Designing a gender-transformative intervention to involve men and boys in the prevention of intimate partner violence against women and girls in rural Uganda

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BACKGROUND
Efforts are greatly needed to effectively engage men and boys in the prevention of intimate partner violence (IPV), the most common form of violence against women and girls (VAWG) worldwide.1-7 This study seeks to design an evidence-based intervention framework for successfully engaging Ugandan boys and men in SHARE (Strengthened participation of Rural Ugandan boys and men in SHARE) that addresses VAWG and aims to reduce men’s perpetration of violence and lead to sustained transformation of social norms surrounding gender and masculinity. The setting for the project is Rakai District, Uganda, Researchers from Rakai Health Sciences Program (RHSP) a 25-year HIV and reproductive health research and service organization, have conducted extensive intervention research, including qualitative research, over the past 15 years to understand the epidemiology of male-perpetrated IPV against Ugandan women and develop effective prevention interventions. RHSP designed and implemented a primary IPV prevention intervention called the Safe Homes And Respect for Every woman and girl (SHARE) Project. Between 2005 and 2009, SHARE was nested into RHSP’s existing HIV research and service provision infrastructure, to combine efforts to reduce IPV and HIV infection. SHARE involved community mobilization and clinic-based screening and brief intervention, and was evaluated through a cluster randomized trial nested in the Rakai Community Cohort Study (RCCS). Findings from the trial suggested exposure to SHARE was associated with significant decreases in physical and sexual IPV (including sex forced against will) and use of harm violence against the general population.8 While these findings, greatly advance knowledge on the impact of IPV and HIV prevention an outstanding limitation is that SHARE had no impact on men’s self-reporting of perpetrating IPV or female forced sex. Therefore, the current project aims to address this gap by conducting mixed-methods research to understand men and boys’ attitudes about IPV and gender norms; assess barriers and facilitators to their participation in activities aimed at reducing violence and promoting gender equality, and design a culturally appropriate, gender-transformative intervention to involve men and boys in the prevention of IPV against women and girls.

PROJECT AIM
To develop an integrated, evidence-based framework for working with men and boys to prevent IPV against women and girls in Rakai.

PROJECT OBJECTIVES
• Analyze two modules of existing data on men’s participation in SHARE (module 1) and attitudes about gender and masculinity (module 2) and use findings to inform development of qualitative guidelines for formative intervention design development.

• Qualitatively assess perceived individual, relationship/family, social barriers to men’s/boys’ participation in IPV prevention focused on masculinity norms.

• Quantitatively examine men’s/boys’ violence and social norms surrounding gender and masculinity.

• Develop a tailored, integrated framework for a gender-transformative intervention to involve men and boys in the prevention of IPV against women and girls.

PROJECT METHODS
A sequential, 3-step, mixed methods approach will be used. First, we will conduct a secondary analysis of RCCS survey data on men’s IPV perpetration and self-reporting (modules 1 and 2), to characterize men’s exposure to, participation in and attitudes about gender and masculinity. The setting for the project is rural Rakai, Uganda, where SHARE had no impact on men’s self-report perpetration. Data collected in 2008-2009 from men (15-49 years) living in the 4 SHARE clusters (n=600). Male RCCS participants who had not completed the SHARE cluster cohort assessment survey (module 1) will be invited to complete a survey (module 2); Men’s exposure to, participation in and attitudes about SHARE (module 1) and attitudes about gender norms (module 2) and use findings to inform development of qualitative guidelines for formative intervention design development.

Second, we will conduct 40 IDIs and 15 FGDs with male community members and local leaders, men’s health providers, SHARE staff and RHSP Community Advisory Board members. Qualitative interviews and focus groups will aim to: (1) Identify barriers to engaging men in IPV prevention activities; and (2) Explore underlying factors of men’s perpetration of violence. Social constructions of masculinity and male gender norms as types of men’s controlling behaviors and their association with violence; perceptions about women’s rights and gender roles; and barriers and facilitators to engaging men and boys in prevention of IPV will be the focus of these interviews and focus groups. Coding and inter-rater reliability assessed. Coded text will be analyzed through identification of recurrent themes. Matrices will be created to compare codes by type of IPV acts, men’s self-report and SHARE participation. Findings will inform the development of in-depth interview (IDI) and focus group discussion (FGD) guides.

Third, we will conduct 40 IDIs and 15 FGDs with male community members and local leaders, men’s health providers, SHARE staff and RHSP Community Advisory Board members. Qualitative interviews and focus groups will aim to: (1) Identify barriers to engaging men in IPV prevention activities; and (2) Explore underlying factors of men’s perpetration of violence. Social constructions of masculinity and male gender norms as types of men’s controlling behaviors and their association with violence; perceptions about women’s rights and gender roles; and barriers and facilitators to engaging men and boys in prevention of IPV will be the focus of these interviews and focus groups. Coding and inter-rater reliability assessed. Coded text will be analyzed through identification of recurrent themes. Matrices will be created to compare codes by type of IPV acts, men’s self-report and SHARE participation. Findings will inform the development of in-depth interview (IDI) and focus group discussion (FGD) guides.

WHAT WILL WE ACHIEVE
This work will result in:
• A detailed guideline of men’s participation in IPV prevention
• Expanded understanding of masculinity norms

• Strengthened knowledge of men’s participation
• New model for IPV prevention for men

References