Addressing Harmful Social Norms in Emergencies

Challenging harmful social norms is crucial for achieving lasting change in the power and choices women have over their own lives.

Social norms approaches have proven effective in changing power relations at household level and transforming structures which have traditionally harmed or excluded women and girls.

Social norms approaches have great potential for positive change, but in emergencies it is crucial the context is taken into account to ensure actions do no harm.

This brief outlines additional considerations which must be taken into account when addressing social norms in emergencies.

Social norms

What are social norms?
Social norms are rules to govern behavior that are made and shared by a group. Distinct from personal beliefs and attitudes, social norms are shaped by an individual's observations of what others do, as well as their perceptions of what is expected of them. Social norms include gender norms which specifically restrict women and girls from exercising their rights.

Learn more in this social norms explainer >

What are social norms approaches?
Social norms programming seeks to address root causes of gender inequality by identifying specific norms which have negative consequences for women and girls, and taking action to shift these. Proven social norms approaches include household dialogue, community dialogue, male engagement and women- and girl-led action.

Learn more about proven social norms approaches in this research brief >

Social norms in emergencies: What's different?

During an emergency and its aftermath, access to lifesaving care and support is unpredictable, vulnerability to violence is higher, and systems that protect women and girls, including family, community and state structures, may weaken or break down. Harmful norms can be exacerbated, or new social norms arise as a result of the challenging situations people face. There may also be new opportunities for social change by building positive norms which challenge previous discriminatory views.

To avoid doing harm, social norms programming should only be considered in stable situations where GBV response services are already available and should follow all relevant minimum humanitarian standards.

Any actions to shift social norms in emergencies must align with CARE's approach to Gender In Emergencies. Learn more about CARE's approach to Gender in Emergencies >
Why address social norms in emergencies?

Promoting positive social norms can prevent GBV by challenging the norms that support violence and a culture of impunity. It can also improve the response to GBV by reducing victim blaming and the social stigma that survivors experience, and promoting help-seeking behaviors. Changing gender and social norms within an emergency context can promote shared control of resources and decision-making. Programming that does not work in this manner can do harm by reinforcing harmful stereotypes or compounding risks to women and girls.

After life-saving services have been established, program teams should determine the extent to which social norms programming can be safely implemented to achieve this. During acute emergencies these may have a broad focus on addressing at least some aspects of gender inequality and lay the groundwork for future social norms interventions.

Learn more about why and when social norms approaches are included in GBV prevention in this GBViE Implementation Guide >

2 CARE, Global Women’s Institute, IRC (International Rescue Committee) and What Works to Prevent Violence, 2018. Intersections of Violence against Women and Girls with Statebuilding and Peacebuilding: Lessons from Nepal, Sierra Leone and South Sudan

When to use social norms approaches in emergencies

DO NOT attempt to address harmful social norms during response to acute emergencies. Focus on immediate response efforts.

DO NOT attempt to address harmful social norms if GBV response services are not available. Doing so may exacerbate risks for women and girls.

DO use social norms approaches during protracted crises where GBV referral networks and case management services are available.

CARE’s approach to gender in emergencies

ASSESS
Rapid gender analysis (RGA)
Analyze the different needs, experiences and capacities of all people during a humanitarian crisis

MAINSTREAM
Minimum commitments
Mainstream gender and GBV risk mitigation into humanitarian programming

EMPOWER
Women lead in emergencies
Make women’s voices count in humanitarian planning and decision-making

PROTECT
Ending gender-based violence in emergencies
Prevent, mitigate and respond to GBV during and after a humanitarian crisis
What needs to be considered in emergencies?

Even in emergencies, social norms programs need continuous and longer funding rather than short 3-6 months funding cycles. This means more structural social norms work is likely to take place in settings with cyclical emergencies or as emergencies shift out of the acute phase.

- **Do no harm**: As with all programming, social norms approaches must take steps to ensure they do no harm.
- **GBV Minimum standards**: All interventions should adhere to CARE’s Guidance for GBV in Emergencies and the IASC GBV Minimum Standards. Most importantly, norms-shifting activities should not begin unless GBV response services are available and referral networks identified. Where GBV service providers do not exist, staff should refer to the GBV Pocket Guide.
- **Gender & Power analysis**: All interventions should be informed by understanding of the specific challenges faced by women and girls in the context. In emergencies, the minimum requirement is for a Rapid Gender Analysis (RGA).
- **Inclusion**: Social norms interventions should consider the challenges faced by the most marginalized women and girls in the context, any additional protection concerns and potential ways to address barriers to their meaningful participation.
- **Risk Mitigation**: At minimum, social norms interventions must deliberately identify GBV risks and take specific actions to reduce the immediate risk of exposure to GBV. A Safety Audit should be conducted, or a safety mapping exercise with women and girls if this is more appropriate to the setting, such as in urban areas where displaced communities are living.
- **Male engagement**: Engagement of men, boys and power-holders within communities is crucial to gain buy-in for norms-shifting activities to avoid backlash which could place women and girls at additional risk. In protracted settings, it is important to identify services for men and boys – such as men’s health and psychosocial support, child protection, livelihoods or social support – before engaging in social norms work and pairing this with resources to meet men and boys’ needs.

STAFF PREPAREDNESS & RESPONSIBILITIES

How should staff be prepared to engage in social norms work in emergencies?

- Teams should be trained on offering Psychological First Aid (also known as GBV First-Line Support).
- Staff must be familiar with the GBV Pocket Guide to be able to respond appropriately should women or girls disclose instances of GBV, in individual or group settings.

What should staff understand about their role?

- Frontline staff conducting social norms activities should be clear their role is to ensure they do no harm and refer to appropriate specialists.
- Staff should understand Psychological First Aid is not a substitution for GBV response services.
- Staff should ensure individuals understand the limits of their role (for example, they can listen and support them to seek further support but are not counselors) when communicating with someone who has disclosed violence.

Teams implementing social norms programming in emergencies should coordinate closely with humanitarian Gender in Emergencies teams when designing and implementing programs.
What specific norms are women and girls facing in emergencies?
Discussion with girls, partners and staff in NorthWest Syria highlighted:

**Negative norms**
- Boys are prioritized for education opportunities, meaning more girls dropping out of school.
- Women are expected to be in the kitchen and do household chores.
- Communities expect decisions will only be made by adult males.
- Communities expect girls to accept what their parents and elder brothers say.
- Girls believe they are unable to speak freely without fear that someone will object or verbally abuse them for expressing their opinions.
- Communities believe girls should not move around in the community unaccompanied.
- Communities believe violence against women and domestic violence are acceptable.
- Communities expect girls to get married once they reach puberty.
- Communities accept girls marrying perpetrators of GBV to avoid stigma.

**Positive changes**
- Previously, family said women don’t need to work. Now, they sometimes allow women to work because of need and poor financial situation.

**“Women and girls feel more under pressure because before war, these norms were there but not to this extent.”**

Program Coordinator, Syria Relief

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**PROGRAM EXAMPLE: Girls in Action in Northwest Syria**

The successful Girls in Action model from the Tipping Point initiative was implemented for many years in development settings in Asia. This aimed to reduce child, early and forced marriage, encouraging girls to identify harmful social norms and take action together to shift these.

When this was adapted in Northwest Syria, a number of changes were made. These include:

- Instead of girl-led activism, which was considered too controversial for the context, the project instead referred to this as girl-led action.
- A Rapid Gender Analysis was conducted for the context, with a review of Focus Group Discussion responses relating specifically to adolescent girls as well as additional literature review of evidence relating to girls in the context.
- A service mapping was conducted and referral pathways set up for GBV, Protection and Child Protection.
- CARE and partner staff were trained in GBV risk mitigation, including GBV guiding principles, Revisiting Personal Assumptions, Disclosure Management in group and individual settings and how to provide psychological first aid to those who share they have experienced gender-based violence.
- Girl-led risk mitigation and management planning took place before any activity in the community, not just public events.
- Monthly reflections were held on GBV risks and barriers to participation.
- Separate sessions were conducted with boys and with men. Reflection sessions with boys included sessions on gender, power and masculinity; fatherhood sessions were viewed as useful for men; and participants reported sessions on healthy relationships were effective. Sessions with community leaders were intentionally done with men and women in separate groups to take into account cultural practices in Northwest Syria.

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