Developing a measurement plan: A Practical Session

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THE SCIENCE OF IMPROVING LIVES

Recap:
Monitoring and Evaluating for Social Norms Change Programs

Measurement Plan

AGGREGATED ACT MEASURES/INDICATORS

COMPONENT OF THE ACT FRAMEWORK	SOCIAL NORMS CONSTRUCT/CONCEPT	AGGREGATED MEASURE/INDICATOR
Assess what people know, feel and do	Know	Change over time in knowledge of FGM
	Feel	Change over time in beliefs about FGM
		Change over time in intentions not to practice FGM
	Do	Proportion of girls and women who have undergone FGM
		Proportion of households moving along the continuum of change
Ascertain normative factors	Descriptive norms	Change over time in perceived prevalence of FGM
	Injunctive norms	Change over time in the approval of FGM by self and others
	Outcome expectancies	Change over time in individuals' identification of benefits and sanctions related to FGM
		Change over time in intention to give rewards and impose sanctions related to FGM

Source: The ACT Framework: Towards a new M&E model for measuring change around FGM

What normative factors to measure…
to monitor & evaluate social norms change

Descriptive and Injunctive Norms

Reference Groups

Outcome Expectancies

(I.E., REWARDS OR PENALTIES)

Norm Indicators: **Do and Approve of**

Descriptive norms
(Perception of what others do)
The proportion of respondents who perceive others in the community **are** getting their children immunized.

Injunctive norms
(Perceptions of what others approve or disapprove of)
The proportion of respondents who perceive that others in the community **approve of** getting their children immunized.

Norm Indicators: **Behavior of Interest**

Descriptive norms
(Perception of what others do)
The proportion of respondents who perceive others in the community are getting their children immunized.

Injunctive norms
(Perceptions of what others approve or disapprove of)

The proportion of respondents who perceive that others in the community approve of getting tested for HIV.

Norm Indicators: **Reference Groups & Target Populations**

Descriptive norms
(Perception of what others do)

Q: Do you think that unmarried girls in the congregation are getting tested for HIV?

I: The proportion of *congregation members* who perceive that [**unmarried girls in the congregation**] are getting tested for HIV.

Target population whose behavior you are trying to change = Unmarried girls in the congregation

Injunctive norms
(Perceptions of what others approve or disapprove of)

Q: Do you think that other members of your congregation approve of unmarried girls getting tested for HIV?

I: The proportion of *congregation members* who perceive that [**other members of their congregation**] approve of [**unmarried girls in the congregation**] getting tested for HIV.

Reference group whose approval matters to the behavior = Congregation members

Norm Indicators: **Outcome Expectancy**

Q: How likely do you think it is that an unmarried girl in this congregation will be harassed if she is seen getting tested for HIV?

Response options: Very likely, somewhat likely, not likely

I: The proportion of respondents who think it is very likely unmarried girls in the congregation [will be harassed] if they are seen getting tested for HIV
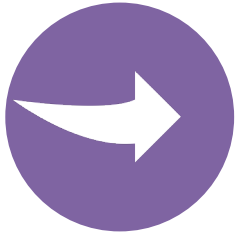
RECAP: Social norm measures...

Must:

1. Measure either the **descriptive** norm (perceptions of typical behavior) or **injunctive norm** (perceptions of what is appropriate)... or ideally both

2. Refer to one **specific behavior**

3. Refer to a clearly defined **reference group**. If not, it's an individual attitude

4. Refer to a **target population that is intervenable for the program**

Also good to:

5. Determine what are the **outcome expectancies (i.e., rewards or penalties)**

How to measure normative factors for M&E

Single item survey questions

Scales and Indices

Vignette surveys

Social Network Mapping

"Single item" survey questions

Descriptive norms

- What proportion of [others in your community] do you think [**have been tested for HIV /immunize their children**]?

Injunctive norms

- To what extent do [elders in your congregation] approve of [**getting tested for HIV / using condoms**]?

Index: Composite indicator for descriptive and injunctive norms from ACT Framework

Survey items	Scoring directions	Indicator
1. Using a scale from 0 to 10 where 0 is none and 10 is all, about how many girls 10-14 years in your community are currently cut? 2. Using a scale from 0 to 10 where 0 is none and 10 is all, about how many girls 15-19 years in your community are currently cut? 3. Using a scale from 0 to 10 where 0 is none and 10 is all, about how many women in your community are currently cut? 4. Do you think your immediate family expects you to continue or abandon FGM? 5. Do you think your extended family expects you to continue or abandon FGM? 6. Do you think your friends and peers expect you to continue or abandon FGM? 7. Do you think your community expects you to continue or abandon FGM? 8. Do you think others whose opinions are important to you expect you to continue or abandon FGM?	Items 1-3: max score 10 per item Items 4-8: score =1 for "abandon", =0 for "continue" Score will range from 0 to 35; a higher score indicates social norms more supportive of FGM abandonment	Average Overall Social Norms Scale

Sample vignette – Abdiboru project

I will tell you a story... Rehima is a 16 year old student who lives with her parents. She attends school and helps her mother with household chores. One day Hindiya, Rehima's cousin comes over to visit Rehima's family. They are about the same age. Hindiya announces that she is engaged and getting married in a month's time. She also strongly suggests to Rehima that she should also marry soon as she is getting old for marriage. Hindiya reveals that she also knows someone from their village who is interested in marrying Rehima.

1.   *What would most adolescent girls in Rehima's position do in this situation?*

2.   *What would Hindiya and most other girls expect Rehima to do in this situation?*

But Rehima doesn't want to marry young. She announces that she does not want marry at this age.

3.   *What would Hindiya and most other girls say about Rehima's decision?*

4.   *Would the opinions and reactions of her peers make Rehima change her mind about refusing the marriage?*

5.   *Are there any circumstances where it would be considered more or less acceptable for Rehima not to get married at her age?*

Social Network **Mapping Census**

*"Now we are going to talk about the people in your network **– people who you interact with, people you receive support from, people you consider to be part of your world. People you mention can live in this village or elsewhere**."*

MATERIAL/PRACTICAL/EMOTIONAL NETWORK GRID

- **"**What is your relationship with (first name of the person)? You can mention more than one kind of relationship. For example, this person can be your aunt and your health provider at the same time."

- "Is (first name of the person) a member of your household? If s/he is not, does this person live elsewhere?"
  If the answer is "elsewhere," ask the following question:
  "What town does (the first name of the person) live?"

- "In the last three months, have you spoken with (first name of person) about birth spacing or a method that would allow you to delay or avoid pregnancy?"

- "In your opinion, would you say that (first name of person) approves of people who use a method of family planning to spaces their births?"

- "In your opinion, would you say that (first name of person) uses a method of family planning to space their births?"

Material Network Grid

Name	Relationship (a)	Residence (b)	FP communication (c)	Approves of PF (d)	Uses PF (e)

Source: Tékponon Jikuagou Project, Institute for Reproductive Health.

How long might it take for norms to change?

- **You should not necessarily expect to see very large changes** in norms over the course of your project, especially if the time frame is quite short

- **Attitudes typically change faster than norms**, as social processes often very slow to change

- **Collecting data at repeated points** recommended

Baseline

Monitoring Time Point 1

Monitoring Time Point 2

Evaluation Time Point 3
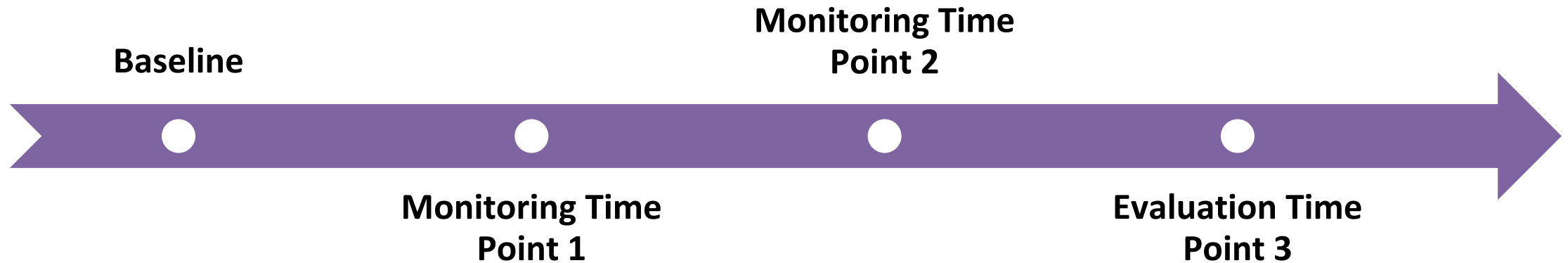
Measurement **Moments & Methods**

STAGE	PURPOSE	METHODS
Formative research	Identify possible social norms, sanctions, reference groups	Literature review, informal discussions with community
Baseline	Verify social norms, assess strength, identify "cracks" in norms & opportunities for interventions	Quantitative surveys, qualitative interviews, & vignettes in FGDs
Monitoring	Observe signs of norm change; monitor backlash	Activity monitoring, observation
Endline	Changes in social norms, correlate with changes in behavior & attitudes	Quantitative surveys, qualitative interviews, & vignettes in FGDs

Developing the **Monitoring Indicator**

Survey Question(s)	Scoring Directions	Indicator
D1. Using a scale of 0 to 10, where 0 is none and 10 is all, about how many girls 10-14 years in your community are currently cut? D2. Using a scale of 0 to 10, where 0 is none and 10 is all, about how many girls 15-19 years in your community are currently cut? D3. Using a scale of 0 to 10, where 0 is none and 10 is all, about how many women in your community are currently cut?	Average all scores. Note: questions can also be assessed individually and compared to look for perceptions in trends in cutting (i.e. is it perceived to be less prevalent now than in older generations)	Change over time in average perceived prevalence of FGM Key indicator for assessing descriptive norms
I1. Do you think your immediate family expects you to continue or abandon FGM? I2. Do you think your extended family expects you to continue or abandon FGM? I3. Do you think your friends and peers expect you to continue or abandon FGM? I4. Do you think your community expects you to continue or abandon FGM? I5. Do you think others whose opinions are important to you expect you to continue or abandon FGM?	Percent who respond "Abandon" to all questions. Note: questions can also be assessed individually and compared to look for differences in perceptions across reference groups.	Change over time in perceived social expectations to abandon FGM Key indicator for assessing injunctive norms

Source: The ACT Framework: Towards a new M&E model for measuring change around FGM

Practical Exercises

Activity Break Out:
Develop a Measurement Plan

1. Using your case study narratives and related theories of change, identify at least one descriptive norm and at least one injunctive norm to be monitored

2. Consider also other relevant issues to monitor (i.e., sanctions, reference groups, backlash, sensitivity of sanctions, other social change) and note at least two of these on the measurement plan

3. Determine how you will measure these normative factors - i.e., when (at what time points) and with what data collection activities (i.e., survey items, vignettes, program data etc.)

4. Develop indicators for each norm of interest

Case Study 1: Healthy Homes

Community Context

A district in Malawi has set a goal of certifying all villages as Open Defecation Free by 2023, but only about 50% of villages are certified to date. Most households in these villages do not have an improved latrine and many community members do not think they are necessary or perceive that they are a luxury.
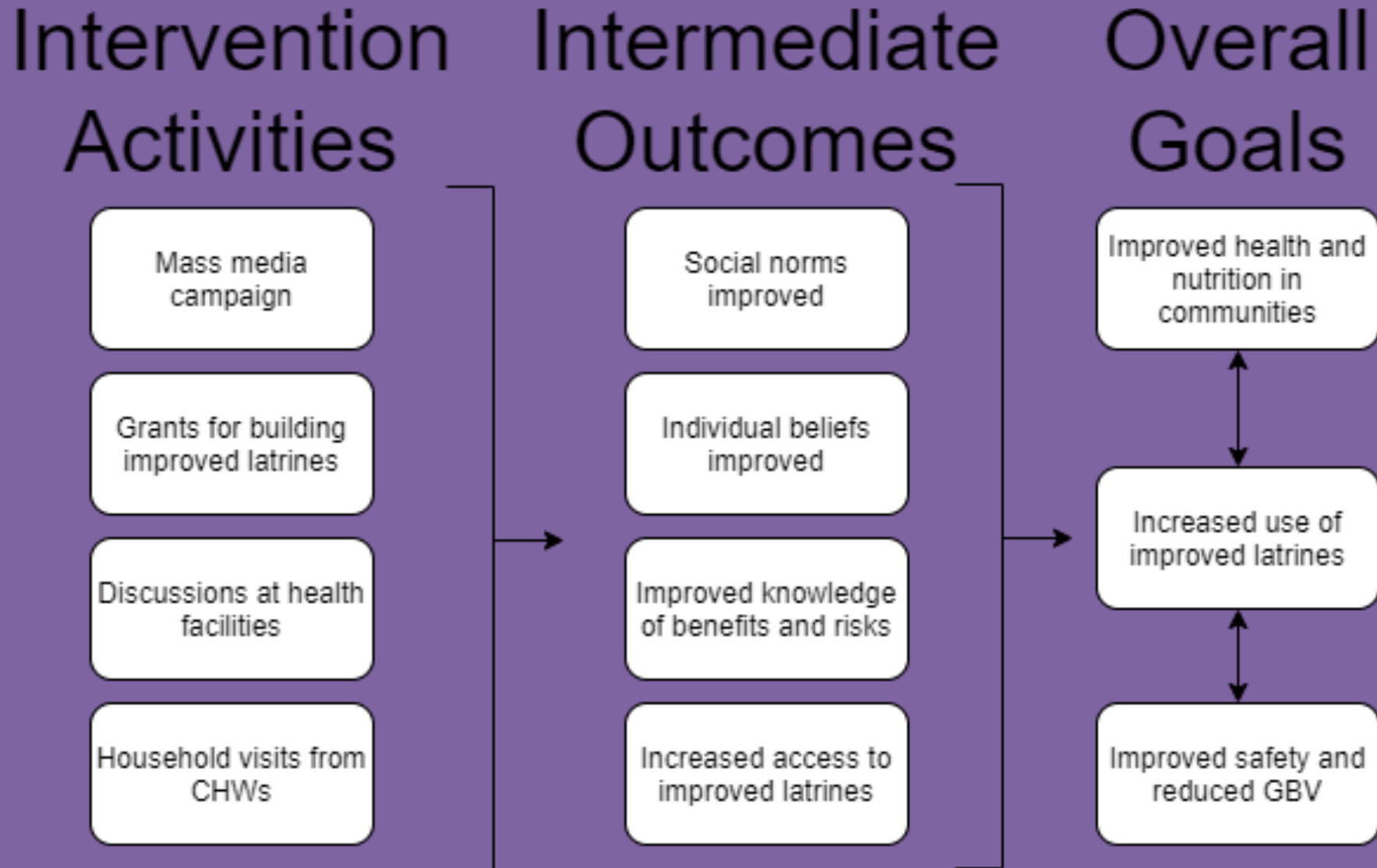
Intervention Description

Healthy Homes is using mass media campaigns to promote knowledge of the benefits of improved latrine use and positive social norms about improved latrine use. Healthy Homes is also randomizing households in the targeted villages to receive visits from a CHWs who explains the benefits of improved latrine use with the idea that the additional component (intervention exposure) will augment effects compared to mass media alone.

The program is also providing grants to assist with building latrines and people are hearing about the latrines at health facilities.

Case Study 1: Healthy Homes

Intervention Activities	Intermediate Outcomes	Overall Goals
Mass media campaign	Social norms improved	Improved health and nutrition in communities
Grants for building improved latrines	Individual beliefs improved	Increased use of improved latrines
Discussions at health facilities	Improved knowledge of benefits and risks	Improved safety and reduced GBV
Household visits from CHWs	Increased access to improved latrines	

Case Study 2: Faith and Family

Community Context

Desired family size among young couples in Nairobi is relatively small compared to previous generations, but use of highly effective, modern contraceptive methods to achieve spacing and family size goals is low. Male partners often lack knowledge of modern methods and see it as a "women's issue", while young women prefer to make decisions about method use with input from their partners. Some young couples believe church teaching discourages use of some methods.

Intervention Description

A conference of churches in Nairobi is partnering with a local NGO to promote healthy timing and spacing of pregnancies among young couples in their congregations through a project called Faith and Family. The project is training pastors to give scripture-based sermons that support shared decision-making and pro-active planning for family size and spacing, including using modern methods to achieve these goals. Peer leaders will also lead small group sessions that incorporate these lessons during young adults' bible study groups and a CHW will visit each group to answer questions about methods and provide referrals. Over time, the project hopes to see increases in use of modern methods, a decrease in IPV, and improvements in couple communication about family planning.

Case Study 3: Dakar Girl's Initiative

Community Context

In several communities in and around Dakar, rates of secondary school completion for girls is substantially lower than for boys. At the same time, rates of gender-based violence against women and girls are high and early marriage is common. Many families and community members believe girls who are married or pregnant should not attend school.

Intervention Description

The main goals of the Dakar Girl's Initiative are to reduce child marriage, reduce gender-based violence, and improve equity in educational attainment by influencing the beliefs and behaviors of young adults. The program uses radio programming, a soap opera on TV, a Facebook group, WhatsApp groups, and a school-based Safe Spaces program.

Case Study 3: Dakar Girl's Initiative

Intervention Activities

- Media Campaigns (Radio, Television)
- Virtual Engagement (Social Media, WhatsApp)
- Safe Spaces programs in schools

Intermediate Outcomes

- Social norms improved
- Individual beliefs improved
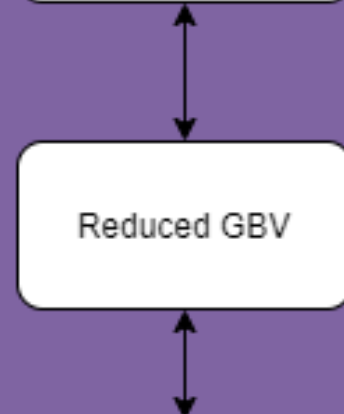- Improved interpersonal relationships
- Increased ability to report GBV

Overall Goals

- Improved school completion rates
- Reduced GBV
- Reduced early marriage

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Measurement Plan Template

Factor to measure	Measurement Frequency	Measurement Approach	Indicator
Descriptive norm = Example: Perceptions that congregation members vaccinate their children	Baseline, Midline, Endline	Single Item Survey Question	Change over time in average perceived prevalence of children being vaccinated in the congregation
Injunctive norm =			

Activity:
Report Out!

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