Resource Organization: “Grandmother Project”
Target Population: School-aged girls, grandparents, influential teachers/community leaders
Location: Velingara region, Senegal
Current Scope: 33 primary schools, 50-70 villages
Wrap up: The Way Forward
The objective of the final session of the meeting was to gather guidance from participants to help Passages achieve its goal of advancing practices for scale-up of normative interventions. A panel of participants provided reflections on theory, measurement, programs implementation and policy, followed by an open discussion among participants.

**TEG insights are presented below, organized by themes:**

- **Principles** for Social Norms and Scale-Up Research and Action
- **Collaborative Learning**
- **Legacy**—What should Passages aspire to?
Principles: Social Norms and Scale Up Research and Action
Prioritize meta norms. *(nodal norms that govern many behaviors)*

Focus on creating and supporting positive norms.

Be scrappy...*and promiscuous.* *(theoretically)*

Think local, learn from global experiences, tailor everything. Context matters!

**DO**

**DON’T**

Lose sight of people. Normative change is about people not doing what is expected of them and how hard that is.

Shut down innovation too soon.
1. Diagnose and analyze which norm is relevant.
2. Map reference groups.
3. Provide space for public discourse.
4. Support early adopters.
5. Support positive norms.
Normative Change

- Is norm change an end or a pathway to change?
- What comes first? Behavior change or norm change?
- Is our goal to change norms or behavior?
- To what extent are we seeking individual vs. social change?
- Power matters—power imbalances underlie all our work.
- We are comfortable working at the individual level, but less comfortable working at the structural level. We need to stretch ourselves in that area.
- Norm change is social change. It is complex and out of our direct control

Scale up (impact at a population level)

- The prevalent public health paradigm for scale up (pilot and replicate at scale) is limited. Are there other options, such as going straight to scale?
- Anything is scalable if you have resources and political will.
- Are we talking about “scale-up”, “working at scale”, or “outcomes at scale”? 
Collaborative Learning
Collaborative Learning

Participants Suggest:

- Share interim results in real time—don't wait!
- Share results in simple language.
- Create accessible, more frequent, shorter pieces.
- Publish findings of literature reviews. (gray literature OK, not only peer review)
- Create process-oriented briefs, such as the ones SASA! publishes
- Convene thought groups to engage in data analysis.

"I'd like to see how ideas take shape."
"I find it inspiring to ponder ideas and share interim thoughts (rather than waiting until fully cooked)."
"Be generous with your learning."
Learning Processes

Participants Suggest:

- Use adaptive learning processes—develop a theory of mechanisms and validate it along the way.

- Do rapid testing, learning across interventions.

- Theories are designed for change: learn as we go.

- Compare what worked/what didn’t—take a deep dive, case study approach.

- Bridge the gap between the behavior change community/concepts and Passages; learn from work on nutrition behavior change.
Legacy: How Can Passages Best Contribute
Legacy

Participants Suggest:

- Improved definition of scale up of normative interventions
- Thorough descriptions of interventions and implementation
- Common understanding of normative change mechanisms
- Understanding of scale-up as a process not a package
- Increased capacity at multiple levels
- Clarity regarding what norms drive behavior (norms diagnostic)

- Improved donor norms
  - Plan with the end in mind
  - Flexible branding to expand “ownership”
  - Allow time up front to design intervention and conduct proof of concept
  - Results-based funding
Experts Advise Passages
Advice from a program perspective: 
Doris Bartel (CARE USA)

PASSAGES SHOULD:

• Design for scale instead of scale-up.
• Be clear about theories of change.
• Implement to reach the tipping point.
• Pursue new, different partnerships, such as social movements and activists.
• Be a disrupting influence.
• Be flexible.
• Take time for people to reflect on their own values.

This is about people—real human beings who are being asked to defy what is expected of them—it’s really hard work for those people to do this challenging behavior. They must feel lonely and nervous.

We need to think about how to build networks and support individuals moving through this process, e.g. negotiation skills, economic empowerment.”
Advice from a research perspective:
Jeffrey Edmeades (International Center for Research on Women)

Theories are designed to change— they should adapt as we go. It is an ever-evolving application process.

Everyone knows that norms exist. We know what they are even if we can’t define them. It’s not just about defining norms, but the mechanisms underlying them.

Give yourself time in the end for reflection. We used to think this, but now we think this.

We’re doing this for change at the individual level to improve people’s lives.

Encourage evidence-based and careful understanding and application of the theoretical perspective.

“The rigor of the approach might be the most beautiful application of this work. The opportunities to do this, are at times, few and far between. This may be a landmark project.”

Keep in mind the importance of developing a culture of learning, sharing what we are finding, and learning from our community.”
Advice from an implementation science perspective:

Lori Heise (London School of Hygiene and Tropical Medicine)

Endorse the idea of a learning environment and adaptive learning process.

Norms are relationships, they are interdependent and inter-relational.

Don’t get lost in the norms language—take what you want and leave the rest.

Brand the project in the context of global ownership, which will help the project feel at home with the project and findings.

Learn from a business model of efforts and failures.

“Hone in on the piece of the puzzle that is social. Learn the most effective way to intervene in the social relational realm, and how to capture that.”
Advice from a donor perspective:
Linda Sussman (USAID)

Passages should aim to:

Bend donor norms about the way they work.

Work collectively to build knowledge by sharing ideas about measurement, raising emerging questions and coordinating work in specific geographic areas/complementary topics.

Share our learnings and mistakes with donors and colleagues.