MODULE 4

Working with Champions to Shift Norms

Effects of Social Norms on Health and Livelihood Outcomes for Adolescent Girls and Young Women in Low- and Middle-Income Countries

UC San Diego
CENTER ON GENDER EQUITY AND HEALTH

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Introduction

What is the evidence on how faith and cultural champion approaches shift social norms among adolescent girls and young women and their reference groups to improve outcomes related to sexual and reproductive health, women's economic empowerment, gender-based violence, and child, early, and forced marriage?

Faith and cultural leaders play a vital role in shaping and upholding community values, beliefs and traditions. Indeed, faith and cultural leaders, and the institutions they represent, are key influencers of community attitudes and behaviors, often serving as trusted individuals and gatekeepers of social norms (1, 2). Interventions that engage these champions can leverage their authority to shift perceptions of acceptable behaviors and foster change, particularly regarding the health and livelihoods of adolescent girls and young women. However, understanding their influence is essential for designing effective, scalable interventions that align with community values. While engaging these leaders can drive widespread change, not all interventions are successful—some reinforce harmful norms, face backlash, or struggle to maintain long-term community engagement. The success of these approaches often hinges on strategically engaging these leaders and equipping them with messages that link traditional teachings to principles of equity. Emerging strategies include using theological or cultural justifications, facilitating community dialogues, storytelling, and partnering with secular organizations. Against this backdrop, this core question examines how faith and cultural leaders engage within social networks to uphold or challenge norms, and what enables their influence. This module explores their role as change agents, the resources they draw on, and the norms most closely tied to faith and cultural systems. It also assesses how norms-shifting interventions integrate these actors into social and behavior change approaches, while considering potential risks such as reinforcing inequitable beliefs or encountering community resistance.

Module 4 explores how faith and cultural champion approaches have been used to shift social norms in areas such as sexual and reproductive health, women's economic empowerment, gender-based violence, and child, early, and forced marriage. It begins with an overview of interventions across diverse contexts, with a focus on sub-Saharan Africa and South Asia, highlighting the most commonly targeted outcomes and how programs engage adolescent girls and young women, boys and men, and their key reference groups. The module then examines how interventions are designed and implemented. It looks at the norms most often addressed, how social and behavior change theories are applied, and how champions are involved in identifying and addressing harmful norms. A section on implementation highlights key strategies—such as duration, use of reference groups, and efforts to avoid unintended consequences—as well as mechanisms that drive or hinder success. It also explores how champions leverage social networks to promote new norms. Next, the module reviews how outcomes are measured and where promising results are emerging across sectors. It also outlines how programs approach adaptation and scale-up, including key cost and design considerations. The module concludes with a summary of evidence gaps and recommendations to strengthen future programming.

Methodology

Review Approach

Module 4 synthesizes key findings from the evidence review, supplemented by insights from other studies and recommendations **(Figure 1).** It examines norms-shifting interventions involving faith and cultural champions, with a focus on sub-Saharan Africa and South Asia.

The methodology included a rigorous search and screening process to identify relevant interventions based on established criteria and key search terms **(**see **Module 1)**. The studies selected for Module 4 leveraged the influence of faith and cultural champions to shift social norms affecting the behaviors and well-being of adolescent girls and young women by promoting norm change among them, as well as among boys, men, and their reference groups. To ensure a comprehensive review, search criteria included interventions that may have influenced this population, even if they did not explicitly target adolescent girls and young women.

KEY TERMS: MODULE 4

Faith and Cultural Champions are individuals who are influential, aligned, committed, capable, and act or can be supported to act in support of advancing gender equality. Within norms-shifting interventions, these individuals may represent power holders with considerable influence over the emergence of a norm, have a stake in existing norms, and can also be change agents in shifting norms (3).

Faith-based Interventions are specific strategies developed with and for individuals of a specific faith, rooted in spiritual principles, doctrine, or sacred texts, and delivered within that faith's context (4). While faith-based interventions inherently include faith (and sometimes cultural) champion approaches, the opposite is not necessarily true.

Cultural leaders represent ethnic group leaders, community elders, and popular culture leaders (e.g., celebrities), among others.

Faith Champions are faith leaders of any religion or denomination and may also be influential individuals within faith communities (5).

The findings in this module draw from both quantitative and qualitative studies representing diverse evaluation designs and implementation approaches. Included studies measured social norms qualitatively or quantitatively, or used attitudes and behaviors as proxies for norm change, and were sourced from peer-reviewed journals and grey literature. Studies were included if they involved faith or cultural leaders or institutions as active contributors to intervention design and implementation– not merely as passive participants or advisors in initial meetings, but as active facilitators, trainers, or content deliverers. Data extraction captured key intervention details, including target populations, geographic settings and outcome areas. Intervention designs were analyzed for their use of social and behavior change theory, norm identification methods, and audience engagement strategies. Implementation strategies were assessed in terms of key activities, reference group involvement, duration, unintended consequences, and change mechanisms. The review also examined evaluation and scaling efforts, focusing on norms measurement, monitoring, cost-effectiveness, and scalability.

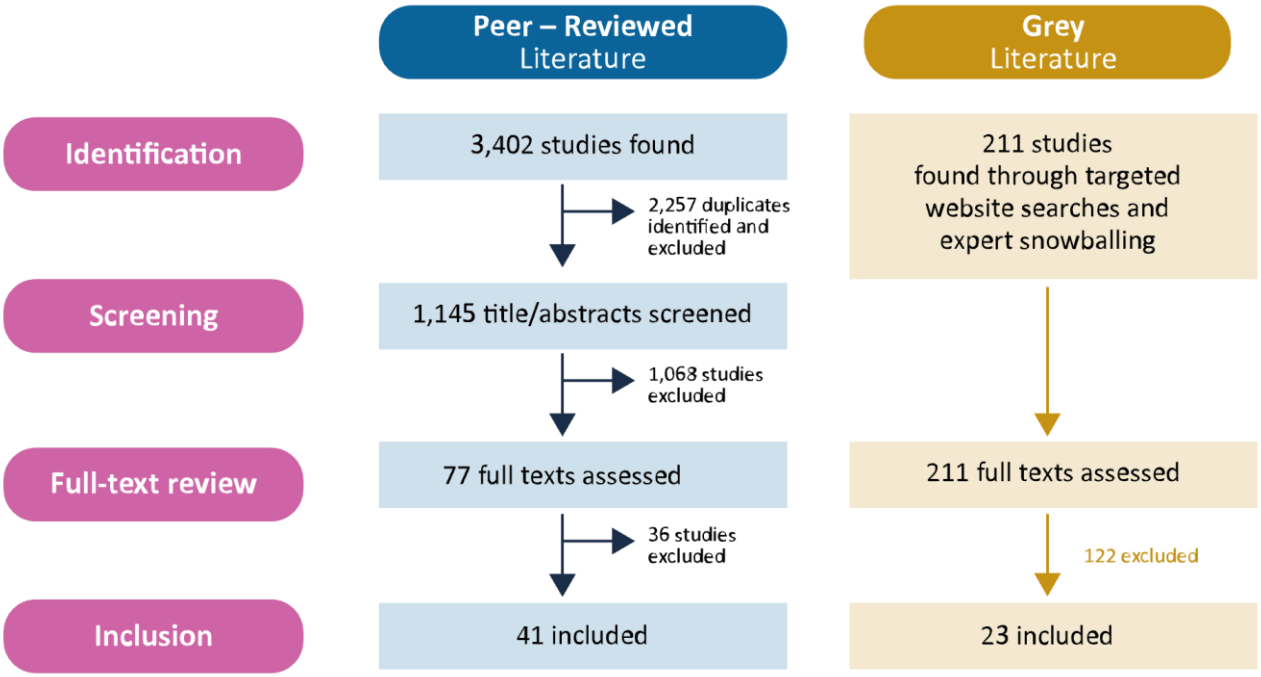


Figure 1. *Flow Chart of Included Literature for Module 4*

Analysis Approach

Following extraction, the data went through multiple rounds of cleaning and refinement, including verifying data, filling in gaps where possible, and incorporating insights from discussions with the Advisory Board and sensemaking workshop participants. As was noted in Module 3, interventions were the primary unit of analysis, requiring separate datasets to distinguish general studies from intervention-specific evaluations. Initially, data were compiled into a single spreadsheet capturing details from various sources, then synthesized at the intervention level in a second spreadsheet that integrated findings across studies and languages. This structured approach enabled analysis of key research questions–such as how faith- and cultural champion-led interventions applied social and behavior change theories, engaged reference groups, and measured norms change. It also supported a holistic assessment of intervention effectiveness and implementation trends.

Presentation and Interpretation of Evidence

As you read ahead, it is important to remember that our analysis draws on available data and is informed by promising practices in social norms programming. The goal of Module 4 is to inform the design and implementation of the next generation of interventions that engage faith and cultural champions, while also identifying areas where improved measurement and evidence are needed. In addition to reporting significant outcome shifts, we examine intervention development, mechanisms of change, unintended consequences, adaptation and scale, and evaluation quality. Overall, we found limited evidence and misalignment with promising practices and empirical findings on what works in faith and cultural champion approaches. Nonetheless, we present findings to contribute to the growing evidence base and to highlight areas for future inquiry. To support this, **findings in this Module are organized according to phases of the program lifecycle—beginning with conceptualization and design, followed by implementation, adaptation, and scale, and concluding with evaluation methods.**

We generated heat maps to illustrate which interventions demonstrate empirical evidence of shifts in norms, attitudes, and/or behaviors in relation to specific questions. While all included interventions met our criteria for norms-shifting initiatives, few directly measured social norms. Given the limited state of norms measurement, we include attitudes in the heat maps as a proxy, consistent with Module 3 on Entertainment Media. We also independently analyzed significant behavioral changes, recognizing their importance, even when not accompanied by shifts in attitudes or explicitly measured norms. **The full heat maps are in Annex 2.**

The heat maps present intervention results by outcome area and classify normative, attitudinal, and behavioral outcomes as positive (green), neutral (yellow), negative (red), or unclear (grey). Positive outcomes reflect statistically significant shifts in a desirable direction, and negative outcomes indicate statistically significant shifts in an undesirable direction. Neutral outcomes include quantitative shifts without significance testing, shifts lacking statistical significance, or qualitative findings. Outcomes were classified as unclear when there was insufficient information to determine the effect. If an outcome was not measured, there is no corresponding circle in the heat map.

In intervention highlight boxes throughout the module, we highlight positive results drawn from the identified publications. These are presented as: odds ratios (OR), the likelihood of something happening in one group versus another; coefficients (Coeff), expected change in an outcome associated with a one unit change in a predictor, average treatment effect on the treated (ATT, the average difference the treatment made for the people who actually received it, percentage point differences (PP Diff) the difference in percent between two groups or one group at two time points), and mean differences (Mean Diff) the difference in average outcome between two groups or one group at two time points). Results are accompanied by their associated p-values or the chance of observing the produced results if there was no real difference), and 95% confidence intervals (95% CI, the range of values that likely contain the true result). It is important to note that while some interventions did not show positive shifts in the outcomes reviewed, they may have achieved impact in other outcomes—such as maternal and child health—that were outside the scope of this review and therefore not included.

Intervention Scope and Focus

Which contexts? Which outcomes?

Key Learning: The majority of faith and cultural champion interventions occurred in sub-Saharan Africa; with gender-based violence and family planning the most common outcomes addressed.

We identified 41 interventions that met the inclusion criteria for Module 4. **Annex 1** provides a table listing each intervention, its country or countries of implementation, the outcomes addressed, and the adolescent or youth groups engaged. These interventions were implemented between 2000 and 2024, with 33 in sub-Saharan Africa, 9 in South Asia, and one spanning both regions **(Figure 2)**. In sub-Saharan Africa, interventions were relatively evenly spread across sub-regions, with several in Ethiopia (n=4), Niger (n=4), the Democratic Republic of the Congo (n=4), Kenya (n=4), and South Africa (n=4). In South Asia, most programs were conducted in India (n=5), followed by Bangladesh (n=3).

Sexual and reproductive health—including family planning—and gender-based violence were the most commonly addressed outcomes in faith and cultural champion interventions, followed by child, early and forced marriage and HIV. Women's economic empowerment was a focus in only one-fifth (eight) of the interventions **(Figure 3)**. About half of the interventions targeted two or three outcome areas –often sexual and reproductive health and gender-based violence –while four interventions addressed all outcome areas. Among interventions that specified the target populations, most engaged adolescent girls and young women, with many reaching both younger and older adolescents as well as young adults **(Annex 1)**.

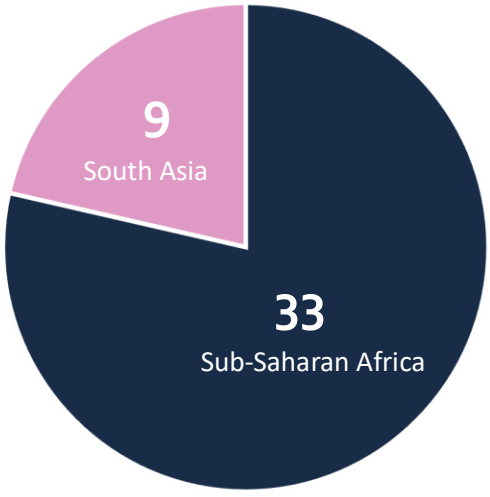


Figure 2. *Geographical Distribution of Interventions*
Note*: One intervention was implemented in both regions*

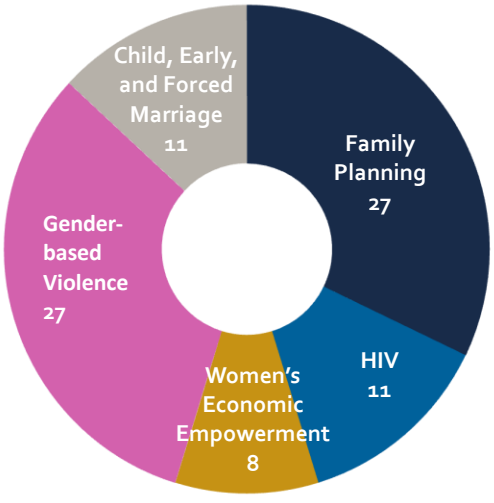


Figure 3. *Outcomes of Interventions (Categories not mutually exclusive)*

Which norms were addressed?

Key Learning: Faith and cultural champion interventions often take a broad, cross-sectoral approach, addressing multiple overlapping norms—most commonly those related to gender-based violence, fertility, and gender roles.

To better understand the types of norms targeted by faith and cultural champion interventions, we analyzed the normative content of each intervention and grouped them into 11 broad categories, detailed in **Table 1**. **The most commonly addressed categories of norms were gender-based violence (n=29) and fertility (n=21).** Interventions addressing gender-based violence typically focused on norms related to physical and sexual violence, the perceived acceptability of violence, and the acceptability of reporting violence. Fertility-related interventions primarily targeted norms related to contraceptive use, family planning knowledge and communication.

Table 1. *Distribution of Faith and Cultural Champion Interventions (N=41) Across Norm Categories*

Gender-based Violence Under what circumstances is violence acceptable	29
Fertility Family size, timing and spacing of pregnancy	28
Gender Roles Men and women's roles and responsibilities	19
Social Systems Engagement with social systems and institutions *(health, religion, education)*	16
Decision-making, Communication and Agency Negotiating choices and power in day-to-day life	13
Marriage Decisions related to timing of marriage and choice of partners	12
HIV HIV prevention behaviors *(condom use, immunization, testing)*	12
Economic Opportunities Income generation and control over assets	12
Education Who should receive education and for how long	10
Sex and Sexuality Timing and conditions of sex *(pre-marital, extramarital, transactional)*	7
Body Body appearance and function *(menstruation, breastfeeding, puberty changes)*	7

Note*: Categories are not mutually exclusive*.

Nearly half of the faith and cultural champion interventions address gender norms (n=19). These focused primarily on roles and responsibilities within and outside of the household, as well as norms around communication and decision-making for women and men. Norms related to social systems (n=16) and decision-making, communication and agency (n=13) appeared in slightly less than half of the interventions and were often addressed alongside other norms categories. Similarly, norms related to economic opportunities (n=12), HIV (n=12) and marriage (n=12) were often addressed in conjunction with more prominent categories of norms. Norms related to education (n=10), the timing and conditions of sex (n=7), and body appearance and function (n=7) were addressed less frequently.

Most faith and cultural champion interventions addressed multiple outcomes and categories of norms. **Only four interventions focused solely on gender-based violence norms, while the remaining 37 covered multiple categories.** Interventions targeting gender-based violence norms often also addressed gender norms. Similarly, fertility-related norms frequently overlapped with those associated with HIV. Norms related to social systems were commonly addressed alongside marriage and education norms. However, the analysis also revealed several gaps. For example, only seven interventions targeted norms related to sex and the body, despite their inherent connection to fertility and gender. Future programs could build on the strengths of integrated approaches by intentionally expanding into under-addressed normative domains to more fully meet the diverse needs of girls and young women.

Intervention Design

Effective program design is foundational to the success of norms-shifting interventions. This section explores how interventions were designed—how theory informed them, the role of formative research in identifying normative priorities, and who was engaged in the design process. These findings offer insight into opportunities to strengthen the foundations of faith and cultural champion interventions to better support norms change. Our analysis revealed wide variation in how faith and cultural champion programs approached this early stage. While many incorporated social and behavior change theories or conceptual models, few were grounded in robust formative research or had clearly articulated normative pathways. Some relied heavily on existing faith or cultural structures without meaningfully engaging champions or target communities in shaping the intervention.

How was theory used in intervention and evaluation design?

Key Learning: While many faith and cultural champion interventions draw on theory to inform design, fewer used it to guide evaluation.

Best practices in social and behavior change intervention design recommend grounding interventions in theory to improve their effectiveness (6). During the planning phase, social and behavior change theory helps practitioners develop informed hypotheses about how the interventions will affect desired outcomes. Conceptual frameworks, particularly theories of change, link activities to outcomes and guide evaluation design and success metrics. While behavioral theories explain the drivers of human behavior, theories of change outline the steps through which interventions aim to achieve results.

Of the 41 interventions reviewed, most (n=25) used a theory of change or another type of conceptual framework to inform intervention design; however, only six explicitly referenced an established social and behavior change theory. The application of theory was more common in intervention (n=29) than evaluation design (n=6), and no interventions reported using social and behavior change theories to guide their evaluations.

In **Figure 4**, the *Growing Up GREAT!* theory of change illustrates how a well-defined theoretical framework can guide the design of a norms-shifting intervention involving faith and cultural champions. Informed by the Theory of Normative Influence and the Social Ecological Model (see **Module 1**), it shows how programs can anchor their strategies in evidence-informed pathways to shift norms, attitudes, and behaviors across multiple levels of influence–ensuring coherence from design through implementation and evaluation.

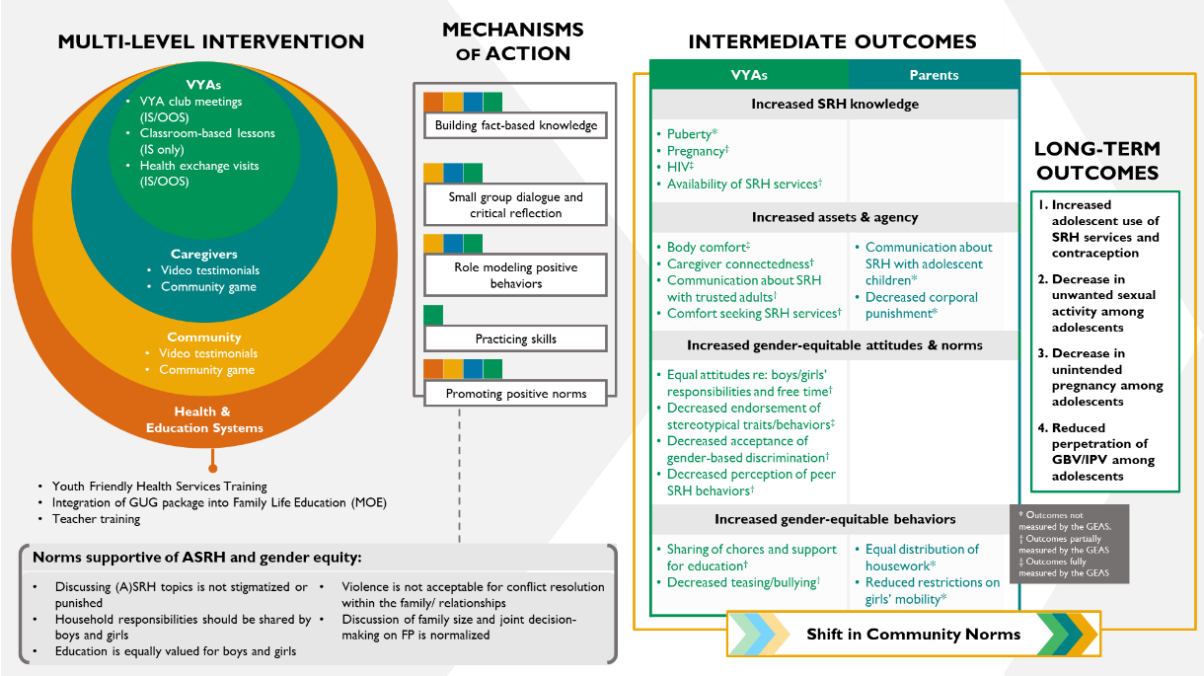


Figure 4. *Growing Up Great! Theory of Change*

How were norms identified and 'diagnosed'?

Key Learning: Although evidence on norm identification during intervention design is increasing, its application remains limited.

Formative research to identify social norms during intervention design helps ensure that faith and cultural champion approaches address norms related to their desired outcome, align with community realities and build on existing values. Without this grounding, interventions may be ineffective, risk misalignment with community priorities, or unintentionally reinforce harmful norms. Despite the importance of understanding norms to shape effective interventions, **more than half of the 41 faith and cultural champion interventions reviewed (n=24) did not specify how they identified the norms they sought to address.** The remaining 17 interventions conducted formative research or assessments. Those that identified norms early in the design process used a variety of methods, often combining multiple approaches. **These included the Social Norms Exploration Tool (n=4), Social norms Analysis Plot (n=1), in-depth interviews (n=3), focus group discussions or community conversations (n-3), Human-centered design approaches (n=1), stakeholder consultations (n=3), community-based participatory research (n=1), social analysis, network, and action approaches (n=2), formative assessments (n=1) and community action research (n=1).**

Despite the diverse methods used to identify and 'diagnose' norms, it was often unclear how the findings informed intervention design. For example, *Prevention of HIV/STI among Married Women in Urban India* conducted formative research, but the ways in which these research findings influenced norm selection is uncertain. Similarly, the *Reproductive Health Access, Information and Services in Emergencies Initiative* assessed cultural, social, and gender-related barriers to sexual and reproductive health services through a situational analysis with community leaders, though it is unclear whether this occurred before or during intervention design.

FEATURED INTERVENTION

Communities Care: Transforming Lives and Preventing Violence conducted stakeholder consultations during formative research to identify social norms sustaining sexual violence and other forms of gender-based violence (7). Key stakeholders with influence on beliefs, attitudes, and behaviors in the intervention communities participated in focus group discussions and in-depth interviews. Stakeholders included religious leaders, traditional and administrative authorities, teachers, health care providers, gender-based violence and human rights advocates, women's group leaders, and business leaders. Beyond identifying norms that sustain violence, these consultations revealed barriers to community acceptance and survivor disclosure, as well as key topics for group dialogue and critical reflection.

RESULTS SPOTLIGHT

- After four months of participating in the program, more people strongly disagreed with harmful beliefs about rape: the percentage of people who rejected the idea that a group of boys should not be blamed for raping a girl rose from 85% to 91.4%, and those who disagreed that a girl should keep the rape a secret to protect her honor increased from 71.6% to 92.6%

How were community members and adolescents engaged in design?

Key Learning: Faith and cultural champion interventions rarely involved stakeholders—especially adolescents—in intervention design or monitoring.

Engaging intervention participants and key influencers throughout the design, implementation, and monitoring phases can help ensure relevance and sustainability. While **community members—such as faith leaders, cultural champions, volunteers, and frontline workers—were often involved in implementation (n=34), they were rarely engaged in design (n=4) or evaluation (n=1)** **(Table 2)**. Adolescent engagement was even more limited, with no involvement in design (n=0) and minimal involvement in monitoring (n=1). Across outcome areas, stakeholder engagement was most common in interventions focused on family planning, sexual and reproductive health, and gender-based violence. Overall, older community members were more likely to be involved compared to adolescents, regardless of the health and livelihoods outcomes interventions sought to address.

Table 2. Actors Engaged in Faith and Cultural Champion Interventions Across Health Outcomes

Engagement	Family Planning (n=27)	HIV (n=11)	Women's Economic Empowerment (n=8)	Gender-based Violence (n=27)	Child, Early, and Forced Marriage (n=11)	Total (N=41)
Community Members						
Intervention Design	4	1	1	2	0	4
Implementation	22	8	6	22	8	34
Monitoring	1	0	0	1	0	1
Adolescents						
Intervention Design	0	0	0	0	0	0
Implementation	7	4	3	6	5	9
Monitoring	1	0	0	1	0	1

***Note**: Categories are not mutually exclusive. Three interventions did not provide enough detail to determine how actors were engaged.*



FEATURED INTERVENTION

Growing Up GREAT! in the Democratic Republic of the Congo aimed to improve sexual and reproductive health outcomes and the social context of very young adolescents. The intervention held learning meetings with community-based organization representatives, school actors, and government officials to review monitoring and supervision data and discuss challenges, successes, and lessons learned. Insights from these meetings informed the design of the Implementation Guide and the scale-up strategy. Adolescents held active leadership roles through Club Committees, which were comprised of elected boys and girls who led activities in the school clubs. Additionally, a youth advisory council, consisting of in-school and out-of-school adolescents, local youth government, and youth mentors, provided feedback during implementation of the intervention and on its results, offering an important community and youth-centered perspective.

RESULTS SNAPSHOT

- Both in-school and out-of-school youth who joined the program showed better understanding of HIV than those who did not. The difference in knowledge scores was 0.16 points for in-school youth ($p = 0.017$) and 0.28 points for out-of-school youth (p-value = 0.031)
- Girls who participated in the program were significantly more likely to know where to get contraception compared to those who did not join. This was true for both in-school girls (OR: 1.46; 95% CI: 1.03, 2.06) and out-of-school girls (OR: 2.96; 95% CI: 1.66, 5.29)

Intervention Implementation

Most interventions relied on cultural champions, followed by approaches that included both faith and cultural leaders. Cultural champion approaches were most often linked with positive shifts in attitudes, norms, and behaviors. Programs that used recognized norms-shifting mechanisms—such as participatory dialogue, collective reflection, and multi-level approaches—tended to achieve better outcomes. While both short- and long-term interventions were successful, the most effective interventions typically lasted two years or more. However, the diversity in outcomes and populations, combined with persistent measurement challenges, limits the ability to draw broad conclusions. This section explores mechanisms of change, which strategies were used to shift norms in practice, who was engaged, and risks and responses to adverse consequences.

What 'mechanisms' of norms change emerged?

Key Learning: Interventions that employed multiple mechanisms of change achieved better outcomes than those relying on a single approach.

Mechanisms of change are the processes through which norms shift, ultimately leading to positive and sustained outcomes. **Among the faith and cultural champion interventions reviewed, over half employed all five mechanisms.** Standout examples include: *Indashyikirwa; Masculinities, Famille, et Foi*; and the *Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents.* Approximately one-third of interventions (n=16) used three to four mechanisms, while only three used fewer than three.

Most interventions grounded their norm-shifting efforts at the community level, aiming to diffuse new ideas and make norms visible through collaboration with faith and cultural leaders. Many conducted formative assessments to identify which norms to tackle and engaged community members

NORMS-SHIFTING MECHANISMS OF CHANGE

Engaging communities or individuals in planning and implementing norm-shifting strategies helps interventions understand context-specific norms and the factors that sustain them.

Seeking community rather than individual level change occurs when interventions engage reference groups or people at multiple levels of the socio-ecological system.

Making norms visible and catalyzing reflection occurs through small group dialogue and reflection, correcting misconceptions about harmful behaviors, confronting power imbalances, or finding opportunities to form new norms.

Diffusing new ideas occurs when interventions deploy strategies to spread new ideas beyond those directly reached, communicate positive new norms, model positive behaviors, demonstrate how people are changing in the community, or employ public commitments.

Supporting the change process occurs when interventions address structural factors, foster networks, movement and community action, or aim to increase rewards for positive norms and reduce sanctions.

in planning and implementation. As shown in **Figure 5**, positive shifts in norms, attitudes, and behaviors were most common in interventions focused on family planning and gender-based violence. However, fewer interventions addressed underlying structural factors –highlighting a key area for future focus.

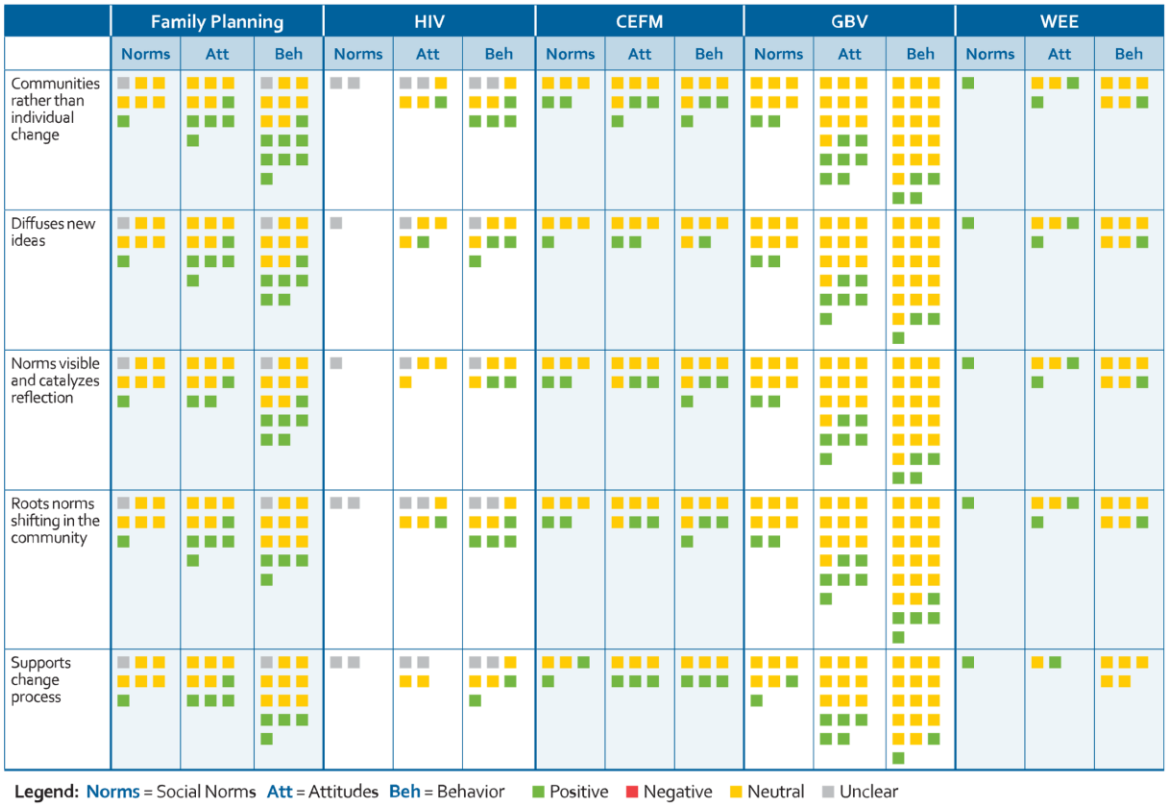


Figure 5. *Norms-shifting Mechanisms by Faith and Cultural Champion Intervention Outcome (N=41) (Categories are not mutually exclusive)*

FEATURED INTERVENTION

Masculinité, Famille, et Foi (8) effectively used all five norms-shifting mechanisms to address inequities contributing to early childbearing and high fertility. By training faith leaders and engaging peer role models, the intervention facilitated organized diffusion and community dialogue sessions. The intervention was responsive to norms within the community through co-created activities with church leadership and a formative assessment to identify key behavioral norms and reference groups. A technical advisory group, including faith leaders, provided guidance. The intervention promoted community-level change by engaging intimate partners, families, pastors, and the broader community. Messages were shared through sermons and congregation-wide events, while small group discussions enabled couples and groups to reflect on norms together. To sustain change, the intervention also strengthened service delivery, providing referral cards to free family planning services. This comprehensive approach successfully shifted norms, behaviors, and attitudes in intervention communities.

RESULTS SNAPSHOT

- At the start of the program, there was no difference in contraceptive use between couples. However, by the end, 53.4% of non-pregnant couples in the program were using contraception, compared to 45.3% of couples who did not participate (p-value = 0.038)
- Both men and women reported less intimate partner violence after participating in the program. Among men, the reduction was 9.8 percentage points; among women, it was 8.0 percentage points. These decreases were statistically significant (p-value = 0.018 for men, p-value = 0.049 for women)

How long were the interventions implemented?

Key Learning: Success varied across all intervention durations, suggesting that length alone does not determine effectiveness.

While longer durations can support deeper engagement, findings from our analysis suggest that success is not solely tied to intervention length. Of the 41 interventions reviewed, 37 reported their duration. **Most lasted either one to two years, or three or more years (Table 3)**. Interventions that focused on family planning, gender-based violence, and women's economic empowerment tended to have shorter time frames (one to two years or three or more), while HIV-related interventions often spanned three or more years. Interventions addressing child, early, and forced marriage were typically implemented over one to two years.

Table 3. *Duration of Interventions by Outcome*

Intervention Timeframe	Family Planning (n=27)	HIV (n=11)	Women's Economic Empowerment (n=8)	Gender-based Violence (n=27)	Child, Early, and Forced Marriage (n=11)	Total (N=34*)
< 1 year	4	1	2	5	1	**6**
1-2 years	7	3	3	7	4	**11**
2-3 years	6	2	0	3	1	**6**
3+ years	7	5	3	7	3	**11**

***Note**: *Seven interventions did not specify their intervention timeframe. Health outcome categories are not mutually exclusive.*

As shown in the heat map (**Figure 6),** short-duration interventions were more likely to measure behavioral rather than normative change. Among these, outcomes were either positive or neutral –none assessed normative shifts. In contrast, longer-duration interventions showed more varied results: two

reported positive changes in both behavior and attitudes, one in behavior and norms, 13 showed improvements in at least one outcome, and 12 reported neutral results. Overall, no clear trend emerged between intervention duration and outcomes.

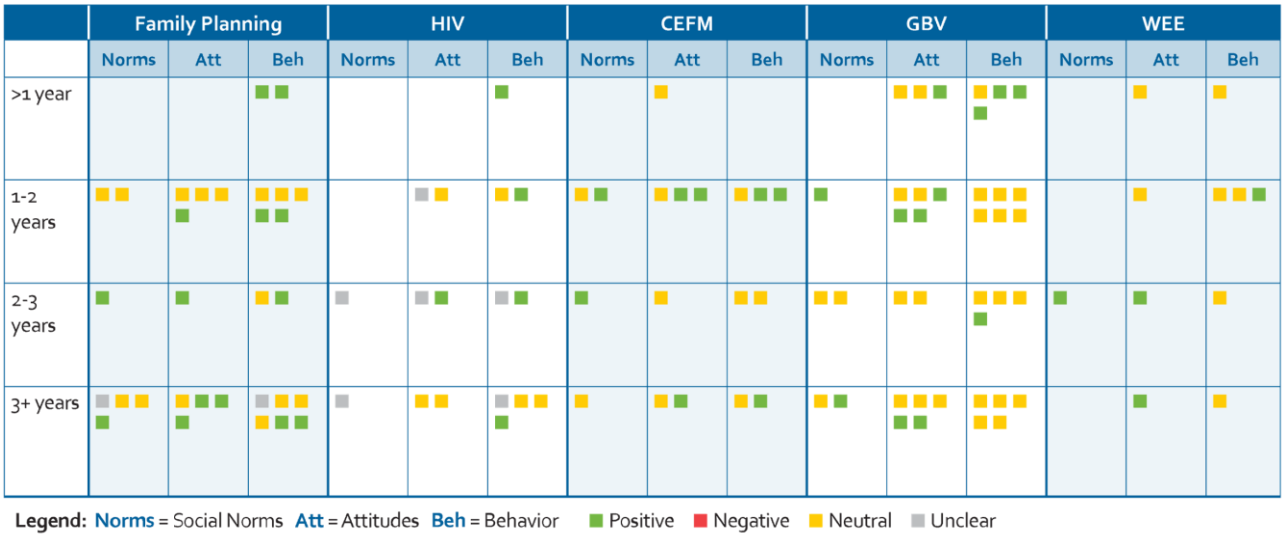


Figure 6. *Heat Map of Faith and Cultural Champion Intervention Duration*

FEATURED INTERVENTION

The *Breakthrough Generation Initiative* was implemented from 2017 to 2020 in The Gambia, Guinea, Guinea-Bissau, and Mali (9). It was designed to promote positive change around gender-based violence, child early, and forced marriage, sexual and reproductive health, and women's economic empowerment in rural, resource-poor communities for those with little or no formal schooling. The intervention included social mobilization activities, group dialog, radio broadcasts, and training sessions for community leaders and other key stakeholders.

RESULTS SNAPSHOT

- In Guinea, the percentage of women engaged in income-generating activities increased from 73% to 87% after the intervention. In Guinea-Bissau, the increase went from 36% to 69%
- Before the program, most people believed their communities approved or tolerated female genital cutting—79% in Guinea-Bissau, 90% in Mali, and 94% in Guinea. After the intervention, more than half in each country (57%, 50%, and 78%, respectively) believed that people in their communities would now try to stop the practice

Which intervention strategies were used?

Key Learning: Faith and cultural champion interventions often used multifaceted approaches, but no specific combination of implementation strategies correlated to success in achieving outcomes.

Faith and cultural champion interventions were often comprised of multiple components, using between two and seven implementation strategies. **As expected, these interventions primarily relied on faith and cultural actors, with group discussion and reflection spaces as core components (Figure 7)**. Many also included workshops and training sessions (n=25) to educate facilitators and participants. Half (n=20) incorporated diffusion activities, such as community mobilization and sensitization efforts. Less common were testimonials and digital media (e.g., social media posts to raise awareness), while near media (e.g., radio, TV, print) was not used at all.

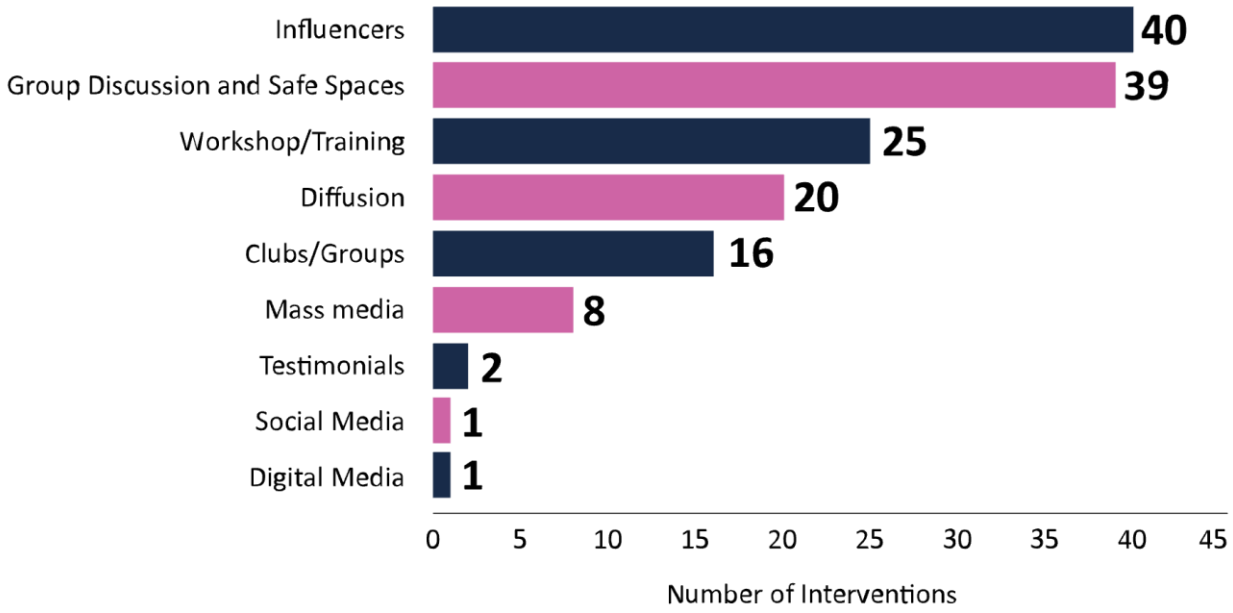


Figure 7. *Implementation Strategies Used in Faith and Cultural Champion Interventions (N=41) (Categories are not mutually exclusive. One intervention lacked sufficient detail regarding the intervention strategies used.)*

As shown in **Figure 8**, group discussions and safe spaces, training workshops, and diffusion approaches were most frequently used in interventions addressing family planning and gender-based violence, compared to those targeting HIV, child, early, and forced marriage, or women's economic empowerment. However, results across these strategies were mixed, with no consistent trends by outcome area or implementation modality.

Of the 39 interventions that included group discussions and safe spaces, only 13 measured norm change. Among these, just two interventions, *Masculinité, Famille, et Foi* and *Masculinities, Faith, and Peace*, reported positive normative shifts; all other interventions indicated neutral or unclear results. Twenty interventions used diffusion approaches: three (*Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents; Indashyikirwa*; and *Skillz Street*) demonstrated positive changes in both behaviors and attitudes; eight indicated improvement in at least one outcome; and all other interventions showed neutral effects. Media approaches were less common, used by eight interventions, with only two showing positive shifts in at least one outcome, five with neutral results, and one lacking sufficient evidence. Overall, evidence of normative change was limited, mainly due to the small number of interventions that assessed norms directly.

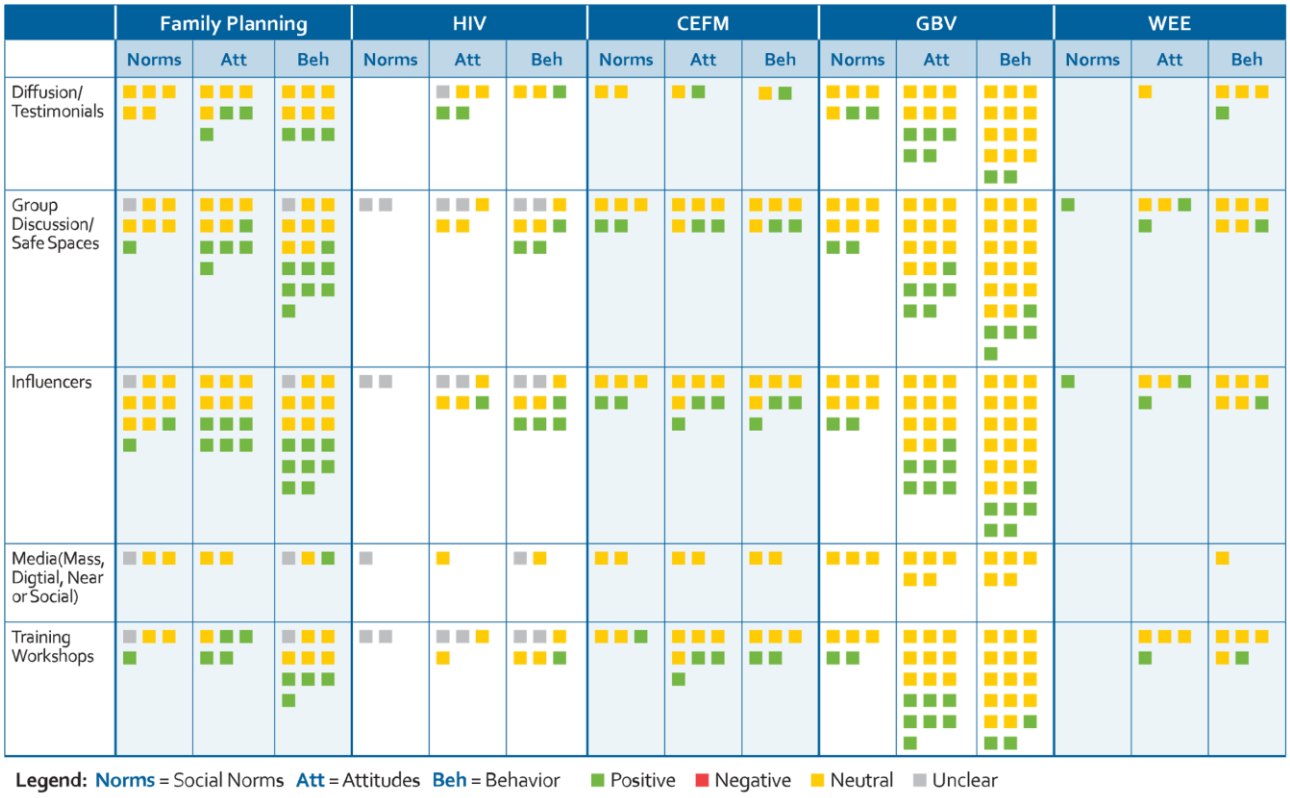


Figure 8. *Heat Map of Faith and Cultural Champion Intervention Strategies*

FEATURED INTERVENTIONS

Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents (10) aimed to reduce child marriage among girls 12-18 years, using skills-building approaches. Local unmarried female mentors (22-28 years) organized weekly meetings for girls. During an 18-month period, girls received life-skills training, opportunities to reflect on gender and equity, and educational support—such as mathematics and English tutoring for in-school girls, and financial skills training for out-of-school girls. Additionally, activities were organized involving community members, local leaders, government officials, parents, and teachers. Courtyard meetings for parents encouraged community discussions on child marriage, while advocacy meetings and larger community mobilization events aimed to raise awareness and encourage dialogue on child marriage. Local support groups—including adolescent girls, community and religious leaders, elected officials, parents, matchmakers, and marriage registrars—met bi-monthly to discuss how to support the intervention.

RESULTS SNAPSHOT

- Girls who participated in education (OR: 1.49; $p < 0.001$), gender awareness (OR: 1.80; p-value < 0.05), and livelihood skills (OR: 1.61; p-value < 0.001) programs were significantly more likely to believe that girls can refuse an arranged marriage
- After completing gender awareness (OR: 1.48; p-value < 0.001) and livelihood skills (OR: 1.42; p-value < 0.01) programs, adolescents were more likely to earn money compared to before the program

Sista2Sista, launched in 2013 in Zimbabwe (11), aimed to increase knowledge and the use of services related to HIV prevention, sexual and reproductive health, and gender-based violence. *Sista2Sista* created girls-only clubs across various age groups, 10-14 years, 15-19 years, and 20-24 years, that were led by female mentors. The clubs met weekly for a year, guided by a curriculum-based manual. The mentors also provided social support and trauma counselling, and individual sessions on a case-by-case basis. The intervention had positive effects on HIV, sexual and reproductive health, and gender-based violence outcomes. Participants reported increased HIV testing, higher rates of reporting sexual abuse, greater contraceptive use, as well as reductions in child marriage and school dropout.

RESULTS SNAPSHOT

- Program graduates were more likely than their peers to have taken an HIV test (OR: 2.78; 95% CI: 2.52, 3.10) and less likely to have gotten married (OR: 0.63; 95% CI: 0.55, 0.73)
- Those who completed all 40 program sessions were more likely to use contraception (OR: 1.38; 95% CI: 1.21, 1.56) and report sexual abuse (OR: 1.76; 95% CI: 1.17, 2.66) than their peers

How were ideas diffused within social networks?

Key Learning: The evidence indicates that faith and cultural champions are most engaged when interventions support them to strategically activate their social networks, equipping them with culturally-responsive messages and opportunities to diffuse new norms through both formal and everyday interactions.

Faith and cultural champions shift norms by leveraging their position within their networks. As trusted figures, they can catalyze reflection on harmful norms, while grounding their communication in shared values, religious teachings, and cultural narratives. Given the popularity of diffusion as a strategy, we took a closer look at program materials to explore how champions navigated their networks to initiate and sustain change. **Key strategies included: (1) equipping champions with tools and messages to support entry and alignment with the community, and (2) spreading new norms through organic and organized diffusion.**

Supporting entry and alignment

Several interventions demonstrated that alignment with religious and cultural values enhances community acceptance. Faith leaders and other influential figures within religious communities offered emotional, spiritual, and even material support. For example, through sermons, religious gatherings, and counseling, they provided social support, helping individuals navigate decisions and creating space to counsel not only adolescent girls and young women, but also parents and other influential figures in their lives.

Many interventions showed that cultural leaders cultivated social capital, strengthening trust and reciprocity networks. Among interventions reviewed, leaders' involvement ensured initiatives were community-led, culturally appropriate, and sustainable. Like faith leaders, cultural leaders provided access to community networks and embedded new ideas into cultural frameworks. Their deep-rooted presence allowed them to introduce and legitimize shifts in norms, aligning new ideas with community values, reducing resistance and increasing the likelihood of acceptance.

KEY TERMS

A **social network** is the web of relationships that connect individuals and through which ideas, behaviors, and norms are spread (12,13). For example, religious leaders or community elders may play key roles in communicating social expectations through their networks, making them powerful agents of change.

Diffusion refers to the process by which new ideas, behaviors, or innovations spread through a social system over time. Based on *Diffusion of Innovation* theory, this occurs through communication channels within a network, influenced by early adopters, opinion leaders, and broader societal dynamics (14).

Organized diffusion is a deliberate and structured approach to spreading change. Unlike organic diffusion, where behaviors spread naturally through informal interactions, organized diffusion involves targeted strategies to encourage and guide behavioral and norms shifts (15).

Catalyzing Diffusion

Of the interventions reviewed, 20 included diffusion as a core component. In these interventions, faith and cultural champions worked as implementation actors to leverage their trusted positions to mobilize networks and embed key messages into existing structures. Organized diffusion strategies varied but often included: structured outreach, public forums, and community-based advocacy. Faith and cultural champions often led or contributed to broad community mobilization efforts to facilitate discussions and raise awareness, a strategy common across all outcome areas. This included organizing or participating in town hall meetings, community dialogues, and public advocacy to reinforce intervention messaging.



KEY INSIGHT: ORGANIZED DIFFUSION STRATEGIES

Across 20 interventions, many organized diffusion strategies were used:

- Social mobilization
- Radio, television, or other mass media
- Storytelling through plays, dramas, or street theatre
- "Town hall" meetings
- Community activism
- Community awareness
- Public testimonials
- Leaders sharing at community events
- Faith-based group discussions (e.g., youth groups, women's groups, men's groups within churches and mosques)
- Sermons by faith leaders (e.g., pastors, imams)



FEATURED INTERVENTION

The *Prevention of HIV/STI Among Married Women in Urban India; Research and Intervention in Sexual Health: Theory to Action* (16) intervention worked with imams who led committees within mosques to address challenges related to dowry, domestic violence, and property distribution. Imams integrated new ideas which emerged from training and discussion into activities such as sermons. By the end of the intervention, men demonstrated more positive gender-equitable attitudes.

RESULTS SNAPSHOT

- Men's attitudes toward gender equality improved after having joined the program; there was a score change of 0.71 among these men, whereas there was a score change of only 0.19 observed among men who did not join.

Finally, diffusion often occurred organically, with faith leaders, religious figures, and cultural elders playing a key role. Faith and cultural champions served as storytellers and messengers, amplifying positive norms through plays, testimonials, media, and other methods. While formal teachings were important, it was their daily interactions that enabled organic diffusion. This engagement enhanced community acceptance, allowing messages to spread naturally and resonate deeply. By framing behavior change within familiar belief systems, faith leaders facilitated the adoption and diffusion of new norms in a way that was authentic and culturally relevant.

FEATURED INTERVENTION

In *Masculinities, Faith, and Peace* in Nigeria (17), faith leaders incorporated messages about peacebuilding, gender equality, and healthy relationships into their sermons and community discussions. By embedding these messages in spiritual teachings, they created culturally and religiously relevant entry points to shift values and norms. These messages were reinforced within faith-based settings, such as youth groups, women's ministries, and men's fellowships, offering sustained engagement and repeated exposure to new ideas and norms.

RESULTS SNAPSHOT

- Congregations involved in the *Masculinities, Faith, and Peace* initiative saw larger decreases in emotional violence perpetrated by men and experienced by women than congregations that were not involved (PP Diff: 22.2; p-value < 0.05)
- The percentage of people in participating congregations who thought it was acceptable for a husband to use violence against his wife dropped significantly compared to other congregations (PP Diff: 14.3; p-value < 0.01)

How were faith and cultural champions engaged?

Key Learning: Most interventions engaged cultural leaders or a combination of cultural and faith champions, with no clear advantage to using both. Intervention effectiveness appears to depend more on the strategic integration of champions, rather than on the number or type of champions.

Interventions were reviewed to assess the involvement of faith and cultural leaders—individually or together—as central change agents. This section explores how each type of actor contributed to program delivery and whether differences in engagement approaches influenced outcomes. As shown in **Table 4**, few interventions focused exclusively on faith champions. **Most engaged both faith and cultural champions or only cultural champions, such as opinion leaders, civic authorities, youth activists, and traditional leaders.** Faith champions, when specified, included priests, imams, and church leaders.

Table 4. *Engagement of Faith and Cultural Champions Across Health Outcomes*

Engagement	Family Planning (n=27)	HIV (n=11)	Women's Economic Empowerment (n=8)	Gender-based Violence (n=27)	Child, Early, and Forced Marriage (n=11)	Total (N=41)
Faith Champions only	4	1	1	2	0	4
Cultural Champions only	11	5	5	16	7	24
Faith and Cultural Champions	11	5	2	9	4	12

Note*: Health outcome categories are not mutually exclusive. One intervention did not provide adequate details on the involvement of faith and cultural champions.*

FEATURED INTERVENTION

Engaging with Faith Groups to Prevent Violence Against Women and Girls in Conflict-Affected Communities in the Democratic Republic of the Congo (18) trained faith and cultural champions to challenge harmful attitudes, behaviors, and social norms that sustain gender inequality and enable violence against women and girls. Serving as role models, champions shared their learnings through sermons, prayer groups, youth groups, and counseling. Additionally, gender champions facilitated six-week group discussions with community members. The intervention led to an increase in attitudes against intimate positive violence, regardless of the level of faith engagement of the participant.

RESULTS SNAPSHOT

- After the program, fewer men (PP Diff: 22.9; $p < 0.001$) and women (PP Diff: 17.9; $p < 0.001$) agreed that there are times when a woman deserves to be beaten
- More men and women believed women had the right to say no to sex in various situations, such as simply not wanting to, after joining the program (PP Diff: 31.0, PP Diff: 19.4, respectively; both p-values < 0.001).

The heat map **(Figure 9)** shows actor engagement by health outcome. **Interventions focused on women's economic empowerment, gender-based violence, child, early, and forced marriage more frequently involved cultural champions, while those targeting family planning and HIV often involved either cultural champions alone or a combination of both.** Cultural champion interventions generally showed slightly more favorable outcomes across attitudinal and behavioral measures compared to faith champion interventions. Due to limitations in social norms measurement, there are few results on normative shifts.

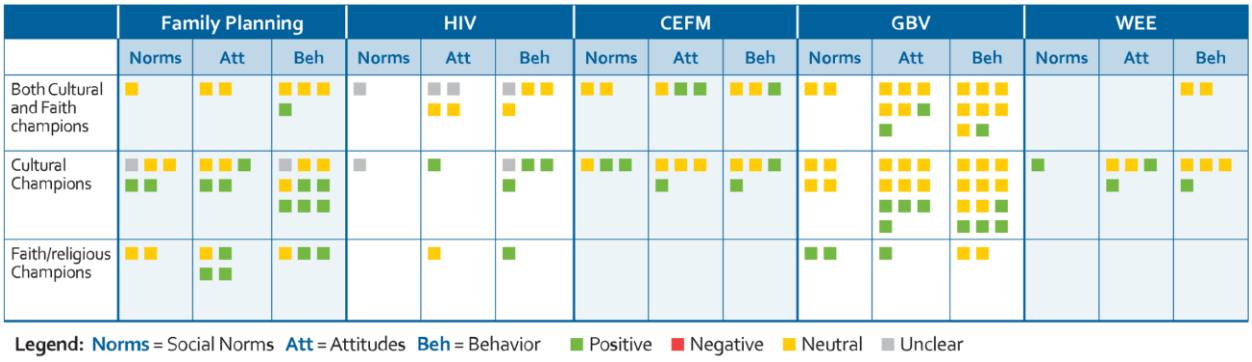


Figure 9. *Heat Map of Engagement of Faith and Cultural Champions by Health Outcome*

Who were the reference groups engaged in interventions, and what impact did their participation have on outcomes?

Key Learning: Peers, family, and partners were key in the reviewed interventions—but the most influential groups varied by outcome, highlighting the need for strategic selection.

Reference group members play a critical role in shaping norms and behaviors. In faith and cultural champion interventions, reference groups took on various roles from data collection to active implementation. They led community dialogues, facilitated group discussions, mobilized communities, and promoted new ideas. Some also participated in capacity bridging activities, such as training sessions and workshops, to enhance their ability to influence change. Often, reference groups also participated in intervention activities.

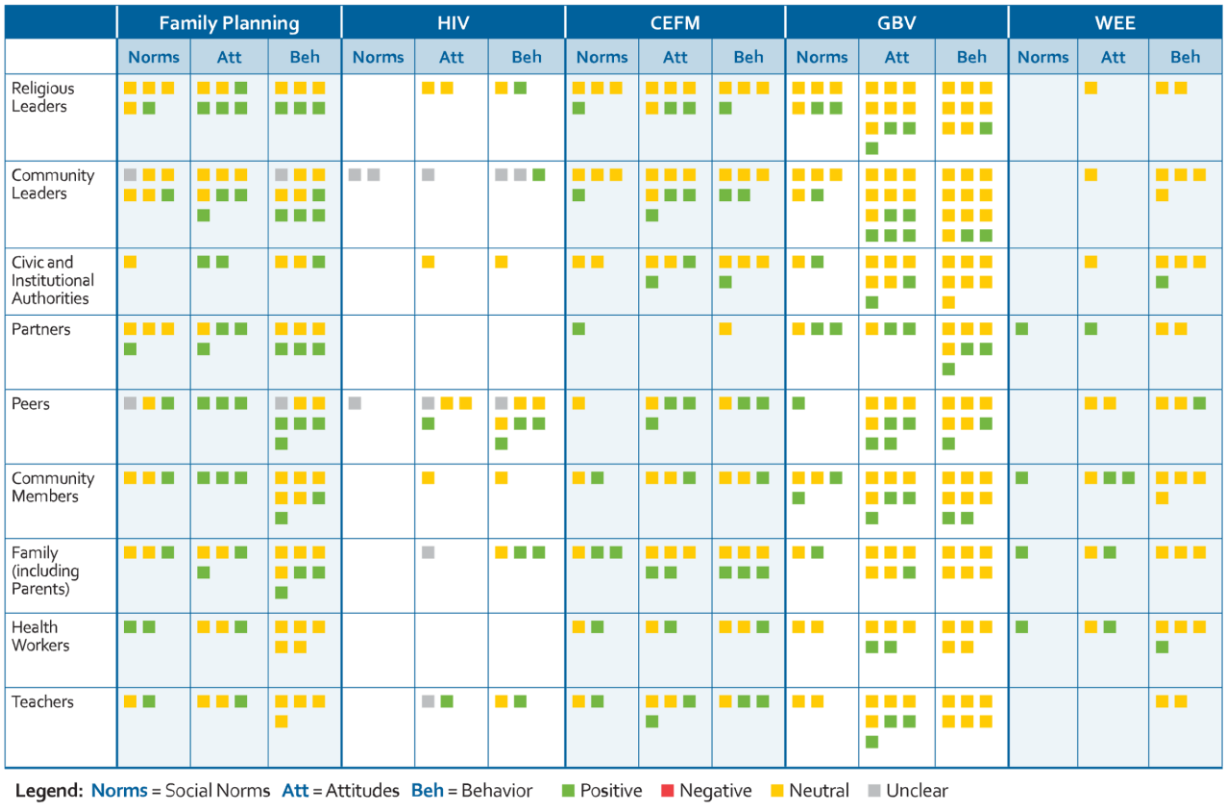


Figure 10. *Heat Map of Engagement of Faith and Cultural Champions by Health Outcome (Categories are not mutually exclusive)*

As shown in **Figure 10, the reference groups most frequently engaged were community and religious leaders, along with peers and family members**. Family planning interventions most often engaged religious leaders and the families of adolescent girls and young women, with those involving a broader range of reference group members—including religious and community leaders, partners, peers, and other community members—more likely to achieve success. In HIV-focused interventions, engaging peers, families, and teachers also contributed to positive outcomes. Interventions addressing gender-based violence and child, early, and forced marriage also showed encouraging results across outcomes when they involved diverse reference groups, underscoring the value of inclusive, community-wide engagement.

FEATURED INTERVENTION

Girls Holistic Development in Senegal (19) created spaces for girls through participatory and dialogical approaches, fostering relationships and community engagement to shift outcomes related to child, early, and forced marriage. The intervention organized a series of community forums bringing together adolescents, parents, elders, traditional and religious leaders, and teachers. These forums facilitated intergenerational discussions on expectations related to child marriage, girls' education, adolescent pregnancy, and female genital mutilation/cutting. Grandmothers and teachers were trained to counsel girls and caregivers, and to facilitate intervention activities. The intervention intentionally created opportunities for grandmothers, recognized as cultural champions, to engage in reflection with each other and the broader community, resulting in positive shifts in norms supportive of delayed marriage.

RESULTS SNAPSHOT

- Very young girls who joined the program were much more likely to believe that no parents in their community supported marrying girls under 16 years (56.6%) compared to those who did not participate (28.4%) (p-value < 0.01)

What unintended consequences were observed?

Key Learning: Unintended consequences were rarely explored in depth across faith interventions—only 17 of the 41 interventions mentioned them at all. This reflects a significant gap, underscoring the need for more systematic attention to both positive and negative effects of norms-shifting interventions.

Reinforcement of Harmful Social Norms

Working with faith and cultural champions, especially faith leaders, may sometimes reinforce harmful social norms. For example, in an evaluation of *Reproductive Health Access, Information and Services in Emergencies*, an intervention focused on abortion care that was implemented in the Democratic Republic of the Congo, it was noted that, "While their [faith leaders] professed commitment to

mediating conflict is promising, study participants' explicit disapproval of induced abortion, support of enforcing punitive sanctions, and promotion of negative stereotypes for women who induced, could contribute to low post-abortion care utilization by reinforcing abortion stigma." As such, the evaluation recommended working more closely with faith leaders to shift internal cultural norms, given they could help foster deeper community buy-in, address resistance, and cultivate a more supportive environment for normative change.

Pushback on Intervention Components

Interventions described two distinct forms of pushback: resistance from the community toward cultural champions working to shift norms, and opposition from faith communities when introducing new interventions. Both types of resistance can undermine intervention effectiveness and, in some cases, pose serious risks to participants. For example, with *Enabling Girls to Advance Gender Equity*, girl leaders faced physical and verbal abuse due to community misperceptions about the program's focus on sexual and reproductive health–a highly sensitive topic. Such backlash can endanger adolescent girls and young women, underscoring the need for proactive mitigation strategies to safeguard participants and community leaders.

It is widely recognized that norms-shifting interventions may encounter initial resistance from faith and cultural champions; however, this pushback can persist throughout implementation and, at times, evolve into unintended consequences. Ongoing resistance can delay program activities or require adaptations to implementation strategies. For example, *Changing the River's Flow*, experienced slower-than-expected progress at the start due to resistance from leaders, who perceived the program as a threat to their way of life. Over time, however, once these leaders understood and accepted the intervention, their endorsement became a turning point –serving as a catalyst for community participation. This underscores the securing community leader buy-in early in the process.

Unexpected Positive Effects

Several evaluations noted that engaging faith and cultural leaders not only expanded the reach of interventions, but also helped foster a stronger sense of community. For instance, one evaluation highlighted how ongoing community activities–such as shared meals, home visits by faith leaders, and stakeholder involvement–cultivated a sense of "togetherness" that reinforced social cohesion. Similarly, the *Tékponon Jikuagou* intervention reported that cultural champions gained elevated social status, and their communities became admired models of success among neighboring villages. These unexpected positive outcomes suggest that faith and cultural champion interventions can do more than shift norms–they can also strengthen community bonds, promote collective ownership, and foster pride in the change process.

Intervention Scale Up, Adaptation, and Cost

Scale-up refers to deliberate efforts to increase the impact of successfully tested interventions to benefit more people and foster lasting policy and program development (8). However, successful scale-up is far from guaranteed. It requires intentional planning from the earliest stages, beginning with the pilot and continuing throughout the scale-up process. Critically understanding and leveraging the unique role that faith and cultural champions can play in the scale-up process can maximize reach, impact, equity and sustainability.

How was scalability assessed?

Key Learning: Scalability assessments are rarely addressed in the existing evidence; however, when data are collected, they can provide vital insights into why and how pilots are successful.

Scalability is defined as the ease or difficulty of expanding and institutionalizing an intervention, and what is known about the factors that led to a successful pilot can enhance and shape scaling effort (6). To assess scalability, faith and cultural champion interventions used a combination of methods **(Figure 11)**. Surveys and targeted studies were the most common approaches (n=4), followed by the use of administrative and monitoring data (n=3) and costing data (n=3). Many of the piloted interventions were intentionally embedded within existing community structures—especially faith communities—and designed to operate at individual, household, and community levels. This multi-level, integrated approach aimed to enhance sustainability and relied heavily on close collaboration with local stakeholders and ongoing capacity strengthening. Although this kind of approach demands significant effort, all four piloted interventions found that integration fosters supportive networks that promote long-term success—often through a low-cost, light-touch model.

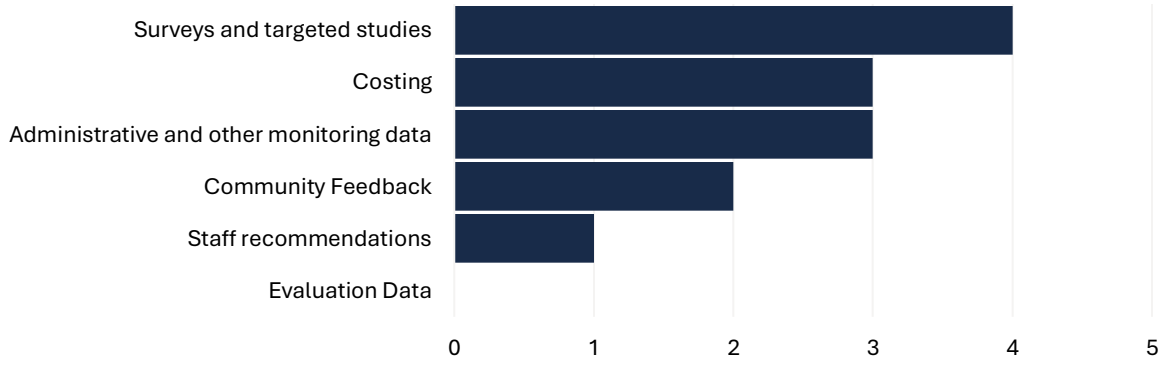


***Figure 11**: Data Used to Assess the Scalability of Four Faith and Cultural Champion Interventions*

What was the role of champions in scale up and adaptation?

Key Learning: Faith and cultural champions can play a critical role in the scale-up and adaptation of interventions, and their involvement can enhance community engagement and contribute to long-term success.

Through scale up and adaptation, interventions seek to reach new audiences and create widespread, lasting change either by expanding, implementing in new settings, or modifying approaches to fit different contexts. Interventions capitalize on their relationships with faith and cultural champions to support this process by helping to embed interventions within existing social networks. Their involvement supports local adaptation, enhances community ownership, and contributes to the sustainability of outcomes.

Scale-Up

Scale-up is the process through which a successful, piloted intervention is expanded to reach more people while staying faithful to its core mechanisms of change. During scale-up, several interventions actively engaged faith and cultural champions in implementation (n=3), integrated key messages into routine champion-led activities (n=2), and involved them in diffusion efforts **(Figure 12).** For example, *Tékponon Jikuagou* leveraged socially influential actors with strong community ties to carry out diffusion activities. However, some interventions faced barriers to scaling, particularly when aiming for national reach. The *Kenya Adolescent Reproductive Health Project* and *Youth Friendly Services,* for instance, struggled to sustain context-specific adaptations during its attempt at national expansion.

Adaptation

When interventions cannot be scaled as originally piloted due to resource constraints, contextual differences, or other factors, program implementers often adapt them. These adapted interventions typically retain core components such as the curriculum or key activities—while modifying implementation strategies to fit the new context. As with scale-up, faith and cultural champions played a central role in adaptation processes. Interventions most commonly engaged these actors by embedding the intervention into their routine activities (n=3) and involving them directly in implementation (n=2) **(Figure 12)**. For example, both *Sonke CHANGE* and *Tsima* worked with faith and cultural champions, empowering them to lead efforts in their communities. Both interventions reported that involving these champions enhanced community engagement and contributed to successful adaptation.

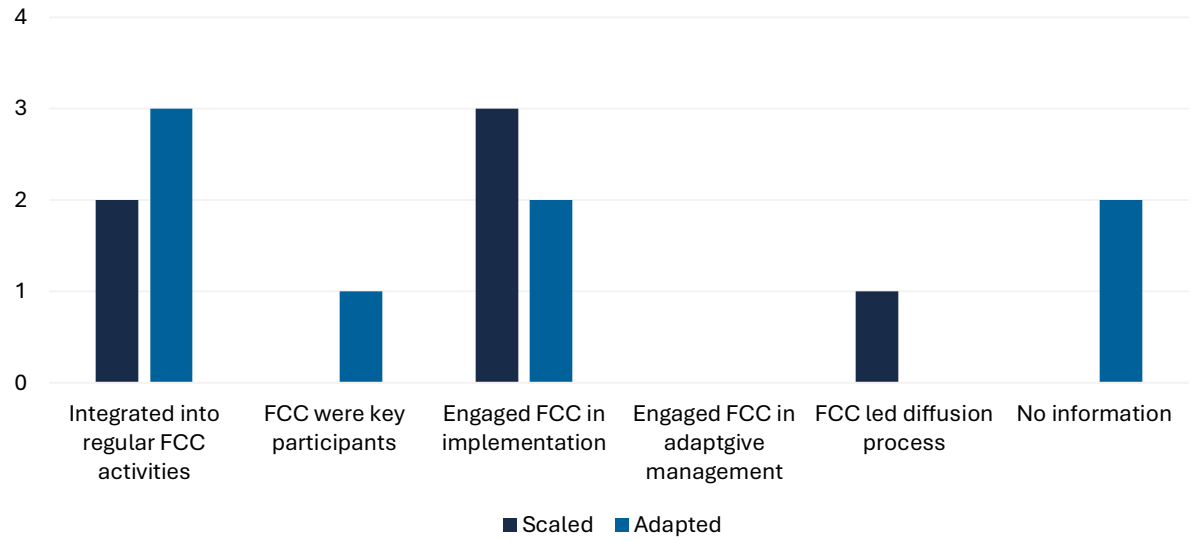


Figure 12. *Role of Faith and Cultural Champions in the Scale-up and Adaptation of Interventions (n=13) (Categories are not mutually exclusive; FCC: Faith and Cultural Champions)*

What cost data was available?

Key Learning: More interventions should collect costing information using standardized measures.

Costing information is crucial for understanding the resources needed to scale or replicate an intervention. **Although many faith and cultural champion interventions are described as low-cost and cost-effective, only seven provided detailed costing data, and none included analyses of cost-effectiveness.** The lack of standardized costing measures across interventions further complicates meaningful comparisons and limits the depth of analysis. **Table 5** presents the available costing information by intervention. As shown, most interventions reported costs either per participant or community or provided general budget summaries. In contrast, *Indashyikirwa* stands out by offering both unit and overall project expenditure data, delivering the most comprehensive insight into spending patterns and cost fluctuations throughout the project lifecycle.

Table 5. *Costing of Faith and Cultural Champion Interventions*

Intervention	Approach	Unit Analyzed	Cost Per Unit
Act with HER	Costing	Participant	$41
Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents	Costing	Participant Girl	$161

Intervention	Approach	Unit Analyzed	Cost Per Unit
Biruh Tesfa (Bright Future)	Costing	Participant Girl *% direct and indirect*	$53.16 *70% direct and 30% indirect*
Growing Up GREAT!	Costing	Total Cost, by month *% labor and non-labor*	Phase 1: $13,500 *44% labor and 56% non-labor* Phase 2: $13,000 *67% labor and 33% non-labor*
Indashyikirwa	Costing	Beneficiary Reached *Total Start-Up and Implementation Cost*	$19.67 *Start-Up: $2,146,167* *Implementation: $2,788,019*
Masculinité, Famille, et Foi	Costing	Total Cost *% direct and indirect*	$610,000 *73% direct and 27% indirect*
Téponon Jijuagou	Costing	Community, by year	$4,093



FEATURED INTERVENTION

Indashyikirwa (20) focused on couples and community activism to lower the prevalence of gender-based violence in intervention communities in Rwanda. Available cost information was broken down by implementation phase and unit cost (21). The start-up phase was the most expensive component at $2.2 million over 11 months, compared to the implementation phase at $2.8 million for 31 months. During the start-up phase, 33% of the budget went toward intervention adaptation, and 29% went toward trainings on the couple's curriculum. Implementation costs were mainly divided among core intervention activities (31%), management (29%), and support activities (23%). By unit, training frontline workers was the most expensive ($84/worker), followed by beneficiary costs ($19.67/beneficiary), and session delivery ($17/session).

RESULTS SNAPSHOT

- After 24 months, women in the program were significantly less likely to accept or justify intimate partner violence (aRR: -0.94; 95% CI: -1.04, -0.84) than those who did not join
- Both men (aRR: 0.54; 95% CI: 0.38, 0.75) and women (aRR: 0.44; 95% CI: 0.31, 0.59) in the program reported less physical or sexual violence—either experienced or perpetrated—after 24 months compared to non-participants

Intervention Monitoring and Evaluation

Evaluation of faith and cultural champion interventions, like other norms-shifting approaches, has become more rigorous in recent years, with many studies using strong designs and integrating qualitative methods to capture both outcomes and context. While this progress is encouraging, critical gaps remain. Most evaluations still lack clear descriptions of how social norms were measured, which limits comparability across studies and reduces confidence in findings. Additionally, although some programs mentioned monitoring or adaptive management, few documented how those processes contributed to learning or informed course corrections. To strengthen future evaluations, it is essential to improve norms measurement by using validated tools more consistently, and to increase transparency in reporting implementation adjustments.

How were interventions evaluated?

Key Learning: The majority of faith and cultural champion interventions used robust experimental or longitudinal evaluation designs, with most incorporating a qualitative component.

The 41 faith and cultural champion interventions employed a range of study designs. Seven utilized cross-sectional or exploratory designs, providing valuable insights into the associations between intervention components and outcomes, but lacking the ability to establish causal relationships. The remaining 34 interventions used more rigorous approaches, including longitudinal studies (n=7), pre- and post-test designs (n=4), experimental designs, including randomized control trials (n=17) and quasi-experimental designs (n=6) **(Figure 13)**. **In terms of data collection, most interventions incorporated qualitative methods, including participatory approaches.** Twelve interventions collected only quantitative data, while two did not specify their methodology. Of the 27 studies that used qualitative or mixed-methods, 19 employed mixed methods and six relied exclusively on qualitative data.

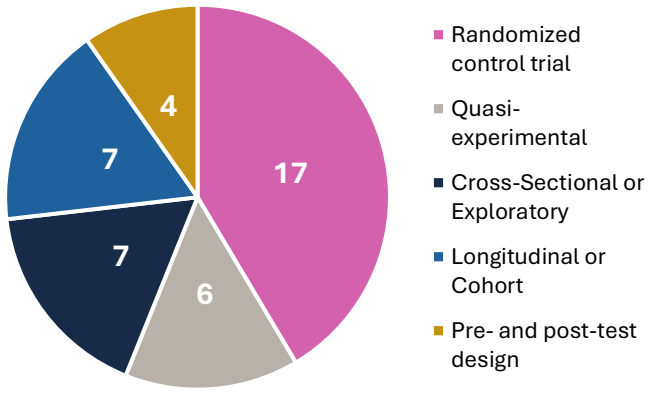


Figure 13. *Faith and Cultural Champion Evaluation Designs (N=41)*
(Categories are not mutually exclusive)

FEATURED INTERVENTION

The Centre for Health and Social Justice's intervention in the Udaipur region of Rajasthan, India employed a mixed-method study design (22). This approach combined cross-sectional population-based surveys, conducted pre- and post-intervention, with key informant interviews and focus group discussions. This multi-method approach provided valuable insights into the intervention's impact on outcomes related to gender attitudes, sexuality, and health. Additionally, it helped contextualize the factors influencing the intervention's effectiveness.

RESULTS SNAPSHOT

- Participants showed a strong improvement in their personal views and behaviors related to gender, sexuality, and violence—from an average score of 12.72 before the program to 17.29 after (p-value < 0.001); related behaviors also improved (from 9.39 to 10.50; p-value = 0.011)
- Community attitudes and behaviors also changed positively. Attitudinal scores improved from 2.56 to 3.37 (p-value < 0.001) and behavior scores from 1.47 to 6.44 (p-value < 0.001)

How were norms measured?

Key Learning: Many faith and cultural champion norms-shifting interventions with documented evaluations provide little or no detail on the specific items, response options, or questions used to measure norms, limiting comparability across studies.

Out of the 41 identified interventions, **only 13 provided specific details on how social norms were measured.** In the remaining 27, the reported measures either focused solely on individual attitudes–rather than social norms–or did not specify whether or how norms were assessed. **Figure 14** illustrates temporal trends in the types of measures used, distinguishing between those developed specifically for the intervention and those adapted from previously validated instruments.

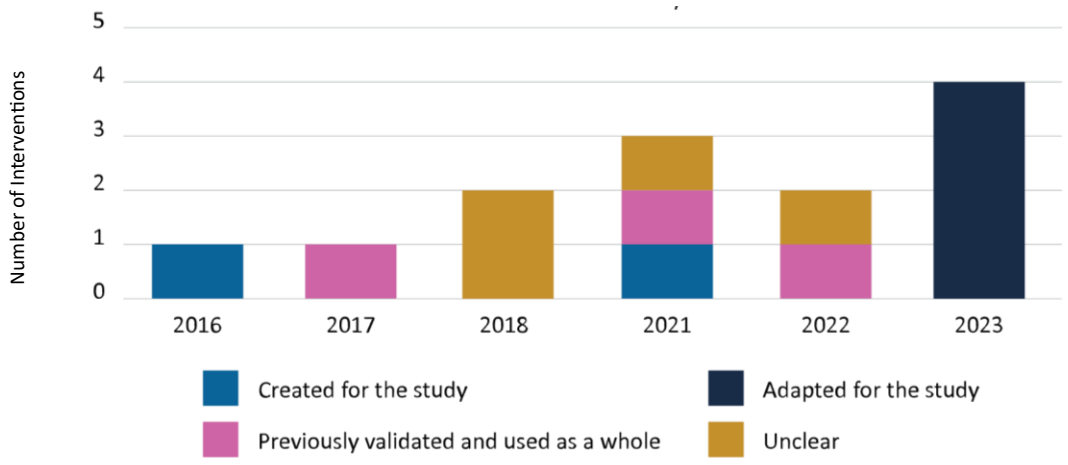


Figure 14. *Norms Measures Used Within Faith and Cultural Champion Interventions (N=13)*

Among the 13 studies that specified one or more norms measures, four employed qualitative approaches, seven used quantitative methods and two incorporated both. Quantitative measures included categorical measures (n=14), scales (n=14), indices (n=1), and binary measures (n=3). Vignettes were used in four interventions; three in qualitative assessments and one in a quantitative assessment. For example, the *Girls Holistic Development* intervention, which focused on reducing child, early, and forced marriage, used vignette-based short stories followed by targeted questions assessing injunctive and descriptive norms. Participants were asked how many girls in their community are expected to marry before 18, and how many actually do, with categorical response options. Nine studies reported testing measure validity, nine assessed reliability, and four studies examined both.

What monitoring and adaptive management approaches were used?

Key Learning: While about half of the interventions referenced monitoring or adaptive management, few detailed how these processes were implemented or used. Embedding these insights into evaluations would deepen understanding of how interventions function and evolve in real-world settings.

As shown in **Figure 15, more than two-thirds (n=29) of the interventions referenced a monitoring and/or adaptive management strategy.** Of these, eight interventions described both approaches, while 13 focused solely on monitoring, and eight referenced only adaptive management. Intervention documentation included information on the tools and systems used to track implementation progress and quality, along with strategies to customize, refine, and adjust materials during the adaptation phase. Deeper investigation into monitoring data or adaptive approaches wasn't possible across all the interventions given limited information in published materials.

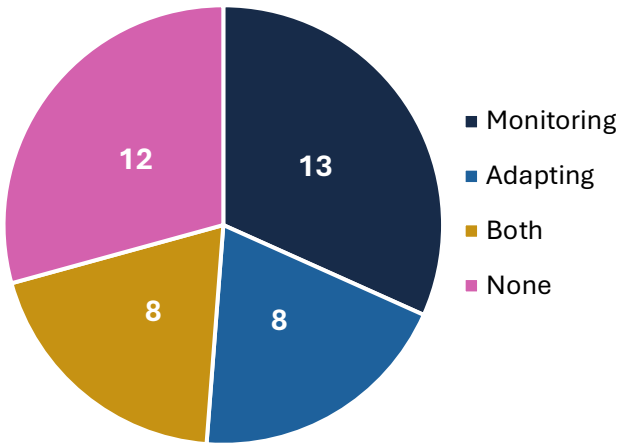


Figure 15. *Monitoring and Adaptive Management Strategies Used in Faith and Cultural Champion Interventions (N=41)*

FEATURED INTERVENTION

Tipping Point Initiative in Bangladesh (23) is an example of an integrated norms-shifting intervention aimed at addressing child, early, and forced marriage. It focused on building adolescent girls' agency, creating supportive relationships, and transforming norms that uphold child marriage practices. The intervention employed both monitoring and adaptive management strategies, using a mixed-methods monitoring framework which combined qualitative and quantitative approaches. A comprehensive data quality monitoring system was in place for both baseline and endline survey data collection. In terms of adaptive strategies, the intervention adjusted its approach in response to challenges posed by the COVID-19 pandemic, ensuring the safety of participants while maintaining the fidelity of the intervention and its original implementation plans.

RESULTS SNAPSHOT

- The intervention arm that emphasized changing social norms led to significant improvements in beliefs about who should make decisions about girls' marriage (Coeff: 0.94; 95% CI: 0.10, 1.78)
- Girls who participated were also significantly more likely to earn money (Coeff: 0.26; 95% CI: 0.001, 0.53)

Key Takeaways

Limitations

In this module, we synthesized available evidence to generate insights into interventions engaging faith and cultural champions. However, there were some limitations:

- **There was little information on normative measures across the reviewed interventions.** Historically, programs have measured behavioral and attitudinal changes as proxies for norm shifts, with only recent efforts directly assessing norm change. To address this, the research team expanded the inclusion criteria to capture interventions reporting changes in norms, behaviors, or attitudes, increasing the number of articles reviewed. Still, only 13 of the 41 faith and cultural champion interventions included a qualitative or quantitative assessment of normative change. This highlights ongoing limitations in program design and evaluation. Moreover, norm measurement, particularly in the context of faith and cultural champions, was generally weak, lacking in rigor and contextual relevance. There is a clear need for robust, validated tools to directly measure norms, including inductive qualitative approaches that capture local realities and theory-driven quantitative methods developed through deductive processes.

- **Most interventions did not explicitly incorporate social norms, gender norms, or behavior change theories into their design or evaluation frameworks**. Few clearly articulated or empirically tested the pathways through which gender norms influence behavior change. These gaps underscore the need for theory-informed, community-centered, and methodologically sound approaches to designing, implementing, and evaluating norms-shifting interventions.

- **Information on standalone faith champion interventions was scarce**. Interventions used multiple strategies engaging faith and cultural champions; however, there was limited evidence on the specific impact of the faith and cultural champion component as a standalone strategy.

- Despite a rigorous search strategy across electronic databases and consultation with experts—including the Agency and Social Norms Learning Collaboratives, our multi-disciplinary Advisory Board, and Adolescent Youth and Learning Agenda implementing partners—**some relevant literature on faith and cultural champion interventions may have been missed.** This review was limited to English and French sources, potentially excluding studies published in other languages.

- **Details on the involvement of faith and cultural champions were often limited.** While many interventions involved faith leaders, the literature rarely specified their denomination or whether they participated as individuals or through institutions. Descriptions of cultural champions were somewhat more detailed but often relied on broad terms like "traditional leaders," "key opinion leaders," and "community leaders," without clarifying their specific roles or influence.

Five Recommendations for Success

The evidence suggests that engaging faith and cultural champions can contribute to positive shifts in norms, attitudes, and behaviors –particularly when they are meaningfully integrated into interventions through strategies like peer engagement, community dialogue, and diffusion. However, results were mixed, showing no consistent patterns of success across health outcomes, intervention duration, engagement strategies, or types of champions. This underscores both the promise and complexity of engaging faith and cultural champions. Many interventions acknowledged the influential role of these actors in shaping community expectations—particularly in relation to adolescent health, gender roles, and family life—but few rigorously assessed normative change or clearly documented how faith and cultural champions were engaged throughout the intervention life cycle. Unintended consequences, though rarely reported, also emerged as an area requiring closer attention. These gaps highlight an opportunity to improve the design, implementation, and evaluation of faith and cultural champion interventions by grounding them more firmly in social and behavior change theory, tailoring them to community dynamics, and improving their responsiveness to evolving social norms. The following recommendations draw on both findings and the notable gaps to support more thoughtful, evidence-based use of these approaches.



Conduct formative research to inform intervention design and evaluation, with greater attention to community-relevant norms and change pathways.

Interventions should begin with formative research to identify which norms are most relevant to the target population and how they influence behaviors across different reference groups.Few reviewed interventions conducted such research, limiting confidence that the norms addressed were the most relevant to the community. Additionally, many failed to articulate or test pathways connecting shifts in norms to behavior change, underscoring the need to more closely link implementation with theory. Norms measurement within faith and cultural champion interventions must also be strengthened through rigorous tool development and validation, with a focus on both descriptive and injunctive norms. This will allow for a more robust assessment of how these approaches drive norms shifts–in addition to impacting behavioral outcomes.



Engage and equip faith and cultural champions from the outset through participatory design, capacity strengthening, and structured support.

Evidence indicates that faith and cultural champions are more effective when engaged early in the design process, as they help ensure approaches are aligned with community values and religious teachings. Programs that provided training and ongoing support saw champions become more confident and capable of addressing sensitive topics and challenging harmful norms. Effective strategies included not only training, but also structured peer engagement, group discussions, and reflection spaces that reinforced their role as facilitators of change. When champions were treated as true partners, rather than passive messengers, interventions also experienced greater community acceptance and buy-in. Importantly, ongoing dialogue with these leaders throughout implementation was key to ensuring intervention activities were responsive to shifting community dynamics, enhancing sustainability and reducing the risk of backlash.



Integrate multiple norms-shifting mechanisms to enhance effectiveness, while strengthening documentation of how these mechanisms are applied.

Evidence from the review suggests that interventions using multiple mechanisms of change, such as grounding interventions in community values, promoting diffusion, and making norms visible, tended to report more positive outcomes. For example, Indashyikirwa applied all five mechanisms over just seven months and achieved notable improvements in gender-based violence-related behaviors and family planning attitudes, illustrating that success depends more on strategy than duration alone. However, most interventions described their components superficially, with limited detail on how change mechanisms were activated or how specific modalities (e.g., training, peer-led groups, diffusion strategies) contributed to norm change. There is a clear need for stronger implementation research to unpack how and when change mechanisms work, particularly for faith and cultural champion interventions, where their influence in communities is high but change can be slow or uneven. Better documentation and measurement of these pathways would support replicability and inform more strategic layering of mechanisms in future programming.



Expand the use of media to strengthen and extend the influence of faith and cultural champion interventions.

Few interventions engaged faith and cultural champions while also utilizing digital or social media, and none incorporated near media (e.g., radio, television, print), despite their potential to reinforce messaging and expand reach. This underutilization of media represents a missed opportunity to scale efforts and drive broader normative shifts beyond direct, in-person engagement. When faith and cultural champions' messages are echoed through the media, they may have greater impact by prompting reflection, dialogue, and public visibility of emerging norms. Future programs should explore how various media channels can complement in-person engagement to enhance diffusion, sustainability, and reach, particularly among harder-to-reach groups like youth. Research is also needed to identify which combinations of modalities are most effective across different target populations and contexts.



Design interventions with scale and sustainability in mind and assess potential for scale to inform future programming efforts.

Faith and cultural champion interventions are often viewed as low-cost, scalable approaches to shift norms in community settings. However, few reviewed interventions included detailed costing data, scalability plans, or implementation strategies beyond the pilot phase. Only a small number addressed how activities–such as training, community dialogue, or champion engagement–could be sustained or expanded after funder support ended. Embedding scale-up considerations early, including simplified delivery models, adaptable materials, integration with existing structures, and long-term budgeting, can strengthen feasibility and sustainability. Nonetheless, more rigorous costing studies and documentation of real-world adaptation and expansion are needed to assess whether these approaches can fulfill their scalable promise.

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Annexes

Annex 1. Faith and Cultural Champions Interventions and Associated References

Intervention	Implementing Organizations	Country	Outcome(s)	Populations	References
Act With Her-Ethiopia	Pathfinder International, CARE, Gender and Adolescence: Global Evidence	Ethiopia	SRH - FP, WEE, GBV, CEFM	EA	Baird S, Hamory J, Gezahegne K, Pincock K, Woldehanna T, Yadete W, et al. Improving Menstrual Health Literacy Through Life-Skills Programming in Rural Ethiopia. Frontiers in Global Women's Health. 2022;3. doi: 10.3389/fgwh.2022.838961. Baird S, Dutton R, Hamory J, Iyasu A, Jones N, Presler-Marshall E, et al. Transforming gender norms through life-skills programming in rural Ethiopia: short-term impacts and emerging lessons for adaptive programming. Oromia case study. London: Gender and Adolescence: Global Evidence, 2021.
Adolescent Transition in West Africa	Center on Gender Equity and Health at UC San Diego, Save the Children, in collaboration with Ministries of Education and Health, and local non-governmental organizations in Burkina Faso, Mali and Niger	Burkina Faso, Mali, Niger	SRH - FP, GBV, SRH - HIV, CEFM	EA, OA, YA	Center on Gender Equity and Health. Adolescent Transition in West Africa (ATWA) Outcome Evaluation: Year 2 (2022-2023) Endline Report. La Jolla, CA: University of California San Diego for Save the Children, 2024.

Intervention	Implementing Organizations	Country	Outcome(s)	Populations	References
Bandebereho couples' intervention	Rwanda Men's Resource Centre, Equimundo, Rutgers WPF	Rwanda	SRH - FP, GBV	YA	Doyle K, Levtov RG, Barker G, Bastian GG, Bingenheimer JB, Kazimbaya S, et al. Gender-transformative Bandebereho couples' intervention to promote male engagement in reproductive and maternal health and violence prevention in Rwanda: Findings from a randomized controlled trial. PLoS One. 2018;13(4):e0192756. doi: 10.1371/journal.pone.0192756.
Biruh Tesfa for All	Population Council, Humanity & Inclusion, Plan International, JaRco Consulting	Ethiopia	WEE	EA, OA, YA	Erulkar A, Hailu E, Markos H, Demissie G, Tessema T, Hailu H. Evaluation of Biruh Tesfa (Bright Future) for All: A program for out-of-school girls, migrants, and domestic workers in low-income Ethiopian cities. New York: Population Council., 2023.
Breakthrough ACTION - Nigeria	Population Council, Avenir Health, ideas42, Institute for Reproductive Health Georgetown University, Population Reference Bureau, Tulane University	Nigeria	CEFM, SRH - FP, GBV	*Not specified*	Adetunji A, Bazzano AN, Adediran M, Hutchinson P, Etim E-O. Qualitative research on Breakthrough ACTION's Advocacy Core Group Model for integrated social behavior change programming in Nigeria. Breakthrough RESEARCH Technical Report. Washington, DC: Population Council, 2023.
Breakthrough Generation Initiative	Tostan	Gambia, Guinea, Guinea-Bissau, Mali	WEE, GBV, CEFM	OA, YA	Tostan. Breakthrough Generation Initiative Mixed-Methods Final Evaluation Report. Tostan, 2023. Tostan. The Community Empowerment Program (CEP) 2019 – 2022: Key findings. Tostan, 2023.
Change Starts at Home	Equal Access International, Interdisciplinary Analysts, Vijaya Development Resource Centre	Nepal	GBV	*Not specified*	Francis S, Shrestha PN, Shrestha B, Ferguson G, Batayeh B, Hennink M, et al. The Influence of Organised Diffusion on Social Norms Change: Addressing Intimate Partner Violence in Nepal. GLOBAL PUBLIC HEALTH. 2021;16(4):610-22. doi: 10.1080/17441692.2020.1845767. Clark CJ, Shrestha B, Ferguson G, Shrestha PN, Calvert C, Gupta J, et al. Impact of the Change Starts at Home Trial on Women's experience of intimate partner

Intervention	Implementing Organizations	Country	Outcome(s)	Populations	References
					violence in Nepal. SSM - Population Health. 2020;10:100530. doi: 10.1016/j.ssmph.2019.100530.
Changing the River's Flow – A Gender Transformative Programme for Young People	SAfAIDS, Sonke Gender Justice	Zimbabwe	SRH - FP, SRH - HIV, GBV	OA, YA	SAfAIDS, Sonke Gender Justice. Evaluation of the Changing the River's Flow for Young People (CTRF4YP) Programme. 2021.
Communities Care: Transforming Lives and Preventing Violence Programme	United Nations Children's Fund, Voice for Change, The Organization for Children Harmony, Comitato Internazionale per Lo Sviluppo dei Popoli	Somalia and South Sudan	GBV	*Not specified*	Read-Hamilton S, Marsh M. The Communities Care programme: changing social norms to end violence against women and girls in conflict-affected communities. Gender & Development. 2016;24(2):261-76. doi: 10.1080/13552074.2016.1195579. Glass N, Perrin N, Marsh M, Clough A, Desgroppes A, Kaburu F, et al. Effectiveness of the Communities Care programme on change in social norms associated with gender-based violence (GBV) with residents in intervention compared with control districts in Mogadishu, Somalia. BMJ Open. 2019;9(3):e023819. doi: 10.1136/bmjopen-2018-023819.
Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces	International Rescue Committee, Columbia University	Ethiopia	GBV, CEFM	EA, OA, YA	Stark L, Asghar K, Seff I, Yu G, Tesfay Gessesse T, Ward L, et al. Preventing violence against refugee adolescent girls: findings from a cluster randomised controlled trial in Ethiopia. BMJ Glob Health. 2018;3(5):e000825. doi: 10.1136/bmjgh-2018-000825.
Do Kadam Barabari Ki Ore (Two Steps Towards Equality)	Population Council, Centre for Catalyzing Change, London School of Hygiene & Tropical Medicine	India	WEE, GBV	OA, YA	Jejeebhoy SJ, Santhya KG. Preventing violence against women and girls in Bihar: challenges for implementation and evaluation. Reproductive Health Matters. 2018;26(52):92-108. doi: 10.1080/09688080.2018.1470430.
Enabling Girls to Advance Gender Equity	Rise Up of the Public Health Institute, Girls Empowerment Network of	Malawi	SRH - FP, CEFM	OA	Hinson L, Rizzo T, Schaub E. Enabling Girls to Advance Gender Equity (ENGAGE) Report on the Midline

Intervention	Implementing Organizations	Country	Outcome(s)	Populations	References
	Malawi, International Center for Research on Women, Youth Tech Health, YONECO				Evaluation Results. International Center for Research on Women, 2019.
Engaging with Faith Groups to Prevent Violence Against Women and Girls in Conflict-affected Communities	Tearfund, HEAL Africa	Democratic Republic of the Congo	GBV	*Not specified*	Le Roux E, Corboz J, Scott N, Sandilands M, Lele UB, Bezzolato E, et al. Engaging with faith groups to prevent VAWG in conflict-affected communities: results from two community surveys in the DRC. BMC Int Health Hum Rights. 2020;20(1):27. doi: 10.1186/s12914-020-00246-8.
Girls Holistic Development Program	Grandmother Project-Change through Culture, Institute for Reproductive Health Georgetown University	Senegal	CEFM	EA	Kohli A, Shaw B, Guntzberger M, Aubel J, Coulibaly M, Igras S. Transforming social norms to improve girl-child health and well-being: a realist evaluation of the Girls' Holistic Development program in rural Senegal. Reprod Health. 2021;18(1):243. doi: 10.1186/s12978-021-01295-5.
Growing Up GREAT!	Center on Gender Equity and Health at UC San Diego, Johns Hopkins University, University of Kinshasa, Save the Children, in collaboration with nine youth-focused community-based organizations	Democratic Republic of the Congo	SRH - FP, GBV	EA	Center on Gender Equity and Health. Growing Up Great! GEAS Wave 4 Report. La Jolla, CA: University of California San Diego for the Bill & Melinda Gates Foundation, 2021. Center on Gender Equity and Health. A Seven-Year Retrospective of Investment in and Scale-up of Gender-transformative Sexuality Education for Very Young Adolescents in DRC: End of Project Summative Research Note. La Jolla, CA: Center on Gender Equity and Health at the University of California San Diego for the Bill & Melinda Gates Foundation, 2023. Institute for Reproductive Health. Growing Up GREAT! End of Project Report. Washington, DC: Georgetown University for the U.S. Agency for International Development (USAID), 2021.

Intervention	Implementing Organizations	Country	Outcome(s)	Populations	References
Indashyikirwa (Agents of Change)	CARE Rwanda, Rwanda Men's Resource Centre, Rwanda Women's Network	Rwanda	GBV, WEE	YA	Stern E, Heise L, McLean L. The doing and undoing of male household decision-making and economic authority in Rwanda and its implications for gender transformative programming. Culture, Health & Sexuality. 2017;19(12):1-16. doi: 10.1080/13691058.2017.1404642. Chatterji S, Stern E, Dunkle K, Heise L. Community activism as a strategy to reduce intimate partner violence (IPV) in rural Rwanda: Results of a community randomised trial. J Glob Health. 2020;10(1):010406. doi: 10.7189/jogh.10.010406. Stern E, Martins S, Stefanik L, Uwimpuhwe S, Yaker R. Lessons learned from implementing Indashyikirwa in Rwanda- an adaptation of the SASA! approach to prevent and respond to intimate partner violence. Evaluation and Program Planning. 2018;71:58-67. doi: 10.1016/j.evalprogplan.2018.08.005. Dunkle K, Stern E, Chatterji S, Heise L. Effective prevention of intimate partner violence through couples training: a randomised controlled trial of Indashyikirwa in Rwanda. BMJ Global Health. 2020;5(12):e002439. doi: 10.1136/bmjgh-2020-002439.
Inspiring Married Adolescent Girls to Imagine New Empowered Futures	CARE, Comité d'Appui au Développement Local, Mohideb Project	Bangladesh, Niger	SRH - FP	OA, YA	CARE, Far Harbor. IMAGINE Endline Evaluation Report. CARE, 2023. CARE USA. Improving Support for Delaying Early Childbearing Among Newly Married Adolescent Girls: Qualitative Evaluation of the CARE IMAGINE project in Niger and Bangladesh. Cooperative for Assistance and Relief Everywhere, Inc., 2022.

Intervention	Implementing Organizations	Country	Outcome(s)	Populations	References
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École des Maris	United Nations Population Fund, Soutien aux ONG: Empowerment et renforcement de capacities, Strategies de développement, Institute for Reproductive Health Georgetown University	Niger	SRH - FP	*Not specified*	l'Institut pour la Santé de la Reproduction. Étude des effets de l'intervention de l'École des Maris sur la dynamique de genre pour améliorer la planification familiale et la santé reproductive au Niger. Washington, DC: Université de Georgetown, pour l'Agence des États-Unis pour le Développement International (USAID), 2019.
Masculinities, Faith and Peace	Institute for Reproductive Health Georgetown University, Tearfund, Faith Alive Foundation, Team Community Integrated Health Development Advancement	Nigeria	GBV, SRH - FP	*Not specified*	Institute for Reproductive Health. Project Results from Masculinities, Faith and Peace in Nigeria. Washington, DC: Institute for Reproductive Health, Georgetown University, 2021. Institute for Reproductive Health. Masculinities, Faith and Peace Project Baseline Report: Quantitative Data Analysis Report. Washington, DC: Institute for Reproductive Health, Center for Child and Human Development, Georgetown University, 2020.
Masculinité, Famille, et Foi	Institute for Reproductive Health Georgetown University, Tearfund, Association de Santé Familiale, Population Services International	DRC	SRH - FP, WEE, GBV	YA	Lorenzetti L, Costenbader E, Martinez A, McLarnon C, Lundgren R, Kohli A, et al. Using structural equation modeling to explore the pathways betwomen's economic empowerment n a social norms-shifting intervention and couple communication for family planning in Kinshasa, DRC. PREPRINT (Version 1) available at Research Square. 2022. doi: 10.21203/rs.3.rs-1626797/v1. Institute for Reproductive Health. Masculinité, Famille, et Foi : End of Project Report. Washington, DC: Institute for Reproductive Health, Georgetown University for the U.S. Agency for International Development (USAID), 2021.

Intervention	Implementing Organizations	Country	Outcome(s)	Populations	References
					Institute for Reproductive Health. Transforming Masculinities/Masculinité, Famille, et Foi Intervention; Endline Quantitative Research Report. Washington, DC: Institute for Reproductive Health (IRH) and Center for Child and Human Development, Georgetown University with the United States Agency for International Development (USAID, 2020. Institute for Reproductive Health. Transforming Masculinities and Promoting Family Planning in Faith-based Communities: Midline Ethnography Report. Washington, DC: Institute for Reproductive Health, Georgetown University for the U.S. Agency for International Development (USAID), 2019.
Men with Conscience Intervention (adaption of the One Man Can Intervention)	University of Cape Town South Africa, University of Kwazulu-Natal, Durban, South Africa, Sonke Gender Justice	South Africa	GBV	*Not specified*	de Villiers T, Duma S, Abrahams N. "As young men we have a role to play in preventing sexual violence": Development and relevance of the men with conscience intervention to prevent sexual violence. PLoS One. 2021;16(1):e0244550. doi: 10.1371/journal.pone.0244550.
Modified Empowerment and Self-Defense Training	No Means No Worldwide, UJAMAA Africa/USA, Stanford University, United States International University	Kenya	SRH - FP, GBV	EA, OA, YA	Sarnquist C, Omondi B, Sinclair J, Gitau C, Paiva L, Mulinge M, et al. Rape prevention through empowerment of adolescent girls. Pediatrics. 2014;133(5):e1226-32. doi: 10.1542/peds.2013-3414.
Promoting Adolescent Engagement, Knowledge and Health	Professional Assistance for Development Action, Institute for Fiscal Studies University College London, International Centre for Research on Women	India	GBV, CEFM, Other	EA, OA, YA	Andrew A, Krutikova S, Smarrelli G, Verma H. Gender norms, violence and adolescent girls' trajectories: evidence from a field experiment in India. London: Institute for Fiscal Studies, 2022.
No name 1	Institute of Public Health, Obafemi Awolowo University, Nigeria, Society for Family Health	Nigeria	SRH - FP, SRH - HIV	OA, YA	Arije O, Udoh E, Ijadunola K, Afolabi O, Aransiola J, Omoregie G, et al. Combination prevention package of interventions for reducing vulnerability to HIV among adolescent girls and young women in Nigeria: An

Intervention	Implementing Organizations	Country	Outcome(s)	Populations	References
					action research. PLOS ONE. 2023;18(1):e0279077. doi: 10.1371/journal.pone.0279077.
No name 2, Program by the Centre for Health and Social Justice	Centre for Health and Social Justice, Manjiri, University of Washington	India	GBV	*Not specified*	Freudberg H, Contractor S, Das A, Kemp CG, Nevin PE, Phadiyal A, et al. Process and impact evaluation of a community gender equality intervention with young men in Rajasthan, India. Cult Health Sex. 2018;20(11):1214-29. doi: 10.1080/13691058.2018.1424351.
Prevention of HIV/STI among Married Women in Urban India; Research and Intervention in Sexual Health: Theory to Action	International Center for Research on Women, Population Council, Tata Institute of Social Sciences, University of Connecticut, Institute for Community Research, Tulane University	India	SRH - FP	*Not specified*	Schensul SL, Singh R, Schensul JJ, Verma RK, Burleson JA, Nastasi BK. Community Gender Norms Change as a Part of a Multilevel Approach to Sexual Health Among Married Women in Mumbai, India. Am J Community Psychol. 2015;56(1-2):57-68. doi: 10.1007/s10464-015-9731-1.
Reproductive Health Access, Information and Services in Emergencies Initiative	CARE, International Rescue Committee, Save the Children, Columbia University	Democratic Republic of the Congo	SRH - FP	*Not specified*	Steven VJ, Deitch J, Dumas EF, Gallagher MC, Nzau J, Paluku A, et al. "Provide care for everyone please": engaging community leaders as sexual and reproductive health advocates in North and South Kivu, Democratic Republic of the Congo. Reproductive Health. 2019;16(1):98. doi: 10.1186/s12978-019-0764-z.
Reaching Married Adolescents	Pathfinder International, Lafia Matassa, Center on Gender Equity and Health at UC San Diego	Niger	SRH - FP, GBV	EA, OA, YA	Boyce SC, Minnis AM, Deardorff J, McCoy SI, Challa S, Johns NE, et al. Effect of a gender-synchronized family planning intervention on inequitable gender norms in a cluster randomized control trial among husbands of married adolescent girls in Dosso, Niger. medRxiv. 2023. doi: 10.1101/2023.09.28.23296292. Boyce SC, Minnis AM, Deardorff J, McCoy SI, Goin DE, Challa S, et al. Mediating effects of inequitable gender norms on intimate partner violence and contraceptive use in a cluster randomized control trial in Niger.

Intervention	Implementing Organizations	Country	Outcome(s)	Populations	References
					American Journal of Epidemiology. 2024. doi: 10.1093/aje/kwae294. Silverman JG, Brooks MI, Aliou S, Johns NE, Challa S, Nouhou AM, et al. Effects of the reaching married adolescents program on modern contraceptive use and intimate partner violence: results of a cluster randomized controlled trial among married adolescent girls and their husbands in Dosso, Niger. Reprod Health. 2023;20(1):83. doi: 10.1186/s12978-023-01609-9.
Resilience Education and Skills Development for Youth and Families Program	Duke University, London School of Hygiene and Tropic Medicine, Egerton University, Women's Institute for Secondary Education and Research	Kenya	SRH - FP, SRH - HIV	EA, OA	Puffer ES, Green EP, Sikkema KJ, Broverman SA, Ogwang-Odhiambo RA, Pian J. A church-based intervention for families to promote mental health and prevent HIV among adolescents in rural Kenya: Results of a randomized trial. J Consult Clin Psychol. 2016;84(6):511-25. doi: 10.1037/ccp0000076. Rasmussen JM, Johnson SL, Ochieng Y, Jaguga F, Green E, Puffer E. Congregation leader and member discussions in a church-based family strengthening, mental health promotion, and HIV prevention trial: Intervention mechanisms in a randomized trial in rural Kenya. Cambridge Prisms: Global Mental Health. 2024;11:e52. doi: 10.1017/gmh.2024.44.
Samvedana Plus	Karnataka Health Promotion Trust, Chaitanya AIDS Tadegattuva Mahila Sangha, London School of Hygiene and Tropic Medicine	India	SRH - FP, GBV	YA	Javalkar P, Platt L, Prakash R, Beattie TS, Collumbien M, Gafos M, et al. Effectiveness of a multilevel intervention to reduce violence and increase condom use in intimate partnerships among female sex workers: cluster randomised controlled trial in Karnataka, India. BMJ Glob Health. 2019;4(6):e001546. doi: 10.1136/bmjgh-2019-001546.
Sista2Sista	United Nations Population Fund, Family AIDS Caring Trust, World Vision	Zimbabwe	SRH - FP, GBV, CEFM, HIV	EA, OA, YA	Oberth G, Chinhengo T, Katsande T, Mhonde R, Hanisch D, Kasere P, et al. Effectiveness of the Sista2Sista programme in improving HIV and other

Intervention	Implementing Organizations	Country	Outcome(s)	Populations	References
	Zimbabwe, Zimbabwe AIDS Prevention and Support Organization, Zimbabwe Community Health Intervention Research-Behavior Change				sexual and reproductive health outcomes among vulnerable adolescent girls and young women in Zimbabwe. African Journal of AIDS Research. 2021;20(2):158-64. doi: 10.2989/16085906.2021.1918733.
Skillz Street	Grassroot Soccer, London School of Hygiene & Tropical Medicine, Brown University	South Africa	SRH - FP, SRH - HIV	EA, OA	Hershow R, Gannett K, Merrill J, Kaufman BE, Barkley C, DeCelles J, et al. Using soccer to build confidence and increase HCT uptake among adolescent girls: A mixed-methods study of an HIV prevention programme in South Africa. Sport Soc. 2015;18(8):1009-22. doi: 10.1080/17430437.2014.997586.
Sonke CHANGE Intervention	Sonke Gender Justice, University of the Witwatersrand	South Africa	GBV	*Not specified*	Christofides NJ, Hatcher AM, Rebombo D, McBride RS, Munshi S, Pino A, et al. Effectiveness of a multi-level intervention to reduce men's perpetration of intimate partner violence: a cluster randomised controlled trial. Trials. 2020;21(1):359. doi: 10.1186/s13063-020-4185-7.
Tékponon Jikuagou	Institute for Reproductive Health Georgetown University, CARE, Plan International	Benin	SRH - FP	*Not specified*	Institute for Reproductive Health. Tékponon Jikuagou: Final Report. Washington, DC: Institute for Reproductive Health, Georgetown University for the U.S. Agency for International Development (USAID), 2017. Kim TY, Igras S, Barker KM, Diakité M, Lundgren RI. The power of women's and men's Social Networks to catalyse normative and behavioural change: Evaluation of an intervention addressing Unmet need for Family Planning in Benin. BMC Public Health. 2022;22(1):672. doi: 10.1186/s12889-022-12681-4. Rubardt M. Projet Tékponon Jikuagou: Experiences and Effects of Using NGO Platforms to Scale-Up the TJ Social Network Package. USAID. Washington DC: Institute for Reproductive Health, Georgetown

Intervention	Implementing Organizations	Country	Outcome(s)	Populations	References
					University for the U.S. Agency for International Development (USAID), 2016.
The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project	Population Council, Population Services and Training Center, Centre for International Development Issues Nijmegen, mPower Social Enterprises	Bangladesh	SRH - FP, WEE, GBV, CEFM	EA, OA, YA	Amin S, Ahmed J, Saha J, Hossain MI, Haque E. Delaying child marriage through community-based skills-development programs for girls: Results from a randomized controlled study in rural Bangladesh. New York and Dhaka: Population Council., 2016.
The Kenya Adolescent Reproductive Health Project	Population Council, PATH, Ministry of Education, Science and Technology, Ministry of Health and Gender, Sports, Culture and Social Services	Kenya	SRH - FP, SRH - HIV	EA, OA, YA	Njue C, Voeten HACM, Ohuma E, Looman C, Habbama DF, Askew I. Findings of an evaluation of community and school-based reproductive health and HIV prevention programs in Kenya. African Population Studies. 2015;29. doi: 10.11564/29-2-775.
Tipping Point	CARE, Jainita Shinnomul Songstha, Gram Bikash Kendra, Association of Slum Dwellers, Bangladesh, Siddhartha Samuyadayik Samaj, Dalit Social Development Center, Emory University	Bangladesh	SRH – FP, SRH – HIV, WEE, GBV, CEFM	*Not specified*	Clark CJ, Jashinsky K, Renz E, Bergenfeld I, Durr RL, Cheong YF, et al. Qualitative endline results of the tipping point project to prevent child, early and forced marriage in Nepal. Global Public Health. 2023;18(1):2287606. Doi: 10.1080/17441692.2023.2287606. Karim N, Greene ME, Picard M. The cultural context of child marriage in Nepal and Bangladesh: Findings from CAREs Tipping Point Project. Community participatory analysis. Reserch report. CARE, 2016. Naved RT, Al Mamun M, Talukder A, Mahmud S, Parvin K, Kalra S, et al. Impact of Tipping Point Initiative, a social norms intervention, in addressing child marriage and other adolescent health and behavioral outcomes in a northern district of Bangladesh. CARE, 2022.
Tsima, a community mobilization HIV prevention program	Sonke Gender Justice, University of the Witwatersrand, University of California – San Francisco, University of	South Africa	SRH – FP, SRH – HIV, GBV	YA	Leddy AM, Gottert A, Haberland N, Hove J, West RL, Pettifor A, et al. Shifting gender norms to improve HIV service uptake: Qualitative findings from a large-scale community mobilization intervention in rural South

Intervention	Implementing Organizations	Country	Outcome(s)	Populations	References
	North Carolina – Chapel Hill, Right to Care, Population Council				Africa. PLOS ONE. 2021;16(12). Doi: 10.1371/journal.pone.0260425. Gottert A, Pulerwitz J, Haberland N, Mathebula R, Rebombo D, Spielman K, et al. Gaining traction: Promising shifts in gender norms and intimate partner violence in the context of a community-based HIV prevention trial in South Africa. PloS One. 2020;15(8):e0237084. Doi: 10.1371/journal.pone.0237084.
Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation	World Vision Uganda/Australia, Uganda Youth Development Link, Uganda Youth Network, Kampala City Council Authority, Western Sydney University, University of Sydney, Makerere University	Uganda	SRH - FP, SRH - HIV, GBV	EA, OA, YA	Renzaho AMN, Kamara JK, Doh D, Bukuluki P, Mahumud RA, Galukande M. Do Community-based Livelihood Interventions Affect Sexual and Reproductive Health and Rights of Young People in Slum Areas of Uganda: a Difference-in-difference with Kernel Propensity Score Matching Analysis. J Urban Health. 2022;99(1):164-89. doi: 10.1007/s11524-021-00596-1.
Youth-friendly services	Ministry of Health of Federal Democratic Republic of Ethiopia, Pathfinder International, Jimma University, Bahir Dar University	Ethiopia	SRH – FP	EA, OA, YA	Munea AM, Alene GD, Debelew GT, Sibhat KA. Socio-cultural context of adolescent sexuality and youth friendly service intervention in West Gojjam Zone, Northwest Ethiopia: a qualitative study. BMC Public Health. 2022;22(1):281. Doi: 10.1186/s12889-022-12699-8.
Zambia Community HIV Prevention Project	PACT, Plan International, Catholic Medical Mission Board, Zambia Center for Communications Program, Sport in Action, Copperbelt Health Education Project, Zambia Health Education and Communication Trust, Young Women's Christian Association	Zambia	SRH - HIV, GBV	EA, OA, YA	PACT Zambia. USAID Zambia Community HIV Prevention Project (USAID Z-CHPP) Quarterly Report: Year 4 – January 1, 2019 to March 31, 2019. PACT Zambia, 2020.

Annex 2. Full Intervention Faith and Cultural Champion Heat Maps

Mechanisms of Change

Key: Positive Negative Neutral Unclear

N = Norms B = Behavior A = Attitudes

Sexual and reproductive health (FP)	N	B	A	Sexual and reproductive health (HIV)	N	B	A	Child, early and forced marriage	N	B	A	Women's economic empowerment	N	B	A	Gender-based violence	N	B	A
Community rather than individual change																			
Bandebereho couples' intervention		●		Changing the River's Flow – A Gender Transformative Programme for Young People	●	●	●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●
Breakthrough ACTION - Nigeria	●			Resilience Education and Skills Development for Youth and Families Program		●	●	Adolescent Transition in West Africa			●	Biruh Tesfa for All			●	Adolescent Transition in West Africa			●
Breakthrough Generation Initiative		●		Sista2Sista		●		Breakthrough ACTION - Nigeria	●			Breakthrough Generation Initiative		●		Bandebereho couples' intervention		●	
Growing Up GREAT!		●	●	Skillz Street		●	●	Breakthrough Generation Initiative	●	●	●	Do Kadam Barabari Ki Ore (Two Steps Towards Equality)		●	●	Breakthrough ACTION - Nigeria	●		
Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	The Kenya Adolescent Reproductive Health Project		●	●	Enabling Girls to Advance Gender Equity		●	●	Indashyikirwa (Agents of Change)		●		Breakthrough Generation Initiative	●	●	●
École des Maris	●	●	●	Tsima, a community mobilization HIV prevention program		●	●	Girls Holistic Development Program	●	●	●	Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Change Starts at Home		●	●
Masculinities, Faith and Peace	●	●	●	Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●	Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●		The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●		Changing the River's Flow – A Gender Transformative Programme for Young People		●	
Masculinité, Famille, et Foi	●	●	●	Zambia Community HIV Prevention Project		●	●	Sista2Sista		●		Tipping Point		●		Communities Care: Transforming Lives and Preventing Violence programme	●	●	●
No Name 1		●		No Name 1		●		The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●					Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces		●	
No Name 2, Program by the Centre for Health and Social Justice		●	●					Tipping Point	●	●	●					Do Kadam Barabari Ki Ore (Two Steps Towards Equality)		●	●
RAISE			●													Enabling Girls to Advance Gender Equity		●	●
Reaching Married Adolescents		●														Engaging with Faith Groups to Prevent Violence Against Women and Girls in Conflict-affected Communities		●	●
Resilience Education and Skills Development for Youth and Families Program		●	●													Growing Up GREAT!		●	●
Prevention of HIV/STI among Married Women in Urban India; Research and Intervention in Sexual Health: Theory to Action			●													Indashyikirwa (Agents of Change)		●	●
Sista2Sista		●														Masculinities, Faith and Peace	●	●	●
Tékponon Jikuagou	●	●	●													Masculinité, Famille, et Foi	●	●	
The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●														No Name 2, Program by the Centre for Health and Social Justice		●	●
Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●														Reaching Married Adolescents	●	●	
Zambia Community HIV Prevention Project	●	●														Samvedana Plus	●	●	●

Mechanisms of Change (*continued*)

Sexual and reproductive health (FP)	N	B	A	Sexual and reproductive health (HIV)	N	B	A	Child, early and forced marriage	N	B	A	Women's economic empowerment	N	B	A	Gender-based violence	N	B	A
																Sonke CHANGE Intervention		●	
																The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●
																Tipping Point			●
																Tsima, a community mobilization HIV prevention program		●	●
																Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●
																Promoting Adolescent Engagement, Knowledge and Health	●	●	
Diffuses new ideas																			
Breakthrough ACTION - Nigeria	●			Not specifically named; interventions include parental communication, peer-to-peer programs, and youth facilitator-driven interventions		●		Act With Her-Ethiopia			●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●
Breakthrough Generation Initiative		●		Resilience Education and Skills Development for Youth and Families Program		●	●	Breakthrough Generation Initiative	●	●	●	Biruh Tesfa for All			●	Breakthrough ACTION - Nigeria	●		
Growing Up GREAT!		●	●	Skillz Street		●	●	Enabling Girls to Advance Gender Equity		●	●	Breakthrough ACTION - Nigeria	●			Breakthrough Generation Initiative	●	●	●
Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	The Kenya Adolescent Reproductive Health Project		●	●	Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●		Breakthrough Generation Initiative		●		Change Starts at Home		●	●
École des Maris	●	●	●	Tsima, a community mobilization HIV prevention program		●	●	The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●	Do Kadam Barabari Ki Ore (Two Steps Towards Equality)		●	●	Communities Care: Transforming Lives and Preventing Violence programme	●	●	●
Masculinities, Faith and Peace	●	●	●	Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●	Tipping Point	●	●	●	Indashyikirwa (Agents of Change)		●		Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces		●	
Masculinité, Famille, et Foi	●	●	●	Zambia Community HIV Prevention Project	●	●						Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Do Kadam Barabari Ki Ore (Two Steps Towards Equality)		●	●
Not specifically named; interventions include parental communication, peer-to-peer programs, and youth facilitator-driven interventions		●										The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●		Enabling Girls to Advance Gender Equity		●	●
No name 2, Program by the Centre for Health and Social Justice		●	●									Tipping Point		●		Engaging with Faith Groups to Prevent Violence Against Women and Girls in Conflict-affected Communities		●	●
RAISE			●													Growing Up GREAT!		●	●
Reaching Married Adolescents		●														Indashyikirwa (Agents of Change)		●	●
Resilience Education and Skills Development for Youth and Families Program		●	●													Masculinities, Faith and Peace	●	●	●
Prevention of HIV/STI among Married Women in Urban India; Research and Intervention in Sexual Health: Theory to Action			●													Masculinité, Famille, et Foi	●	●	

Mechanisms of Change (*continued*)

Sexual and reproductive health (FP)				Sexual and reproductive health (HIV)				Child, early and forced marriage				Women's economic empowerment				Gender-based violence			
	N	B	A		N	B	A		N	B	A		N	B	A		N	B	A
Tékponon Jikuagou	●	●	●													No Name 2, Program by the Centre for Health and Social Justice		●	●
The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●														Reaching Married Adolescents	●	●	
Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●														Samvedana Plus	●	●	●
Zambia Community HIV Prevention Project	●	●														Sonke CHANGE Intervention		●	
																The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●
																Tipping Point			●
																Tsima, a community mobilization HIV prevention program		●	●
																Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●
																Promoting Adolescent Engagement, Knowledge and Health	●	●	
Norms visible and catalyzes reflection																			
Bandebereho couples' intervention		●		Resilience Education and Skills Development for Youth and Families Program		●	●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●
Breakthrough ACTION - Nigeria	●			Sista2Sista		●		Breakthrough ACTION - Nigeria	●			Biruh Tesfa for All			●	Bandebereho couples' intervention		●	
Breakthrough Generation Initiative	●	●	●	The Kenya Adolescent Reproductive Health Project		●	●	Breakthrough Generation Initiative	●	●	●	Do Kadam Barabari Ki Ore (Two Steps Towards Equality)		●	●	Breakthrough ACTION - Nigeria	●		
Growing Up GREAT!		●	●	Tsima, a community mobilization HIV prevention program		●	●	Enabling Girls to Advance Gender Equity		●	●	Indashyikirwa (Agents of Change)		●		Breakthrough Generation Initiative	●	●	●
Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●	Girls Holistic Development Program	●	●	●	Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Change Starts at Home		●	●
École des Maris	●	●	●	Zambia Community HIV Prevention Project	●	●		Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●		The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●		Communities Care: Transforming Lives and Preventing Violence programme	●	●	●
Masculinities, Faith and Peace	●	●	●					Sista2Sista		●		Tipping Point		●		Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces		●	
Masculinité, Famille, et Foi	●	●	●					The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●					Do Kadam Barabari Ki Ore (Two Steps Towards Equality)		●	●
RAISE			●					Tipping Point	●	●	●					Enabling Girls to Advance Gender Equity		●	●
Reaching Married Adolescents		●														Engaging with Faith Groups to Prevent Violence Against Women and Girls in Conflict-affected Communities		●	●
Resilience Education and Skills Development for Youth and Families Program		●	●													Growing Up GREAT!		●	●
Sista2Sista		●														Indashyikirwa (Agents of Change)		●	●

Mechanisms of Change (*continued*)

Sexual and reproductive health (FP)				Sexual and reproductive health (HIV)				Child, early and forced marriage				Women's economic empowerment				Gender-based violence			
	N	B	A		N	B	A		N	B	A		N	B	A		N	B	A
Tékponon Jikuagou	●	●	●													Masculinities, Faith and Peace	●	●	●
The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●														Masculinité, Famille, et Foi	●	●	
Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●														Men with Conscience Intervention (adapted One Man Can Intervention)			●
Zambia Community HIV Prevention Project	●	●														Modified Empowerment and Self-Defense Training		●	
																Reaching Married Adolescents	●	●	
																Samvedana Plus	●	●	●
																Sonke CHANGE Intervention		●	
																The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●
																Tipping Point			●
																Tsima, a community mobilization HIV prevention program		●	●
																Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●
																Promoting Adolescent Engagement, Knowledge and Health	●	●	
Roots norms shifting in the community																			
Bandebereho couples' intervention		●		Changing the River's Flow – A Gender Transformative Programme for Young People	●	●	●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●
Breakthrough ACTION - Nigeria	●			Not specifically named; interventions include parental communication, peer-to-peer programs, and youth facilitator-driven interventions		●		Breakthrough ACTION - Nigeria	●			Biruh Tesfa for All			●	Bandebereho couples' intervention		●	
Breakthrough Generation Initiative		●		Resilience Education and Skills Development for Youth and Families Program		●	●	Breakthrough Generation Initiative	●	●	●	Breakthrough Generation Initiative		●		Breakthrough ACTION - Nigeria	●		
Growing Up GREAT!		●	●	Sista2Sista		●		Enabling Girls to Advance Gender Equity		●	●	Do Kadam Barabari Ki Ore (Two Steps Towards Equality)		●	●	Breakthrough Generation Initiative	●	●	●
Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Skillz Street		●	●	Girls Holistic Development Program	●	●	●	Indashyikirwa (Agents of Change)		●		Change Starts at Home		●	●
École des Maris	●	●	●	The Kenya Adolescent Reproductive Health Project		●	●	Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●		Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Changing the River's Flow – A Gender Transformative Programme for Young People		●	
Masculinities, Faith and Peace	●	●	●	Tsima, a community mobilization HIV prevention program		●	●	Sista2Sista		●		The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●		Communities Care: Transforming Lives and Preventing Violence programme	●	●	●
Masculinité, Famille, et Foi	●	●	●	Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●	The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●	Tipping Point		●		Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces		●	

Mechanisms of Change (*continued*)

Sexual and reproductive health (FP)	N	B	A	Sexual and reproductive health (HIV)	N	B	A	Child, early and forced marriage	N	B	A	Women's economic empowerment	N	B	A	Gender-based violence	N	B	A
Not specifically named; interventions include parental communication, peer-to-peer programs, and youth facilitator-driven interventions		●		Zambia Community HIV Prevention Project Adolescent Transition in West Africa (USAID Z-CHPP)	●	●		Tipping Point	●	●	●					Do Kadam Barabari Ki Ore (Two Steps Towards Equality)		●	●
No Name 2, Program by the Centre for Health and Social Justice		●	●													Enabling Girls to Advance Gender Equity		●	●
RAISE			●													Engaging with Faith Groups to Prevent Violence Against Women and Girls in Conflict-affected Communities		●	●
Reaching Married Adolescents		●														Growing Up GREAT!		●	●
Resilience Education and Skills Development for Youth and Families Program		●	●													Indashyikirwa (Agents of Change)		●	●
Prevention of HIV/STI among Married Women in Urban India; Research and Intervention in Sexual Health: Theory to Action			●													Masculinities, Faith and Peace	●	●	●
Sista2Sista		●														Masculinité, Famille, et Foi	●	●	
Tékponon Jikuagou	●	●	●													Modified Empowerment and Self-Defense Training		●	
The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●														No Name 2, Program by the Centre for Health and Social Justice		●	●
Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●														Reaching Married Adolescents	●	●	
Zambia Community HIV Prevention Project Adolescent Transition in West Africa (USAID Z-CHPP)	●	●														Samvedana Plus	●	●	●
																Sonke CHANGE Intervention		●	
																The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●
																Tipping Point			●
																Tsima, a community mobilization HIV prevention program		●	●
																Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●
																Promoting Adolescent Engagement, Knowledge and Health	●	●	
Roots norms shifting in the community																			
Breakthrough Generation Initiative		●		Changing the River's Flow – A Gender Transformative Programme for Young People	●	●	●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●
Growing Up GREAT!		●	●	Not specifically named; interventions include parental communication, peer-to-peer programs, and youth facilitator-driven interventions		●		Adolescent Transition in West Africa			●	Breakthrough Generation Initiative		●		Adolescent Transition in West Africa			●

Mechanisms of Change (*continued*)

Sexual and reproductive health (FP)	N	B	A	Sexual and reproductive health (HIV)	N	B	A	Child, early and forced marriage	N	B	A	Women's economic empowerment	N	B	A	Gender-based violence	N	B	A
Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Sista2Sista		●		Breakthrough Generation Initiative	●	●	●	Indashyikirwa (Agents of Change)		●		Breakthrough Generation Initiative	●	●	●
École des Maris	●	●	●	The Kenya Adolescent Reproductive Health Project		●	●	Girls Holistic Development Program	●	●	●	Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Change Starts at Home		●	●
Masculinities, Faith and Peace	●	●	●	Tsima, a community mobilization HIV prevention program		●	●	Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●		The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●		Changing the River's Flow – A Gender Transformative Programme for Young People		●	
Masculinité, Famille, et Foi	●	●	●	Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●	Sista2Sista		●		Tipping Point		●		Communities Care: Transforming Lives and Preventing Violence programme	●	●	●
Not specifically named; interventions include parental communication, peer-to-peer programs, and youth facilitator-driven interventions		●		Zambia Community HIV Prevention Project	●	●		The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●					Engaging with Faith Groups to Prevent Violence Against Women and Girls in Conflict-affected Communities		●	●
RAISE			●					Tipping Point	●	●	●					Growing Up GREAT!		●	●
Prevention of HIV/STI among Married Women in Urban India; Research and Intervention in Sexual Health: Theory to Action			●													Indashyikirwa (Agents of Change)		●	●
Sista2Sista		●														Masculinities, Faith and Peace	●	●	●
Tékponon Jikuagou	●	●	●													Masculinité, Famille, et Foi	●	●	
The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●														Modified Empowerment and Self-Defense Training		●	
Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●														Samvedana Plus	●	●	●
Youth-friendly services (YFS)	●	●	●													Sonke CHANGE Intervention		●	
Zambia Community HIV Prevention Project	●	●														The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●
																Tipping Point			●
																Tsima, a community mobilization HIV prevention program		●	●
																Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●
																Promoting Adolescent Engagement, Knowledge and Health	●	●	

Duration

Key: Positive Negative Neutral Unclear

N = Norms B = Behavior A = Attitudes

Sexual and reproductive health (FP)	N	B	A	Sexual and reproductive health (HIV)	N	B	A	Child and early forced marriage	N	B	A	Women's economic empowerment	N	B	A	Gender-based violence	N	B	A
Short duration (< 1 year)																			
Bandebereho		●						Act with Her-Ethiopia			●	Act with Her-Ethiopia			●	Act with Her-Ethiopia			●
												Indashyikirwa		●		Bandebereho		●	
																Change Starts at Home Trial		●	●
																Indashyikirwa		●	●
																Modified Empowerment and Self-Defense Training		●	
Long duration (> 1 year)																			
Adolescent Transition in West Africa	●		●	Changing the River's Flow - A Gender Transformative Programme for Young People	●	●	●	Adolescent Transition in West Africa			●	Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●		Adolescent Transition in West Africa			●
Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●		The Kenya Adolescent Reproductive Health Project		●	●	Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●	●	Breakthrough Generation Initiative		●		Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●	●
Breakthrough Generation Initiative		●		Resilience Education and Skills Development for Youth and Families		●	●	Breakthrough Generation Initiative	●	●	●	Biruh Tesfa for All			●	Breakthrough Generation Initiative	●	●	●
Growing Up GREAT!		●	●	Sista2Sista		●		Enabling Girls to Advance Gender Equity		●	●	Do Kadam Barabari Ki Ore		●	●	Changing the River's Flow - A Gender Transformative Programme for Young People		●	
Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Skillz Street		●	●	Girls Holistic Development	●	●	●	Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces		●	
Masculinities, Famille, et Foi	●	●	●	Zambia Community HIV Prevention Project	●	●		Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●		The Tipping Point Initiative		●		Do Kadam Barabari Ki Ore		●	●
Masculinities, Faith, and Peace	●	●	●					Sista2Sista		●						Enabling Girls to Advance Gender Equity		●	●
Resilience Education and Skills Development for Youth and Families		●	●					The Tipping Point Initiative	●	●	●					Engaging with Faith Groups to Prevent VAWG		●	●
Research and Intervention in Sexual Health:Theory to Action			●													Growing Up GREAT!		●	●
Reaching Married Adolescents		●														Masculinities, Famille, et Foi	●	●	
Sista2Sista		●														Masculinities, Faith, and Peace	●	●	●
Tékponon Jikuagou	●	●	●													Reaching Married Adolescents	●	●	
Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●														Samvedana Plus	●	●	●
Zambia Community HIV Prevention Project	●	●														Sonke CHANGE Intervention		●	
																The Tipping Point Initiative			●
																Tsima		●	●
Not specified																			
Breakthrough ACTION – Nigeria	●		●					Breakthrough ACTION – Nigeria	●							Breakthrough ACTION – Nigeria	●		
l'École des Maris	●	●	●													Communities Care	●	●	●
Program by the Centre for Health and Social Justice		●	●													Men with Conscience & One Man Can Intervention			●
Reproductive Health Access, Information and Services in Emergencies			●													Promoting Adolescent Engagement, Knowledge and Health	●	●	
																Program by the Centre for Health and Social Justice		●	●

Note – One intervention lacked sufficient detail regarding the intervention modalities used.

Implementation Strategy

Key: Positive Negative Neutral Unclear

N = Norms B = Behavior A = Attitudes

Sexual and reproductive health (FP)	N	B	A	Sexual and reproductive health (HIV)	N	B	A	Child and early forced marriage	N	B	A	Women's economic empowerment	N	B	A	Gender-based violence	N	B	A
Diffusion																			
Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●		The Kenya Adolescent Reproductive Health Project		●	●	Act with Her-Ethiopia			●	Act with Her-Ethiopia			●	Act with Her-Ethiopia			●
Bandebereho		●		Skillz Street		●	●	Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●	●	Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●		Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●	●
Breakthrough Generation Initiative		●		Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●	Breakthrough Generation Initiative	●	●	●	Breakthrough Generation Initiative		●		Bandebereho		●	
Breakthrough ACTION – Nigeria	●		●					Breakthrough ACTION – Nigeria	●			Do Kadam Barabari Ki Ore		●	●	Breakthrough Generation Initiative	●	●	●
l'École des Maris	●	●	●									Indashyikirwa		●		Breakthrough ACTION – Nigeria	●		
Masculinities, Faith, and Peace	●	●	●													Change Starts at Home Trial		●	●
Masculinities, Famille, et Foi	●	●	●													Communities Care	●	●	●
Reproductive Health Access, Information and Services in Emergencies			●													Do Kadam Barabari Ki Ore		●	●
Research and Intervention in Sexual Health:Theory to Action			●													Engaging with Faith Groups to Prevent VAWG		●	●
Tékponon Jikuagou	●	●	●													Indashyikira		●	●
Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●														Masculinities, Famille, et Foi	●	●	
																Masculinities, Faith, and Peace	●	●	●
																Promoting Adolescent Engagement, Knowledge and Health	●	●	
																Tsima		●	●
																Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●
Group Discussion/Safe Spaces																			
Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●		Changing the River's Flow - A Gender Transformative Programme for Young People	●	●	●	Act with Her-Ethiopia			●	Act with Her-Ethiopia			●	Act with Her-Ethiopia			●
Bandebereho		●		The Kenya Adolescent Reproductive Health Project		●	●	Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●	●	Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●		Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●	●
Breakthrough Generation Initiative		●		Resilience Education and Skills Development for Youth and Families		●	●	Breakthrough Generation Initiative	●	●	●	Breakthrough Generation Initiative		●		Bandebereho		●	
Breakthrough ACTION – Nigeria	●		●	Sista2Sista		●		Breakthrough ACTION – Nigeria	●			Biruh Tesfa for All			●	Breakthrough Generation Initiative	●	●	●
Growing Up GREAT!		●	●	Skillz Street		●	●	Enabling Girls to Advance Gender Equity		●	●	Do Kadam Barabari Ki Ore		●	●	Breakthrough ACTION – Nigeria	●		
Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●	Girls Holistic Development	●	●	●	Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Change Starts at Home Trial		●	●

Implementation Strategy (*continued*)

Key: Positive Negative Neutral Unclear

N = Norms B = Behavior A = Attitudes

l'École des Maris	●	●	●	Zambia Community HIV Prevention Project	●	●		Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●		Indashyikirw		●		Changing the River's Flow - A Gender Transformative Programme for Young People		●	
Masculinities, Faith, and Peace	●	●	●					Sista2Sista		●		The Tipping Point Initiative		●		Communities Care	●	●	●
Masculinities, Famille, et Foi	●		●					The Tipping Point Initiative	●	●	●					Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces		●	
Program by the Centre for Health and Social Justice		●	●													Do Kadam Barabari Ki Ore		●	●
Reaching Married Adolescents		●														Enabling Girls to Advance Gender Equity		●	●
Resilience Education and Skills Development for Youth and Families		●	●													Engaging with Faith Groups to Prevent VAWG		●	●
Sista2Sista		●														Growing Up GREAT!		●	●
Tékponon Jikuagou	●	●	●													Indashyikirwa		●	●
Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●														Men with Conscience & One Man Can Intervention			●
Zambia Community HIV Prevention Project	●	●														Masculinities, Famille, et Foi	●	●	
																Masculinities, Faith, and Peace	●	●	●
																Modified Empowerment and Self-Defense Training		●	
																Promoting Adolescent Engagement, Knowledge and Health	●	●	
																Program by the Centre for Health and Social Justice		●	●
																Reaching Married Adolescents	●	●	
																Samvedana Plus	●	●	●
																Sonke CHANGE Intervention		●	
																The Tipping Point Initiative			●
																Tsima		●	●
																Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●
Training workshops																			
Adolescent Transition in West Africa	●		●	Changing the River's Flow - A Gender Transformative Programme for Young People	●	●	●	Adolescent Transition in West Africa			●	Act with Her-Ethiopia			●	Adolescent Transition in West Africa			●
Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●		The Kenya Adolescent Reproductive Health Project		●	●	Act with Her-Ethiopia			●	Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●		Act with Her-Ethiopia			●
Bandebereho		●		Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●	Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●	●	Breakthrough Generation Initiative		●		Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●	●
Breakthrough Generation Initiative		●						Breakthrough Generation Initiative	●	●	●	Biruh Tesfa for All			●	Bandebereho		●	

Implementation Strategy (*continued*)

Key: Positive Negative Neutral Unclear

N = Norms B = Behavior A = Attitudes

Growing Up GREAT!		●	●					Enabling Girls to Advance Gender Equity		●	●	Do Kadam Barabari Ki Ore		●	●	Breakthrough Generation Initiative	●	●	●
Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●					Girls Holistic Development	●	●	●	Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●		●	Communities Care	●	●	●
Masculinities, Famille, et Foi	●	●	●					Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●		Indashyikirwa		●		Changing the River's Flow - A Gender Transformative Programme for Young People		●	
Masculinities, Faith, and Peace	●	●	●					The Tipping Point Initiative	●	●	●	The Tipping Point Initiative		●		Do Kadam Barabari Ki Ore		●	●
Program by the Centre for Health and Social Justice		●	●													Enabling Girls to Advance Gender Equity		●	●
Research and Intervention in Sexual Health:Theory to Action			●													Engaging with Faith Groups to Prevent VAWG		●	●
Reaching Married Adolescents		●														Growing Up GREAT!		●	●
Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●														Indashyikirwa		●	●
																Masculinities, Famille, et Foi	●	●	
																Masculinities, Faith, and Peace	●	●	●
																Modified Empowerment and Self-Defense Training		●	
																Program by the Centre for Health and Social Justice		●	●
																Reaching Married Adolescents	●	●	
																Samvedana Plus	●	●	●
																Sonke CHANGE Intervention		●	
																The Tipping Point Initiative			●
																Tsima		●	●
																Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●
Media (mass, digital, near, or social)																			
Breakthrough Generation Initiative		●		Zambia Community HIV Prevention Project	●	●		Breakthrough Generation Initiative	●	●	●	Breakthrough Generation Initiative		●		Breakthrough Generation Initiative	●	●	●
Breakthrough ACTION – Nigeria	●		●					Breakthrough ACTION – Nigeria	●							Breakthrough ACTION – Nigeria	●		
Research and Intervention in Sexual Health:Theory to Action			●					Enabling Girls to Advance Gender Equity		●	●					Change Starts at Home Trial		●	●
Tékponon Jikuagou	●	●	●													Communities Care	●	●	●
Zambia Community HIV Prevention Project	●	●														Enabling Girls to Advance Gender Equity		●	●

**Not mutually exclusive categories*

Faith and Cultural Engagement

Key: Positive Negative Neutral Unclear

N = Norms B = Behavior A = Attitudes

Sexual and reproductive health (FP)	N	B	A	Sexual and reproductive health (HIV)	N	B	A	Child and early forced marriage	N	B	A	Women's economic empowerment	N	B	A	Gender-based violence	N	B	A
Faith/Religious Champions																			
Masculinities, Famille, et Foi	●	●	●	Resilience Education and Skills Development for Youth and Families		●	●									Masculinities, Famille, et Foi	●	●	
Masculinities, Faith, and Peace	●	●	●													Masculinities, Faith, and Peace	●	●	●
Resilience Education and Skills Development for Youth and Families		●	●																
Research and Intervention in Sexual Health:Theory to Action			●																
Cultural Champions																			
Adolescent Transition in West Africa	●		●	Sista2Sista		●		Adolescent Transition in West Africa			●	Act with Her-Ethiopia			●	Adolescent Transition in West Africa			●
Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●		Skillz Street		●	●	Adolescent Transition in West Africa			●	Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●		Act with Her-Ethiopia			●
Bandebereho		●		Zambia Community HIV Prevention Project	●	●		Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●	●	Biruh Tesfa for All			●	Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents		●	●
Breakthrough Generation Initiative		●						Breakthrough Generation Initiative	●	●	●	Breakthrough Generation Initiative		●		Bandebereho		●	
Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●					Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●		Do Kadam Barabari Ki Ore		●	●	Breakthrough Generation Initiative	●	●	●
Program by the Centre for Health and Social Justice		●	●					Sista2Sista		●		Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Change Starts at Home Trial		●	●
Sista2Sista		●										Indashyikirwa		●		Communities Care	●	●	●
Tékponon Jikuagou	●	●	●													Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces		●	
Zambia Community HIV Prevention Project	●	●														Do Kadam Barabari Ki Ore		●	●
																Indashyikirwa		●	●
																Men with Conscience & One Man Can Intervention			●
																Modified Empowerment and Self-Defense Training		●	
																Promoting Adolescent Engagement, Knowledge and Health	●	●	
																Program by the Centre for Health and Social Justice		●	●
																Samvedana Plus	●	●	●
																Sonke CHANGE Intervention		●	
Both Cultural and Faith Champions																			
Breakthrough ACTION – Nigeria	●		●	Changing the River's Flow - A Gender Transformative Programme for Young People	●	●	●	Breakthrough ACTION – Nigeria	●			The Tipping Point Initiative		●		Breakthrough ACTION – Nigeria	●		
Growing Up GREAT!		●	●	The Kenya Adolescent Reproductive Health Project		●	●	Enabling Girls to Advance Gender Equity		●	●					Changing the River's Flow – A Gender Transformative Programme for Young People		●	
l'École des Maris	●	●	●	Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●	Girls Holistic Development	●	●	●					Enabling Girls to Advance Gender Equity		●	●
Reproductive Health Access, Information and Services in Emergencies			●					The Tipping Point Initiative	●	●	●					Engaging with Faith Groups to Prevent VAWG		●	●
Reaching Married Adolescents		●														Growing Up GREAT!		●	●
Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●														Reaching Married Adolescents	●	●	
																The Tipping Point Initiative			●
																Tsima		●	●
																Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●

Reference Groups

Key: Positive Negative Neutral Unclear

N = Norms B = Behavior A = Attitudes

Sexual and reproductive health (FP)				Sexual and reproductive health (HIV)				Child, early and forced marriage				Women's economic empowerment				Gender-based violence			
	N	B	A		N	B	A		N	B	A		N	B	A		N	B	A
Civic and Institutional Authorities																			
Breakthrough Generation Initiative		●		Tsima, a community mobilization HIV prevention program		●	●	Breakthrough Generation Initiative	●	●	●	Breakthrough Generation Initiative		●		Breakthrough Generation Initiative	●	●	●
Masculinité, Famille, et Foi	●	●	●					Enabling Girls to Advance Gender Equity		●	●	Do Kadam Barabari Ki Ore (Two Steps Towards Equality)		●	●	Change Starts at Home		●	●
Prevention of HIV/STI among Married Women in Urban India; Research and Intervention in Sexual Health: Theory to Action			●					The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●	The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●		Do Kadam Barabari Ki Ore (Two Steps Towards Equality)		●	●
The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●						Tipping Point	●	●	●	Tipping Point		●		Enabling Girls to Advance Gender Equity		●	●
																Masculinité, Famille, et Foi		●	●
																The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●
																Tipping Point			●
																Tsima, a community mobilization HIV prevention program		●	●
Community Leaders																			
Adolescent Transition in West Africa	●	●		Changing the River's Flow – A Gender Transformative Programme for Young People	●	●	●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●
Breakthrough ACTION - Nigeria	●			Not specifically named; interventions include parental communication, peer-to-peer programs, and youth facilitator-driven interventions		●		Adolescent Transition in West Africa			●	Breakthrough Generation Initiative		●		Adolescent Transition in West Africa			●
Breakthrough Generation Initiative		●		Zambia Community HIV Prevention Project	●	●		Breakthrough ACTION - Nigeria	●			Indashyikirwa (Agents of Change)		●		Breakthrough ACTION - Nigeria	●		
Growing Up GREAT!		●	●					Breakthrough Generation Initiative	●	●	●	The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●		Breakthrough Generation Initiative	●	●	●
Masculinité, Famille, et Foi	●	●	●					Enabling Girls to Advance Gender Equity		●	●	Tipping Point		●		Change Starts at Home		●	●
Not specifically named; interventions include parental communication, peer-to-peer programs, and youth facilitator-driven interventions		●						Girls Holistic Development Program	●	●	●					Changing the River's Flow – A Gender Transformative Programme for Young People		●	
No name 2, Program by the Centre for Health and Social Justice		●	●					The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●					Communities Care: Transforming Lives and Preventing Violence programme	●	●	●
RAISE			●					Tipping Point	●	●	●					Enabling Girls to Advance Gender Equity		●	●

Reference Groups (*continued*)

Sexual and reproductive health (FP)				Sexual and reproductive health (HIV)				Child, early and forced marriage				Women's economic empowerment				Gender-based violence			
	N	B	A		N	B	A		N	B	A		N	B	A		N	B	A
Tékponon Jikuagou	●	●	●													Engaging with Faith Groups to Prevent Violence Against Women and Girls in Conflict-affected Communities			●
The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●														Growing Up GREAT!		●	●
Youth-friendly services (YFS)	●	●	●													Indashyikirwa (Agents of Change)		●	●
Zambia Community HIV Prevention Project	●	●														Masculinité, Famille, et Foi	●	●	
																No name 2, Program by the Centre for Health and Social Justice		●	●
																The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●
																Tipping Point			●
																Promoting Adolescent Engagement, Knowledge and Health	●	●	
Community Members																			
Breakthrough Generation Initiative		●		Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●
Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●					Breakthrough Generation Initiative	●	●	●	Biruh Tesfa for All			●	Breakthrough Generation Initiative	●	●	●
Masculinities, Faith and Peace	●	●	●					Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●		Breakthrough Generation Initiative		●		Change Starts at Home		●	●
Masculinité, Famille, et Foi	●	●	●					The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●	Indashyikirwa (Agents of Change)		●		Indashyikirwa (Agents of Change)		●	●
Reaching Married Adolescents		●										Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Masculinities, Faith and Peace	●	●	●
The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●										The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●		Masculinité, Famille, et Foi	●	●	
Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●														Reaching Married Adolescents	●	●	
																The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●
																Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●

Reference Groups (continued)

Sexual and reproductive health (FP)	N	B	A	Sexual and reproductive health (HIV)	N	B	A	Child, early and forced marriage	N	B	A	Women's economic empowerment	N	B	A	Gender-based violence	N	B	A
Family (Including Parents)																			
Growing Up GREAT!		●	●	Not specifically named; interventions include parental communication, peer-to-peer programs, and youth facilitator-driven interventions		●		Act With Her-Ethiopia			●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●
Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Sista2Sista		●		Enabling Girls to Advance Gender Equity		●	●	Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces		●	
Masculinité, Famille, et Foi	●	●	●	The Kenya Adolescent Reproductive Health Project		●	●	Girls Holistic Development Program	●	●	●	The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●		Enabling Girls to Advance Gender Equity		●	●
Not specifically named; interventions include parental communication, peer-to-peer programs, and youth facilitator-driven interventions		●						Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●		Tipping Point		●		Growing Up GREAT!		●	●
Sista2Sista		●						Sista2Sista		●						Masculinité, Famille, et Foi	●	●	
The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●						The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●					Men with Conscience Intervention (adapted One Man Can Intervention)			●
Youth-friendly services (YFS)	●	●	●					Tipping Point	●	●	●					The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●
																Tipping Point			●
																Promoting Adolescent Engagement, Knowledge and Health	●	●	
Health Workers																			
Breakthrough Generation Initiative		●						Breakthrough Generation Initiative	●	●	●	Breakthrough Generation Initiative		●		Breakthrough Generation Initiative	●	●	●
Growing Up GREAT!		●	●					Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●		Do Kadam Barabari Ki Ore (Two Steps Towards Equality)		●	●	Communities Care: Transforming Lives and Preventing Violence programme	●	●	●
Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●					The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●	Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Do Kadam Barabari Ki Ore (Two Steps Towards Equality)		●	●
The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●										The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●		Growing Up GREAT!		●	●
Youth-friendly services (YFS)	●	●	●													The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●

Reference Groups (*continued*)

Sexual and reproductive health (FP)	N	B	A	Sexual and reproductive health (HIV)	N	B	A	Child, early and forced marriage	N	B	A	Women's economic empowerment	N	B	A	Gender-based violence	N	B	A
Partners																			
Bandebereho couples' intervention		●						Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●		Indashyikirwa (Agents of Change)		●		Bandebereho couples' intervention		●	
Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●									Inspiring Married Adolescent Girls to Imagine New Empowered Futures	●	●	●	Change Starts at Home		●	●
École des Maris	●	●	●													Indashyikirwa (Agents of Change)		●	●
Masculinities, Faith and Peace	●	●	●													Masculinities, Faith and Peace	●	●	●
Masculinité, Famille, et Foi	●	●	●													Masculinité, Famille, et Foi	●	●	
Reaching Married Adolescents		●														Reaching Married Adolescents	●	●	
																Sonke CHANGE Intervention		●	
Peers																			
Adolescent Transition in West Africa	●	●		Not specifically named; interventions include parental communication, peer-to-peer programs, and youth facilitator-driven interventions		●		Act With Her-Ethiopia			●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●
Masculinité, Famille, et Foi	●	●	●	Sista2Sista		●		Adolescent Transition in West Africa			●	Do Kadam Barabari Ki Ore (Two Steps Towards Equality)		●	●	Adolescent Transition in West Africa			●
Not specifically named; interventions include parental communication, peer-to-peer programs, and youth facilitator-driven interventions		●		Skillz Street		●	●	Sista2Sista		●		The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●		Do Kadam Barabari Ki Ore (Two Steps Towards Equality)		●	●
No name 2, Program by the Centre for Health and Social Justice		●	●	The Kenya Adolescent Reproductive Health Project		●	●	The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●	Tipping Point		●		Masculinité, Famille, et Foi	●	●	
Sista2Sista		●		Tsima, a community mobilization HIV prevention program		●	●	Tipping Point	●	●	●					Modified Empowerment and Self-Defense Training		●	
The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●		Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●									No name 2, Program by the Centre for Health and Social Justice		●	●
Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●		Zambia Community HIV Prevention Project	●	●										The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●
Zambia Community HIV Prevention Project	●	●														Tipping Point			●
																Tsima, a community mobilization HIV prevention program		●	●
																Urban Program on Livelihoods and Income Fortification and Socio-civic Transformation		●	●

Reference Groups (*continued*)

Sexual and reproductive health (FP)	N	B	A	Sexual and reproductive health (HIV)	N	B	A	Child, early and forced marriage	N	B	A	Women's economic empowerment	N	B	A	Gender-based violence	N	B	A
Religious Leaders																			
Adolescent Transition in West Africa	●	●		Resilience Education and Skills Development for Youth and Families Program		●	●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●	Act With Her-Ethiopia			●
Breakthrough ACTION - Nigeria	●			Tsima, a community mobilization HIV prevention program		●	●	Adolescent Transition in West Africa			●	Breakthrough Generation Initiative		●		Adolescent Transition in West Africa			●
Breakthrough Generation Initiative		●						Breakthrough ACTION - Nigeria	●			Tipping Point		●		Breakthrough ACTION - Nigeria	●		
Masculinities, Faith and Peace	●	●	●					Breakthrough Generation Initiative	●	●	●					Breakthrough Generation Initiative	●	●	●
Masculinité, Famille, et Foi	●	●	●					Enabling Girls to Advance Gender Equity		●	●					Change Starts at Home		●	●
Reaching Married Adolescents		●						Girls Holistic Development Program	●	●	●					Enabling Girls to Advance Gender Equity		●	●
Resilience Education and Skills Development for Youth and Families Program		●	●					Tipping Point	●	●	●					Engaging with Faith Groups to Prevent Violence Against Women and Girls in Conflict-affected Communities		●	●
Prevention of HIV/STI among Married Women in Urban India; Research and Intervention in Sexual Health: Theory to Action			●													Masculinities, Faith and Peace	●	●	●
Youth-friendly services (YFS)	●	●	●													Masculinité, Famille, et Foi	●	●	
																Reaching Married Adolescents	●	●	
																Samvedana Plus	●	●	●
																Tipping Point			●
																Tsima, a community mobilization HIV prevention program		●	●
Teachers																			
Adolescent Transition in West Africa	●		●	Skillz Street		●	●	Adolescent Transition in West Africa			●	Breakthrough Generation Initiative		●		Adolescent Transition in West Africa			●
Breakthrough Generation Initiative		●		The Kenya Adolescent Reproductive Health Project		●	●	Breakthrough Generation Initiative	●	●	●	The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●		Breakthrough Generation Initiative	●	●	●
Growing Up GREAT!		●	●					Girls Holistic Development Program	●	●	●					Change Starts at Home		●	●
The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●						The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●					Communities Care: Transforming Lives and Preventing Violence programme	●	●	●
Youth-friendly services (YFS)	●	●	●													Engaging with Faith Groups to Prevent Violence Against Women and Girls in Conflict-affected Communities		●	●
																Growing Up GREAT!		●	●
																The Bangladeshi Association for Life Skills, Income, and Knowledge for Adolescents Project		●	●