



CARE Ethiopia

A Decade of Program Learning Series

Social Analysis and Action (SAA)

Helping drive social norms and gender equality

Social and gender norms can either facilitate or constrain women and girl's access to economic opportunities, education, employment and entrepreneurship. They also play an important role in women and girl's health outcomes (both physical and psychological). Gender norms work alongside poverty to determine people's decisions about how they use scarce resources and what the future holds for each of their children, and in Ethiopia this is no exception. In Ethiopia, poverty and gender norms combine to constrain adolescent girls' development and wellbeing, for example early marriage is still common in rural areas. The Amhara region, one of CARE Ethiopia's programming areas, has one of the highest rates of early and forced marriages in the country where as many as 48% of girls are married by the age of 15. This has serious consequences for the lives of these adolescent girls with respect to sexual and reproductive health (SRH), education, and economic stability. CARE Ethiopia knows that discriminatory gender norms are depriving girls and women of opportunities to achieve their full potential and that investing in gender equality approaches are central to addressing these challenges and achieving gender equality.

Social Analysis and Action (SAA) is one of CARE's models for gender equality. It is a community-led social change process through which individuals and communities explore and challenge social norms, beliefs and practices around gender and sexuality that shape their lives. SAA can also be adapted to examine issues specific to Food and Nutrition Security,

Women's Economic Empowerment, Gender-based Violence and even Climate Change Adaptation). SAA uses participatory tools – some developed by CARE and some borrowed from others – to achieve the long-term goal of empowering vulnerable communities through the advancement of equitable gender, social and power norms. Staff transformation is a fundamental aspect and foundation of the SAA approach, setting it apart from other behavior change models.

How we have been using and adapting Social Analysis and Action (SAA)

CARE Ethiopia has implemented the SAA approach across different types of programming as a key approach to driving gender equality. For example, through its Adolescent Girl's Empowerment programming, SAA has been utilized to identify and challenge harmful social attitudes and norms that negatively impact the lives of adolescent girls, especially out-of-school adolescent girls. SAA groups undergo critical self-reflection and dialogue on social issues impacting adolescent girls, engage with the community about the alternatives to those, and as a result have improved economic, sexual reproductive health (SRH) and nutrition outcomes for adolescent girls. The work of these SAA groups has led to increased support of adolescent girls, particularly from families. For example, in CARE Ethiopia's TESFA project, SAA groups identified social and gender norms such as early

KEY Principles of SAA:

1. Gender Equality
2. Sexuality as a crosscutting issue (also WEE, FNS, GBV, CCA)
3. Personal transformation among implementers
4. Community-led Action

CARE's SAA Manual is designed to provide practical guidance for development practitioners to adapt and use SAA to facilitate gender and social equality. The manual is highly flexible, allowing for new topics to be added as issues are raised for discussion.

CARE's SAA in FNS Manual was developed out of the learning from CARE Ethiopia's gender equality initiatives in its Food and Nutrition Security Programming.

marriage, stigma around adolescent SRH, barriers to family planning information and service access by adolescents, and married adolescent girls' engagement in economic activities, civic actions and household decision-making. These were discussed in dialogues with girls, husbands, mother-in-laws, religious leaders, and health extension workers through regular reflection, feedback, and accountability sessions. Evaluation results indicated impressive shifts in social norms around married girls' mobility and household roles, decision making and communication with husbands and mother-in-laws in just 2.5 years. The % of girls utilizing family planning methods also increased (13%), along with increased (73%) support from spouses or mother-in laws for using family planning methods. Girls more than doubled control over personal savings and greatly increased confidence to speak up with family members (77%).

In CARE's Abdiboru Project, reference groups (norm and power-holders) used SAA to discuss and challenge social norms that constrain the lives of adolescent girls. The idea was that the process could significantly increase adolescent girls' empowerment and gender equality in the participating communities by bolstering the capacity of adults to understand and provide support. The project team had already used CARE's Social Norms Analysis Plot (SNAP) framework (see CARE Ethiopia's Measuring Change in Social Norms and Gender Equality Learning Brief) to guide the development of tools to identify and measure key components of a norm at baseline. The project was able to leverage the social norms data from its baseline as a reference point for SAA discussions; this was an important example of how CARE's approaches can be synergetic and mutually reinforcing.

Through its Food Security Programming gender norms affecting food security were identified through gender & power analysis and were included in a SAA Food and Nutrition Security (FNS) Manual that was developed specifically for its Food Sufficiency for Farmers (FSF) project. Together community members, community facilitators (CARE staff), and SAA group facilitators identified and analyzed norms to be addressed - including early marriage, the division of labor, power relations and decision-making, women and men's involvement in household





nutrition and access to resources. SAA group members agreed on key actions and then implemented these actions in their own households, following up later to share experiences and challenges they faced when implementing actions. As a result women's role in household decision-making increased, investment in income generation activities increased and households decreased their spending on ceremonies (a savings) - directly contributing to FSF's goal of increased income for chronically food insecure households.

CARE's PRIME project adapted CARE's Social Analysis and Action (SAA) Approach, to address the underlying drivers of vulnerability to climate change and the socio-cultural and behavioral factors that limit adaptive capacity. The SAA dialogues allowed for dialogue around social and cultural norms that determine acceptable behavior, and how these norms establish restrictions on adaptive action by certain groups based on gender, age, disability and/or ethnicity. By bringing together different community members in dialogue and reflection, inequalities were exposed that limit the adaptive capacity of some community members and to identify actions to redress them. This type of iterative tool is compatible with the process-oriented nature of adaptation, enabling participants to strengthen their analytical skills and incorporate new information and knowledge throughout the series of dialogues.

In 2016, CARE Ethiopia took deliberate steps to ensure its humanitarian work integrated gender equality approaches including SAA, based on its deep understanding

from long-term development around social norm change. Findings from CARE's Rapid Gender Analysis highlighted there were opportunities to disrupt the status quo and challenge the deeply held social norms around pastoralist women's position and circumstances during the drought emergency. Women were participating more in income generating activities as men alone were unable to support their families' basic needs during such a crisis, and women's (especially IDP women) were able to participate in decision-making on urgent household matters. To build on these shifts in and opportunities around gender roles, CARE Ethiopia integrated the CARE's SAA methodology along the VSLA approach with to promote higher standards of gender equality in economic life with great success in a one-year food crisis recovery project.

SAA is not designed to be a stand-alone project or intervention. It is a model for gender equality that should be integrated into sector-focused programs.

The Spotlight: What we have learned

SAA has been a key ingredient to CARE Ethiopia staff and partner personal transformation. SAA creates safe space and encouragement for self-reflection and dialogue, but this requires dedication to protecting these planned reflections. In fact staff transformation is an imperative minimum standard to SAA application in practice; it is a critical starting point. SAA has been (and continues to be) part and parcel of CARE Ethiopia's Institutional Reform journey and driving true gender equality both within the organization and through its programming efforts. In order to facilitate meaningful social norms dialogue with community members, those leading the discussions must be aware of and challenging their own norms and biases.

SAA is a promising approach for reducing early marriage, promoting education for adolescent girls, and addressing harmful taboos like those related to nutritional practices that negatively affect girls' health and nutritional status, and misconceived notions around sexual and reproductive health including menstruation.

SAA and Village Savings and Loan Associations (VSLA) groups are mutually reinforcing – supporting actions around harmful social norms and joining together to encourage girls in their aspirations (educational, economic and social). SAA groups provide a platform for disseminating information related to SRH services and the benefits of with a high percentage of SAA groups establishing their own VSLAs.

The potential for replication and sustainability of SAA groups is significant. Because there is no strict curriculum, SAA groups plan to continue to meet for regular discussions even after the project is phased out.

Having SAA group members set their own rules for group functioning creates ownership and responsibility for the group, leading to more commitment to follow agreed-upon actions to challenge gender, social and power norms. By taking ownership of the actions, SAA group members became change agents and role models in their communities.

To increase women's participation, pairing a literate woman with an illiterate one to lead the women's SAA groups has been a successful adaptive strategy. SAA group facilitators are selected based on their ability to manage group discussions, read and follow the manuals, and document decisions and action plans, thus women are often unqualified to take on these roles, which is a limitation.

SAA should be combined with an economic support element especially where it is being implemented in drought-prone and food-insecure areas.

It is important that all influential people in the community, and in particular religious leaders, are brought into the SAA process.

SAA is a promising approach for integration into humanitarian and early recovery programming; short duration and life saving nature of certain projects does influence the degree to which this is feasible.

SAA requires commitment and strong facilitation – SAA groups in existence for more than 1 year (with more than one round of social norm reflection dialogues and actions) appear to have deeper impact, resulting from strong group solidarity, more time to challenge stereotypes and for moving forward successful actions.

Staff and Partners Transformation Journey: Staff and government partners said the reflection aspect of SAA was powerful in encouraging them to discuss taboo and sensitive issues amongst themselves and with others in the community. Women who participated reported feeling more empowered, and men started to help their wives with household chores in a way that was previously unthinkable. SAA helped staff and government partners to become more aware of their own prejudices, of the deep-rooted causes of commonly practiced behaviors, and how beliefs and values manifest as social norms.

CARE's Abdiboru Project

Want more information?

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To learn more about CARE's SAA Approach see the SAA Manual:
https://insights.careinternational.org.uk/images/in-practice/Gender-in-the-workplace/SAAGlobalImplementationManual_FINAL.English.rights-reserved_2018.pdf.

To learn more about CARE's SAA in FNS Programming see the Manual:
https://www.care.org/sites/default/files/documents/saa_in_fns_december_2018_1.pdf

To learn more about CARE's work globally visit www.care.org.

