Corrigendum

Using social norms theory for health promotion in low-income countries
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Health Promotion International, day017, https://doi.org/10.1093/heapro/day017

This is a correction to: Health Promotion International, https://doi.org/10.1093/heapro/day017 (Published: 22 March 2018)

The authors of the manuscript have corrected the example used in the section “using the framework, a practical example from an intervention design workshop”. Below, we report the revised section that includes, in italic, the new text as well as a note where sensitive text was removed.

Let us give an example. Recently this framework was used to facilitate the design of an intervention on social norms and violence against children (VAC). During the design workshop, participants split into three groups. Participants identified, by group, the factors contributing to VAC in the region where the intervention was to be run. They did so by discussing the existing evidence (as well as their own understandings as cultural insiders) of how the factors in each section of the diagram contributed to sustaining VAC in that particular area. The groups then regathered and compared/contrasted their findings. The final list that emerged as a result of the plenary discussion included several factors sustaining or potentially preventing VAC in the intervention area [note: three examples previously included here were removed in the revised version]. As participants identified these factors, they specifically looked at the role that social norms played in sustaining them.

Workshop participants then proceeded to the second step. The second step is action-oriented: Programme designers identify the key factors that their intervention can and should address and seek collaborating partners to address factors that fall outside the reach or realm of expertise. Participants in the workshop first grouped similar factors into themes, and then discussed the dynamic relation between these themes. Several questions emerged in this discussion; for instance: Which themes are more important to address in the intervention? What would be the cascading effect of changing social norms on the different themes? Which social protective social norms can we leverage? Which themes required the collaboration of other stakeholders? From this conversation, participants drew a diagram showing the dynamic relation between themes, and their influence on VAC. This diagram eventually informed the following conversations on what entry points existed for the intervention and on what collaborations were required to achieve effective sustainable change.

The purpose of the dynamic framework is not to determine precisely in which domain a particular factor should fall. Rather, it is to generate discussion and reflection among practitioners about the factors that influence a particular health outcome in a given context and the role that social norms may play in strengthening or weakening those factors. Such discussions help plan an intervention and assess the need to coordinate with other actors to ensure effective and sustainable change.