



SOUTH ASIA  
**SOCIAL NORMS**  
LEARNING COLLABORATIVE

# Understanding Social Norms in Family Planning: Dynamics & Measurement



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## Authors

**Drishti**

*CML Associate, Project Concern International*

**Gaurav Gupta**

*Manager-Innovation, Project Concern International*

**Dr. Shobhit Srivastava**

*Assistant Manager CML, Project Concern International*

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# Navigating social norms

Within any given community or group, a set of unwritten rules known as social norms govern what actions are considered acceptable and appropriate. These norms, upheld by influential individuals such as sexual partners, friends, peers, family members, and religious or community leaders—known as reference groups—play a crucial role in shaping an individual's choices. Deviating from these norms can result in various repercussions, including social isolation or a decrease in social standing<sup>1</sup>. On the contrary, those who align with these norms are provided incentives or benefits. Hence, the level of social activity and rewards are positively correlated<sup>2</sup>. In the realm of contraception and reproductive health, the choices and actions taken by individuals or couples are shaped not only by their personal knowledge, beliefs, and attitudes but also by the subtle yet potent forces of "social norms." These unspoken guidelines, deeply rooted within the communities they inhabit, exert considerable influence on decision-making processes<sup>2</sup>.





# Shaping behaviour: Unraveling social norms

When examining social norms, two distinct dimensions come into play: descriptive social norms and injunctive social norms. Descriptive social norms revolve around individuals' beliefs about what others actually do in a given context. These norms provide insights into the behaviour that are commonly observed within a particular group or community. On the other hand, injunctive social norms are centered around individuals' beliefs about what others approve or disapprove of in terms of behaviour.

These norms shed light on the perceived societal judgments and expectations surrounding certain actions. By exploring both descriptive and injunctive social norms, we can gain a comprehensive understanding of how social influence shapes our behaviour and guides our perceptions of acceptability within various social settings<sup>1</sup>. When it comes to contraception and reproductive health decisions, social norms encompass a range of factors, including power dynamics in decision-making,

determining the timing and number of children, defining boundaries for sexual activity, and establishing guidelines for seeking healthcare services<sup>1</sup>. Family planning serves as a crucial means for individuals and couples to achieve their envisioned family size and determine the ideal spacing and timing of their children's births. This encompasses the utilization of contraceptive methods, as well as the treatment of involuntary infertility. The essence of family planning lies in its voluntary nature, allowing individuals to make informed choices about their reproductive journey. With an array of readily available customizable and effective contraceptive methods, family planning ensures that each person's unique needs and preferences are met, promoting a sense of acceptability and ease of use for all. By recognizing the significance of family planning, we can foster an environment that empowers individuals and couples to take charge of their reproductive health, enabling them to shape their futures in alignment with their aspirations<sup>3</sup>.

“

## **Descriptive norm**

Example:

“I will not be using any contraceptives as most of the newly married women in my community do not use them.”

“

## **Injunctive norm**

Example:

“It is expected and encouraged for all newly married women in my community to refrain from using contraceptives.”

# Shaping behaviour: Unraveling social norms

Gender norms, a key component of social norms, hold exceptional relevance for sexual and reproductive health.

These norms play a pivotal role in shaping societal expectations, defining the roles of men and women, and consolidating power and resources within male-dominated institutions. Consequently, gender roles and inequalities become influential factors that significantly impact health outcomes. By examining the intricate relationship between gender norms and sexual and reproductive health, we can gain a deeper understanding of how power dynamics and disparities manifest, ultimately shedding light on potential avenues for promoting more equitable and inclusive healthcare practices<sup>1</sup>.



# Conceiving constraints: Fertility pressures

Within the context of family expectations, both husband and mothers-in-law often place significance on couples having children soon after marriage. The ideal timeline is within the first year, which symbolizes health, fertility, and marital bliss. Women bear the responsibility if a child is not conceived early, facing potential mistreatment as a result<sup>4</sup>. Couples expressed a strong desire to have children relatively quickly after marriage, and they also believed that others in their social environment (including parents and community members) shared this norm<sup>5</sup>.

Sons are frequently favoured over daughters by both husbands and wives, impacting the family size and contraceptive decisions. Contraception is less likely if a boy has not been born, and the non-use of contraceptives may persist until the desired number of sons is achieved.

This son preference arises from cultural traditions where boys inherit the family name property/wealth,

and represent the family's voice in the community. Sons are also expected to care for ageing parents. Meanwhile, girls are seen as having no substantial contribution to the family, as they are anticipated to leave upon marriage<sup>4</sup>. Injunctive norms surrounding son preference were strong, and wives often felt pressured to give birth to a boy, a factor that determined the use of contraception<sup>5</sup>. A complex situation emerges where men may exert control by restricting contraception or influencing childbearing decisions. Paradoxically, they are often not held accountable for taking responsibility in family planning. This gendered dynamic calls for a critical examination of societal expectations and the need for more equitable approaches to family planning decisions<sup>4</sup>. A descriptive norm emerged that males often assumed a dominant position in terms of decision-making power when it came to issues around family planning and the adoption of a contraceptive method<sup>5</sup>.





# Insights from NFHS and Alternative Measurement Approaches

Regarding the National Family Health Survey (NFHS), it lacks specific inquiries pertaining to social norms related to Family Planning (FP). The survey employs four questionnaires, of which only two address social norms in the men's questionnaire concerning Family Planning. These two direct questions are as follows: a) "Contraception is women's business, and a man should not have to worry about it," and b) "Women who use contraception may become promiscuous." However, one of the previous studies, based on Demography and Health Survey (DHS) data<sup>6</sup>, utilized an indirect approach to gauge gender and collective norms by utilizing community-level factors derived from aggregated variables at the unit level. In India, relying on the NFHS for collecting data on social norms is not recommended due to the sensitive nature of these questions and the need for additional resources to ensure accurate measurement. The utilization of contraception is influenced by various social norms, including both specific norms and broader domains such as gender and reproductive norms. Breakthrough Action (2020) identified five distinct sets of social norms that impact the utilization of contraception. These norms encompass fertility norms, norms related to sex, agency norms, systemic norms, and norms concerning the body<sup>7</sup>.

There are broadly three ways to measure social norms around family planning

i.e., through participatory approach<sup>8-10</sup>, qualitative tools<sup>11-17</sup> and quantitative tools<sup>16,18-20</sup>. The recent study by Bhan et al., 2023 used the fertility norms scale (FNS) that was more focused on measuring injunctive norms. The study used a set of 10 questions to measure injunctive fertility norms using a 5-point Likert scale<sup>21</sup>. Similarly, one of the other studies measured perceived descriptive and injunctive norms using a 5-point Likert scale<sup>22</sup>. Another study by Costenbader et al., 2019 measured descriptive and injunctive norms using a certain set of questions on a 4-point ordinal response scale; along with that the study too tried to measure the influence of a number of reference group<sup>23</sup>. Few other studies also used a different set of questions on Likert Scale to measure descriptive and injunctive norms<sup>22,24-26</sup>. A previous literature review argued that there is no scale measure of social norms that can be applied across geographies and cultures; even there is a difference in the terminologies used across literature that needs to be looked at<sup>27</sup>. Moreover, the study argued that apart from measuring social norms; future studies should not assume the reference groups but rather explore them and act accordingly<sup>27</sup>. The authors of this document also suggest that exploring rewards and sanctions is an important aspect when investigating social norms; this will help in designing the appropriate interventions.

# SBCC tools to tackle social norms



1

## **Knowledge, Attitude, and Practice Survey:**

This survey can be used to assess the level of knowledge, attitudes, and practices related to family planning among the target audience.



2

**Barrier Analysis:** This involves identifying the barriers that prevent individuals from using family planning methods and developing communication strategies to address those barriers.



3

## **Theory of Planned Behavior:**

To develop communication strategies to promote positive attitudes and intentions towards family planning.



4

## **Social Network Analysis:**

This involves mapping the Social Networks of the target audience to identify influential individuals who can help spread messages related to family planning.



5

## **Entertainment Education:**

This approach combines entertainment with health education to promote positive health behaviors, including family planning.

# SBCC activities to tackle social norms



Existing  
Platforms

Adoption of existing platforms to meet the needs of beneficiaries and leverage the effectiveness and reach of platforms and planned interventions to reach key stakeholders to promote the use of contraceptives.



Capacity  
building

Capacity building of community resource persons working on community engagement among households and community members on awareness of health and family planning.



Mass media

Development, and adaptation of state-specific approaches and campaigns on healthy timing and spacing. Using mass media can be an effective way to reach a large audience and challenge social norms related to family planning.

# SBCC activities to tackle social norms



Radio programs

Radio is widely accessible in India and is a great tool for reaching a large audience. Radio programs can include discussions, phone-ins, and dramas that address social norms and promote family planning.



Mobile Phone Apps

Developing easy-to-use mobile apps that provide information on family planning methods and their benefits can be an effective way to reach young people. These can include tools to track menstrual cycles, reminders for contraceptive use, and information about contraception options.



Door-to-Door Campaigns

Door-to-door campaigns involve community health workers visiting households to raise awareness about family planning and provide information about contraceptive options.



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