



PASSAGES PROJECT

TRANSFORMING SOCIAL NORMS FOR SEXUAL AND REPRODUCTIVE HEALTH



USAID
FROM THE AMERICAN PEOPLE

Passages

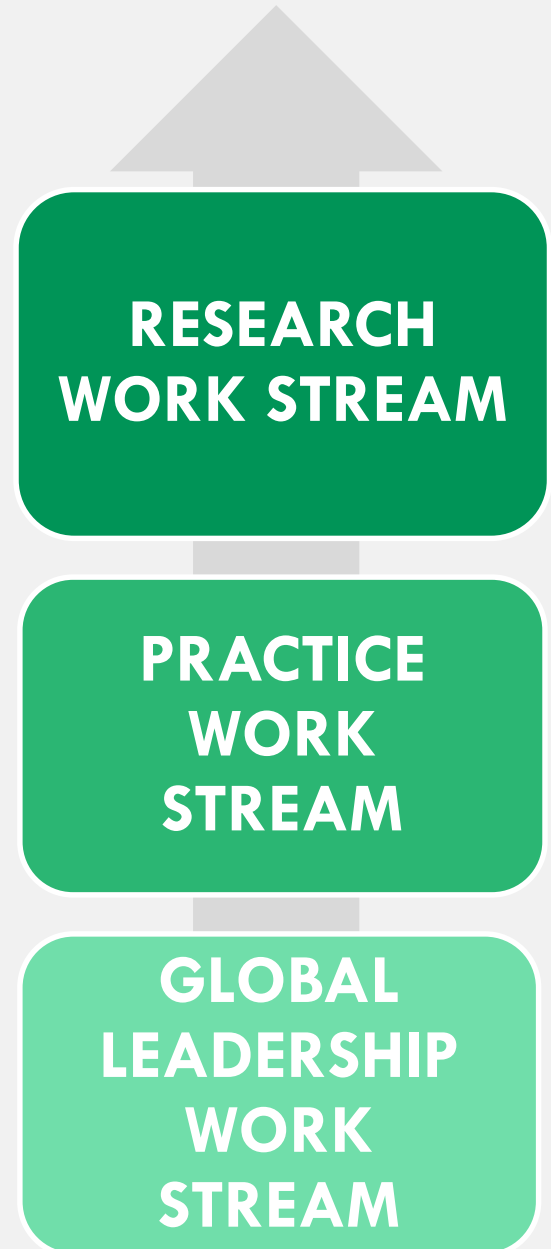
Transforming Social Norms for
Sexual & Reproductive Health

GOAL:

**IMPROVED FAMILY PLANNING
USE AND SEXUAL AND
REPRODUCTIVE HEALTH
AMONG YOUTH, ESPECIALLY
NEWLY MARRIED COUPLES,
FIRST-TIME PARENTS, AND
VERY YOUNG ADOLESCENTS**

PASSAGES RESULTS

- 1** Effectiveness and scalability of interventions assessed and local capacity to expand impact strengthened.
- 2** A body of rigorous evidence on how to foster social norms at scale to support FP use is established and disseminated.
- 3** Knowledge and utilization of evidence to implement effective policies and programs at scale are advanced.



SOCIAL NORMS SHAPE BEHAVIOR



Girls' education



Age at marriage



Violence/coerced sex



Masculine ideologies
(authority, virility, son preference, paternity)



Feminine ideologies
(purity, chastity, obedience, humility)

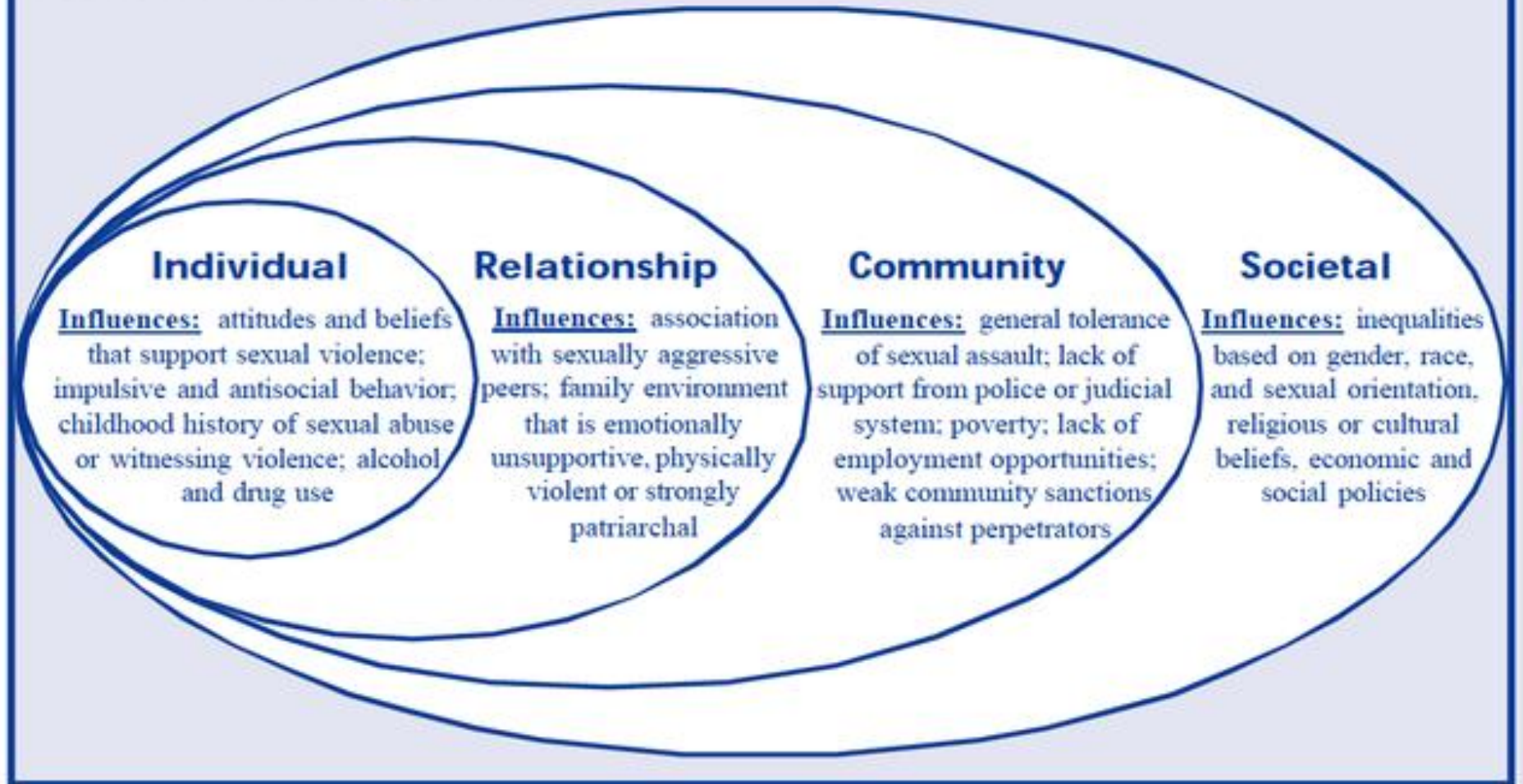
- Access to info and services
- Reproductive intentions
- Women's agency
- Couple communication & decision-making

FP Use

HTSP

**Social norms
permeate all
levels of society
and societal
structures**

Table 1. The Ecological Model



Social norms: unspoken rules of what is typical and appropriate behavior

What are social norms?

- What I think others are doing
AND
- What I believe others think I should do

They are not attitudes or beliefs, but they are embedded in the web of cultural systems

Why do people comply with these rules?

- ✓ They care about social rewards and punishments (although sensitivity to these varies)
- ✓ Often influenced by “reference groups” (people whose opinions matter)

Why do people conform to social norms? (especially if they disagree)

Power, identity and belonging...

- ✓ We are brought up to conform (socialization)
- ✓ We value the approval of others and may fear sanctions

But sometimes we do violate norms...

- ✓ If norms contradict our knowledge and attitudes
- ✓ If agency is strong

Norms, interests and power inequalities

“Norms are vital **determinants of social stratification** as they reflect and reproduce relations that empower some groups of people with material resources, authority, and entitlements while marginalizing and subordinating others by normalizing shame, inequality, indifference or invisibility.

It is important to note that these norms **reflect and reproduce underlying gendered relations of power**, and that is fundamentally what makes them difficult to alter or transform.”

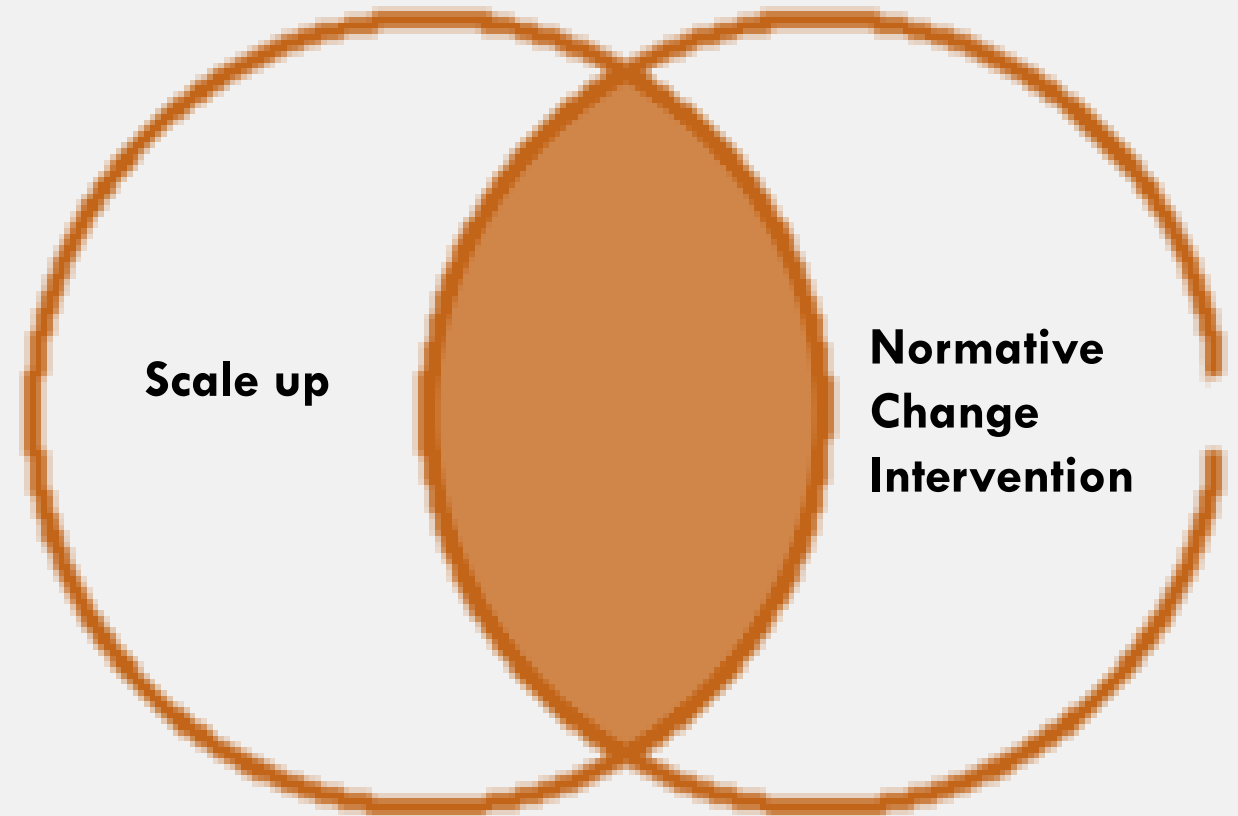
(Sen et al., 2007: 2008)

The intersection of scale up and norm change interventions

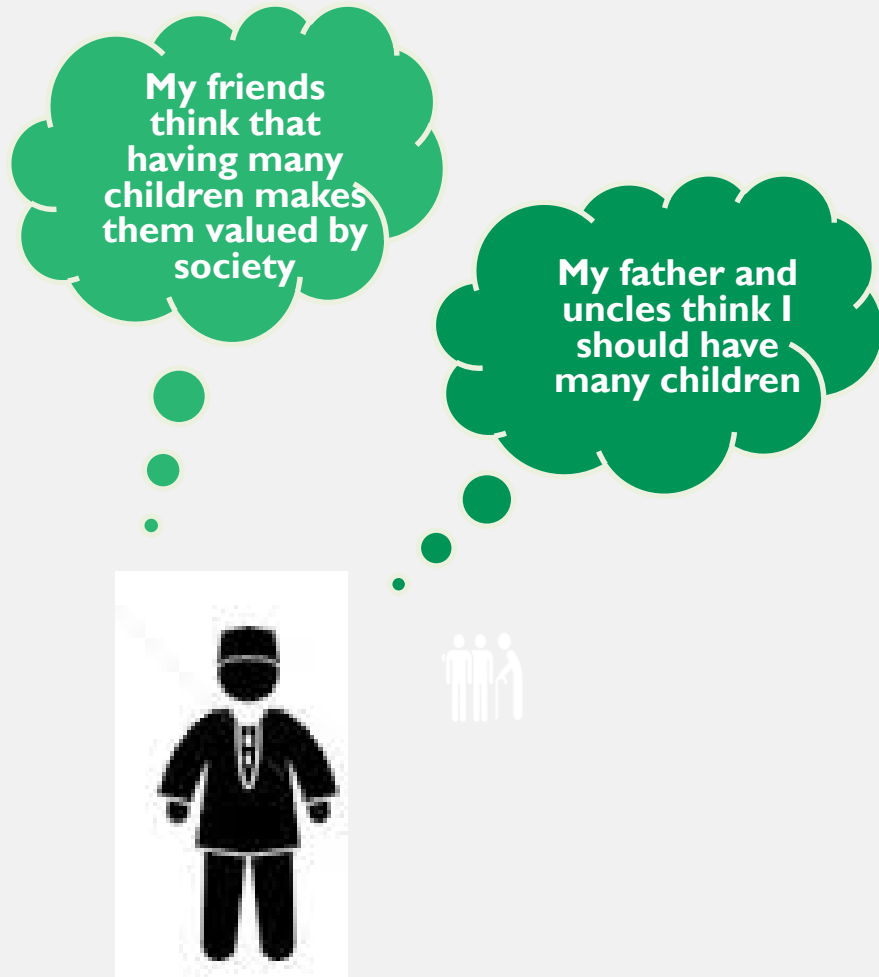
SCALE UP

“Deliberate efforts to increase the impact of health... **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 2010



Interventions focused on social norms that influence behavior



MY ATTITUDES AND BEHAVIORS

An intervention *designed to promote collective change*, by encouraging *communities to reflect on, and question*, social and cultural factors that exist and that support attitudes and behaviors that are harmful to sexual and reproductive health.

-Passages project (2016)



**A
systems
lens**

Focus on the structures, systems and networks that constrain family planning use and healthy timing and spacing, rather than placing the burden on girls and women alone.

Which AYSRH interventions are NOT included?

Inclusion Criteria

- ✓ Exclusively / primarily aim to influence social norms to prevent behaviors that ultimately lead to poor health outcomes
- ✓ Operate beyond individual level, ie, engaged in socio-ecological approaches
- ✓ Have been evaluated during pilot stage,
- ✓ Are in process of being expanded to reach new populations, increasing health impact.

Exclusion Criteria

- ✓ Occurring before 2000
- ✓ Primarily focused on individual beliefs and behaviors, e.g. Youth Friendly Health Services, Comprehensive Sexual Education
- ✓ Expansion exclusively via traditional and social media platforms
- ✓ Spontaneous social change movements (e.g. Arab Spring movement)
- ✓ Interventions that look beyond AYSRH (e.g. nutrition, sanitation)

LEARNING COLLABORATIVE:

ADVANCING RESEARCH AND PRACTICE ON
NORMATIVE CHANGE FOR ADOLESCENT
SEXUAL AND REPRODUCTIVE HEALTH AND
WELL-BEING

Steering Committee Members:



- Bill & Melinda Gates Foundation
- Children Investment Fund Foundation (CIFF)
- UK Department of International Development (DFID)
- FHI 360 (co-convenor)
- Institute for Reproductive Health, Georgetown University (convenor)
- London School of Hygiene and Tropical Medicine
- Overseas Development Institute/GAGE
- Pathfinder International
- UNICEF Office of Research – Innocenti
- United States Agency for International Development (USAID)

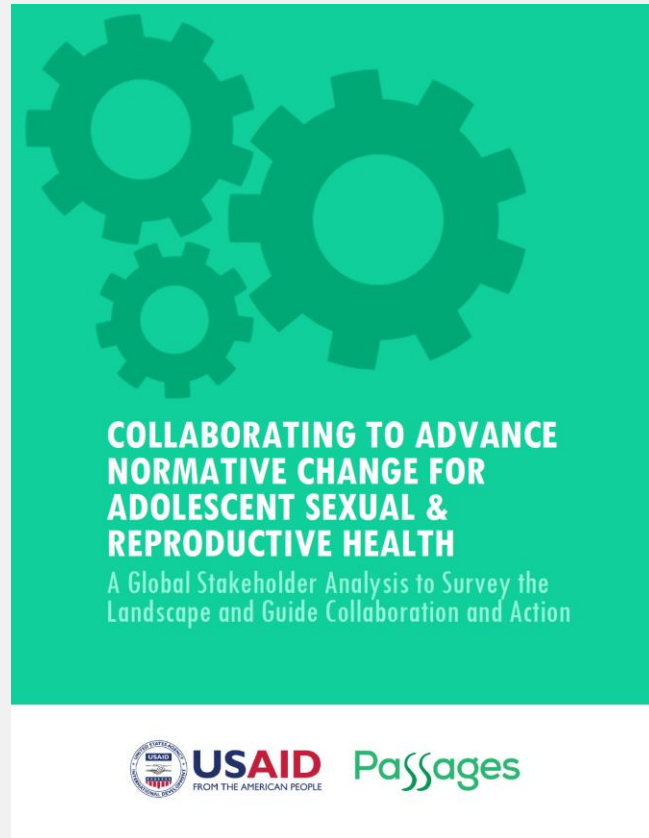
**Over 30
additional
organizations
engaged to
date!**

Why a Learning Collaborative?



- ✓ many **new initiatives** on adolescents and social norms
- ✓ **fragmented field**, creating duplicative efforts and communication and co-ordination gaps
- ✓ **poor theoretical understanding** of normative change mechanisms to support adolescent SRH
- ✓ **lack of a documented (and disseminated) evidence-base** on shifting social norms: what works, why, and costs
- ✓ **few promising/best practices**
- ✓ **limited understanding of scale-up** and sustainability of normative change initiatives

Mind the evidence gap



Passages literature reviews and stakeholder assessment identified a need for knowledge and practice to ...

- ✓ Understand how normative change works
- ✓ Measure social norms
- ✓ Assess intervention effectiveness and costs
- ✓ Move beyond pilot efforts to scale

And for greater focus on the practical implementation of current social norms science, including development of tools and guidance

vision:

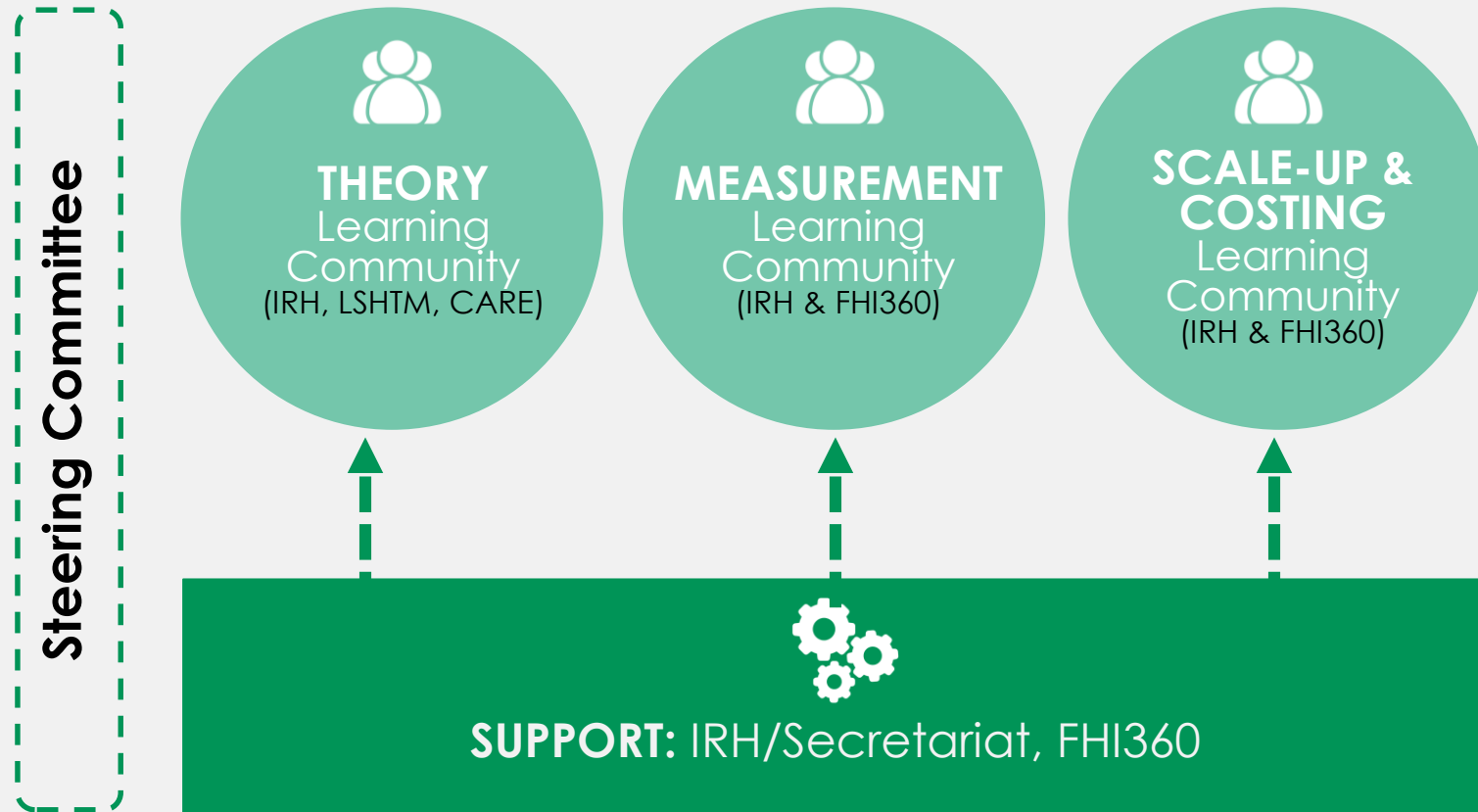
We envision a world where the **powerful influence of social norms** in shaping adolescents' lives is **widely understood**, and where projects and programs improve adolescent sexual and reproductive health by **applying normative science** at scale.



mission:

Facilitate collaboration between organizations working on adolescent sexual and reproductive health norm change initiatives, enhancing collective efforts, building knowledge, and developing shared tools to promote and guide effective social norm theory, measurement and practice at scale.

Learning Collaborative Structure





Develop and share practical theoretical tools to advance clarity and congruence in the design, monitoring and evaluation of normative interventions.

- Provide a **common language and set of concepts** to use
- Build on work by members and others to propose a **conceptual framework of the influence of social norms**
- **Develop theories of change** for normative interventions



Strengthen the measurement of social and gender norms.

- **Landscaping**/cross-organizational mapping
- **Develop and share practical guidance** to advance measurement science
- Develop a peer-reviewed and tested **social norms diagnostic tool**
- **Create an online compendium** of social norms measures
- Seek to **develop specific measures with social and gender norms**



Informed by the work and experiences of the Learning Collaborative partners **strengthen the design, evaluation and costing** of adolescent and youth sexual and reproductive health normative change interventions **going to scale.**

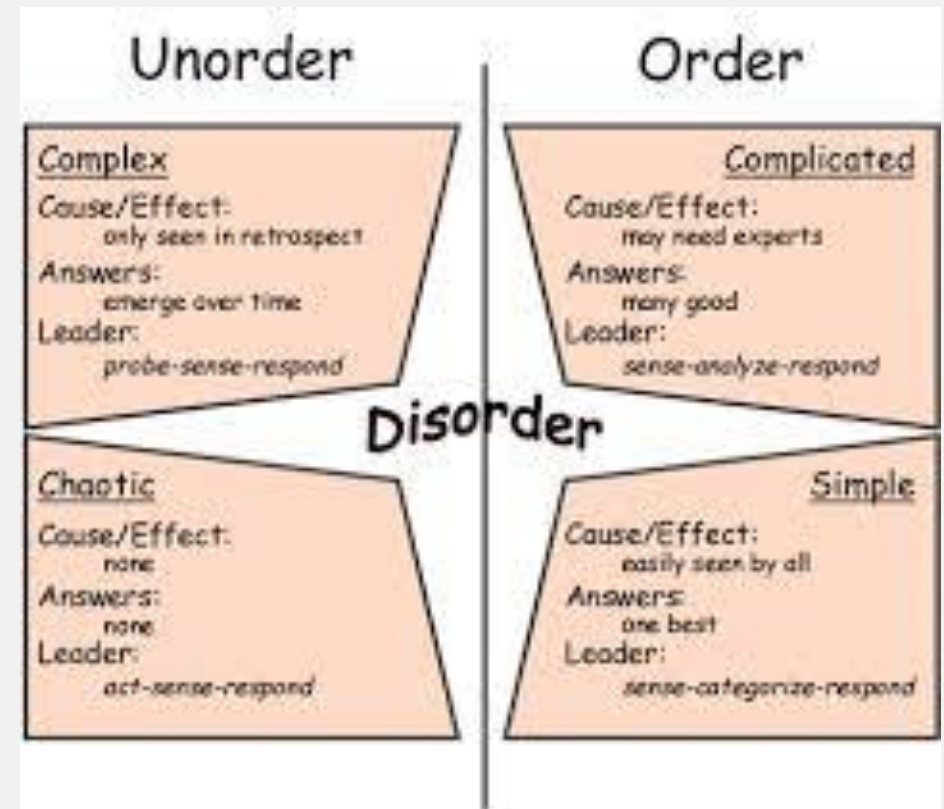
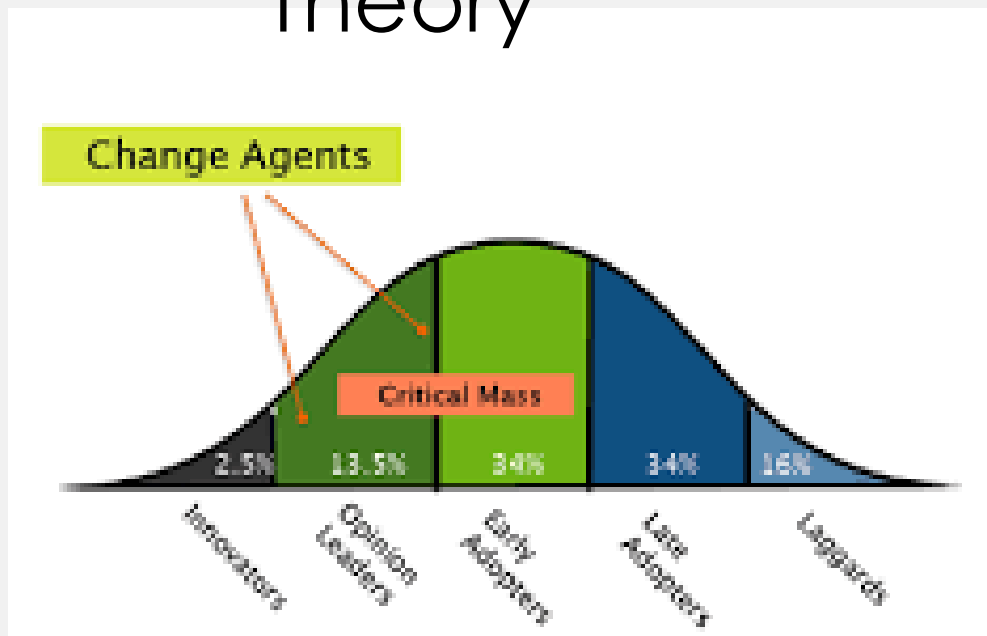
- **Develop a normative change and scale-up toolkit** to support design and scale-up of normative change interventions,
- **Revise and test a primer** for activity-based costing of normative interventions

LC ISSUES OVERVIEW - SCALE UP OF NORMATIVE CHANGE INTERVENTIONS

**SIGNIFICANT OUTCOMES — AT SCALE — SUSTAINED —
COMPLEX ENVIRONMENTS**

Theory from different disciplines, including:

Diffusion of Innovations Theory



Systems / Complexity theory

Different frameworks to guide practice focused on scale-up within formal systems

None developed explicitly for normative change interventions

- ✓ Brookings Institution & International Fund for Agricultural Development
- ✓ Management Systems International
- ✓ ExpandNet/WHO

Commonalities Across frameworks:

- ✓ Scalable designs
 - ✓ Systems focus
- ✓ Sustainability of effect
 - ✓ Managing change

Scale up of normative change vs. health system interventions

- ✓ “Software” approaches focused on reflecting, catalyzing new ideas about sensitive normatively-condoned behavior
- ✓ Volunteer driven, community diffused
- ✓ Informal relationships with services
- ✓ Institutionalization not linked to public sector systems
- ✓ Accountability to whom? State, NGO, Communities, Donors

Normative Change Interventions

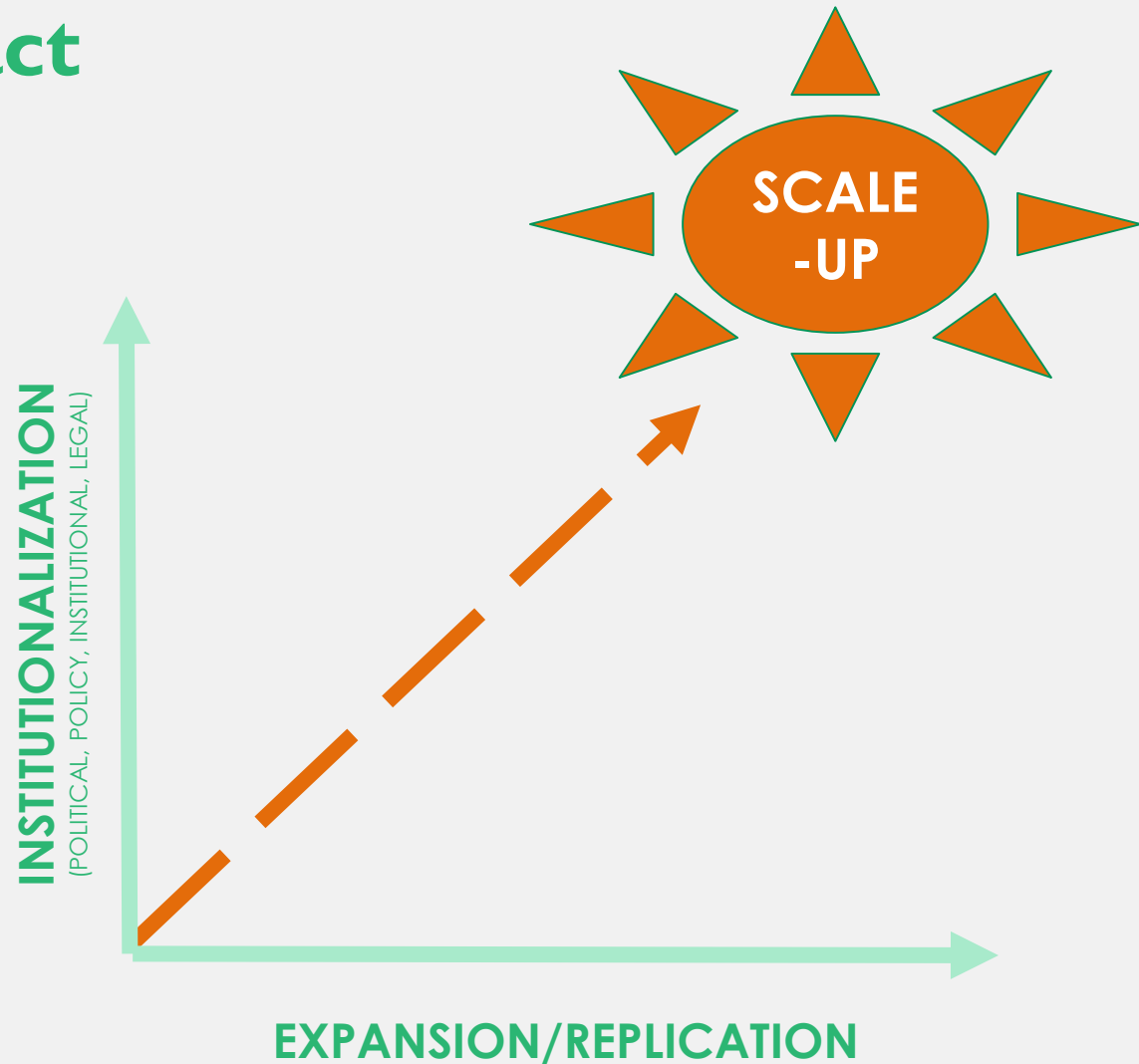
Strategies designed to catalyze communities to reflect on and challenge existing social norms that support individual attitudes and behaviors leading to poor adolescent and youth sexual and reproductive health

Passages Project

What are some of the conceptual issues?

- ✓ **DEFINITION:** What is a normative change intervention in AYSRH? What does scale up mean for normative change interventions in our sector?
- ✓ **ROLES/PARTNERSHIPS:** Role of civil society vis-a-vis government, particularly when gender (or other normative behavioral shift) is not institutionalized within government.
- ✓ **DELIVERY PLATFORMS:** Normative change interventions rarely use service delivery platforms. The platforms and processes that need to be used are not well developed or understood. We need to continue to grapple with this.

GOAL definition:
Sustained behavioral impact
or
Sustained intervention?



Current Practice in AYSRH in LMICs:

42 AYSRH normative change interventions included in 2016

Passages review:

- Most made decisions to go to scale based on positive results of pilots (92%)
- Most were community-based (83%)
- Most measured changes in knowledge, attitudes and behaviors (> 88%)
- Less than one-third assessed changes in perceptions of community norms (28%) and only 4 specified type of norm change measured (<10%)

What are some of the practice issues?

- ✓ Uncertainty of how to design scalable normative change interventions and how to successfully scale them up
- ✓ What are good practices and models for successful scale-up?

For the LC:

- ✓ Do we need a specialized framework for normative change interventions?
- ✓ What can we learn about existing models to apply to our work on AYSRH normative change?

Scale-up M&E – Norm change challenges

- ✓ **Intervention fidelity** under non-pilot conditions
- ✓ **Expansion** and **institutionalization**
- ✓ **Capacity** of new user orgs to offer

PLUS

- ✓ Exposure (direct versus indirect via new idea **diffusion**)
- ✓ Normative shifts/**tipping points**
- ✓ Monitoring **social push-back**
- ✓ **Sustainability** of normative change once scale-up ends

FOR THE LC

- ✓ What technical guidance should we provide programs implementing normative change interventions?
- ✓ What level of measure is feasible and useful for program decision-making and evidence-building?
- ✓ After the pilot phase should we evaluate only the process of scale-up or also its outcomes in new contexts?
- ✓ At what point in scale-up is an adapted intervention no longer evidence-based?

Learning and documentation

DOCUMENTATION GAPS

- ✓ Scale up strategy employed
- ✓ Process of scale up
- ✓ How scale-up process was evaluated
- ✓ Sustainability of norm change
- ✓ Cost of scale up

Questions for the LC

- ✓ How can we strengthen our process documentation from pilot through scale up so others may benefit from our learning?
- ✓ Before scaling up, what evidence is needed to link X norm/s to target behaviors?

Opportunities to Work Together



**Regional
Meeting(s)**



**Journal Article/
Manuscript**



Tool



Technical Brief



Webinar



**Online
Discussion via
Springboard**

Learning Collaborative Timeline

