



On the CUSP of Change:

Ethical and effective scaling of social norms programming for gender equality

Community for Understanding Scale Up (CUSP)

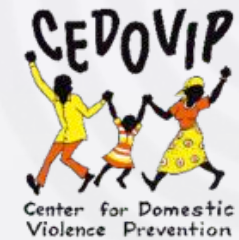


Who we are

Our **social norms change for gender equality** initiatives, methodologies and materials have been / are being scaled up in different ways:

- ✓ mentioned in "best practices" roundups
- ✓ donors have recommended and/or prescribed them in their funding calls
- ✓ being used by many other groups – often in positive ways and with innovative adaptations, sometimes in ways that are problematic

Who we are



ORGANIZATION	INITIATIVE & COUNTRY OF ORIGIN	TYPE OF INITIATIVE
Raising Voices/CEDOVIP	SASA! - Uganda	3-year community mobilization program for VAW and HIV prevention
Salamander Trust	Stepping Stones - Uganda	12-week facilitated peer-group training program to build communication and relationship skills
Tostan	Community Empowerment Program - Senegal	3-year holistic participatory human rights-based education program for adults and adolescents.
Multisectorial partnership	IMAGE Programme - South Africa	Microfinance for women combined with gender and HIV training
Oxfam	We Can - Bangladesh / Nepal	Large scale campaign to mobilize change makers
Institute for Reproductive Health, Pathfinder, Save the Children	GREAT - Uganda	Radio drama, community mobilization, group activities and service linkages
Sonke Gender Justice	One Man Can - South Africa	Community Education and mobilization to involve men in violence and HIV prevention
Puntos de Encuentro Nicaragua	We're Different / We're Equal (Sexto Sentido) - Nicaragua	"Social soap" TV series + multi-media, community capacity-building and organizing + multi-sector coalition building

One definition of Scale up:

“Expanding, adapting and sustaining successful policies, programs or projects in different places and over time to reach a greater number of people.”



Why we came together

- ✓ Side conversations about concerns and challenges as well as excitement about opportunities
- ✓ Interest in sharing and collectively analyzing experiences
- ✓ Commitment to synthesize and share lessons learned related to ethical and effective scale up practice

The context: Opportunities

- ✓ Growing evidence on impact and importance of social and gender norms change for advancing gender equality and related outcomes
- ✓ Growing evidence and knowledge about core principles and attributes of effective norms change initiatives
- ✓ Donor interest in scaling up of effective initiatives

Concerns and challenges

- ✓ Northern donor and research community emphasis on RCTs leads to exclusion and/or invisibility of other promising initiatives
- ✓ Pressure to expand reach and cut costs can lead to:
 - Cookie-cutter approach that doesn't adequately take new context into account
 - Abbreviation or mix-and-match implementation that may compromise core principles
- ✓ Less willingness to fund innovation in what is still a developing field

Scale up types

Horizontal: Geographical expansion, replication → adaptation

Vertical: Institutionalization via organizational policies and budgets

'Grafting': Adding components to an existing initiative

Wholly-owned: Original designers/implementers work directly in new region

Additive/Partnerships: Original implementers help scale with new partners

Multiplicative: New implementers take on work

Dissemination: Making how-to information freely available

Scale up processes/issues

Diffusion: Planned or spontaneous

Structure: Centralized/top-down or decentralized/bottom-up

Implementation: Standardized or flexible/adaptive

Pace: Rapid (often more popular with donors) or phased/gradual

Leadership: Expert/donor driven or participatory / local demand

Ups and downs: The case of Stepping Stones

Characteristics

- 12-week participatory peer-group training program to build communication and relationship skills, address gender norms, violence, HIV, stigma
- Structured stages led by trained facilitators (“staircase” approach)
- 4 different peer groups: adult women | adult men | adolescent girls | adolescent boys

Scale up

- Over last 20 years, had been used/disseminated/adapted in many places, often in coordination with creators
- Now in 60+ languages in all continents
- 2008 RCT of modified Stepping Stones in South Africa showed reduced intimate partner violence and HSV2.





MRC: Gambia – 300 villages

What went right:

- **In touch with creators for adaptation**
- **Facilitators** went through process first as participants, then trained
- **Worked with all groups**, followed “staircase” approach
- **Incorporated local priorities:** condoms as fertility protection, involving imams in endorsing their use, added session on SRH.
- **Multiple positive outcomes:** reduced IPV, greater condom acceptance, greater cross-gender & cross-generational respect and collaboration.

DREAMS/PEPFAR – Africa

What went wrong:

- Prescribed to potential partners as condition for funding
- Not in touch with creators, or contacted too late to do adequate adaptation, and went ahead anyway because of donor pressure to start
- Compromised key principles:
 - No systematic adaptation process, including translation into local languages.
 - Reduced duration, no understanding of staircase model, excluded important exercises
 - Instead of four peer groups, focus on HIV- adolescent girls, with only partial involvement of male partners, no adult groups
 - Inadequate facilitator training
- **Did harm:**
 - DREAMS required HIV testing of adolescent girls. While those who tested positive were offered treatment, they were excluded, de facto exposing their status.
 - Facilitators mistakenly thought they should promote traditional female behavior to reduce VAW

Collective CUSP experiences

Pitfalls:

- Shortcuts that compromise core principles and mechanisms
- Replication without adequate adaptation
- Implementers not yet fully on board with key principles
- Inadequate training of facilitators / promoters

Consequences:

- May result in harm to people and communities
- Can negatively affect creators and credibility of initiatives
- Poor investment in terms of actual bang for buck

Considerations

- Understanding what works in terms of principles and mechanisms is fundamental
- Replication of RCT-tested initiatives doesn't guarantee cost-effective positive outcomes in other settings
- Prescribing interventions to potential grantees can lead to poor scale-up, lack of success and a wasted investment
- We're still learning: Invest in innovation guided by knowledge of the core principles.

Recommendations for ethical and effective scale up

BEFORE	PREPARATION	IMPLEMENTATION
<ul style="list-style-type: none">• Talk with creators & in-country partners about appropriateness of adaptation/implementation in new context• Understand principles of core elements and discuss what kind of adaptation is necessary and/or possible for this setting• Assess whether time and resources are adequate (and don't go forward if not) – including funding for TA	<ul style="list-style-type: none">• Create advisory group for ongoing engagement• Build in process/time for new partners to internalize core principles and components and adapt• Engage end-users in adaptation, field testing and adjustments• Invest in and support staff and facilitators – personal processes	<ul style="list-style-type: none">• Document ongoing adaptation and implementation• Continued support for staff and facilitators• Monitoring, learning, adjustment, evaluation



Some final thoughts

Bad news ☹️

No cheap and quick fix

Good news 😊

Principles and mechanisms are free

Further reading

<https://tinyurl.com/CUSP2017>



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A vibrant, stylized mural on a wall. The central part features a group of people with large, expressive faces. To the right, there is text in a bold, sans-serif font. The background of the mural includes various patterns and colors like blue, green, and red. A semi-transparent blue box with a white border is overlaid on the center of the image, containing the text 'Thank you!'.

Thank you!

JOIN HANDS TO
PREVENT DOMESTIC
VIOLENCE AND
HIV/AIDS
IN
MULAGO II