Stories of Change: Community based, primary prevention interventions that transform harmful masculinities

Working to Prevent Violence against Women and Girls

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Know your epidemic

Percentage of ever-partnered men reporting perpetration of physical and/or sexual intimate partner violence, by site:

- **Physical violence only**
- **Both physical and sexual violence**
- **Sexual violence only**

**Papua New Guinea**
- Bougainville: 80%

**Indonesia**
- Papua: 60%

**Bangladesh**
- Rural: 57%
- Urban: 55%

**China**
- Urban/Rural: 52%

**Cambodia**
- National: 33%

**Sri Lanka**
- National: 33%

**Indonesia**
- Urban: 31%
- Rural: 25%

Patterns of partner violence also varied across sites.
Focus: P4P Phase II
2014 - March 2018

• Develop, implement and evaluate primary prevention initiatives that integrate local knowledge, global promising practices, and promote volunteerism
  • Use *gender transformative interventions*, which promote a *critical reflection about masculinities, patriarchy, and power*, that engage men and boys, AND girls and women
• Build national capacity and support national and regional policy advocacy on prevention of VAWG
• Countries: Papua New Guinea, Viet Nam, Cambodia, Indonesia, Bangladesh
Bougainville, Papua New Guinea

• *Planim Save Kamap Strongpela*: Plant Knowledge, Grow Strong
• Nazareth Center for Rehabilitation, UN Women, UNICEF
• Intervention
  • Community conversations model (women, men and community leaders) to transform harmful, patriarchal gender norms, prevent VAWG and promote trauma healing and peace building
  • Providing community based counseling and trauma support services
  • Linked to Safe House
Evaluation: Bougainville, Papua New Guinea

• Quantitative
  • Within-group comparison of baseline vs endline measures from a self-complete questionnaire based on the UN MCS questionnaire
  • Data analysis: ANOVA to compare baseline and endline data (men and women’s data analysed separately)
  • Audio-enhanced iPod Touch applications used
  • n=344 men, n=407 women (matched cases)

• Qualitative
  • At endline only: 11 FGDs with intervention participants, 2 FGDs with facilitators and counselors, 10 IDIs with intervention participants (5 women), 6 IDIs with key informants

Ethical clearance: PNG Institute for Medical Research IRB, National Department of Health, Medical Research Advisory Committee, PNG. Project approved by Autonomous Bougainville Government.
Results: Bougainville, Papua New Guinea

- 36 community facilitators and 20 community counsellors trained
- 4 modules of community conversations delivered in most village assemblies
- 360 counselling sessions provided to women and men
- Qualitative endline research showed:
  - Increase in sharing responsibilities and gender equity in the home
  - Improved parenting and decrease in child abuse
  - Decreased drinking and alcohol related violence
  - Decreased family and sexual violence
  - Greater community cooperation and cohesion
Significant decreases in IPV victimization and perpetration

- Emotional IPV Victimisation: 86% Baseline, 80% Endline
- Economic IPV Victimisation: 78% Baseline, 68% Endline
- Physical IPV Victimisation: 75% Baseline, 65% Endline
- Sexual IPV Victimisation: 58% Baseline, 52% Endline

Physical IPV Perpetration:
- Baseline: 58%
- Endline: 48%
Significant increases in knowledge of where to seek services for violence against women and girls.
“I am an ex-combatant. In the past, I quarreled with my wife every week. After I returned from the facilitator training, I shared with my wife what I learned and we agreed to change our behavior. Our first priority is now to educate our children. My son now respects my wife and me. My wife listens to me and is not worried when I go out with my friends since I no longer drink. I show her my money and we save together. I am trying hard to contribute to my community....”
Da Nang, Viet Nam

- Da Nang Women’s Union, UN Women, UNV
- Male Advocacy Clubs
  - Masculinity transformation intervention to build gender equitable attitudes and healthy relationships, and prevent violence
  - Empower young men and older men to engage in volunteerism in their communities to share what they have learned and take action to make the community a safe place for all
  - Implemented within a larger prevention programme including positive parenting and community activism components that engaged women and men
Evaluation: Da Nang, Viet Nam

• Ethical clearance granted by Hanoi School of Public Health

• Qualitative
  • At endline only
  • 4 FGDs with facilitators
  • 20 IDIs with intervention participants
Male advocates signed a TOR for VAWG prevention
70% of male advocates participated regularly in year long intervention
Capacity of the male facilitators was built and young people provided additional support
Male advocates carried out volunteer events reaching 410 people which raised awareness on VAWG in collaboration with parenting clubs, participated in community events, and shared information with other men
Changes in gender attitudes
- Helping wives and children with family/household responsibilities
- Recognising patriarchal norms and how they are harmful
- Increased respect for and appreciation of women and the work they do for families

Greater understanding of sexual and emotional violence

Decrease in sexual violence with wives

Better communication, conflict resolution and decrease in verbal abuse and harsh parenting

Engaging in volunteerism/sharing what they learned:
- Sharing information learned with friends and relatives
- Offering safe haven to women experiencing violence
- Making referrals for women and men to appropriate services

Results: Male advocate programme
Da Nang, Viet Nam
Stories of change

“I help my mother with daily chores, like cooking. I cheer her up when things get rough. Before I was indifferent, didn’t care, kept things to myself. [Now I treat my female colleagues at the workplace with more consideration.....no teasing, no [outbursts of] short temper.”

Club member, professional, aged 28, in-depth interview

“Before I just forced her [to have sex]. Since I was young and inconsiderate, I was ‘a bit too much’ to my wife. Whenever I return home from drinking bouts, I think if I want it my wife has to do it. Now I have changed, I would ask my wife whether she would like it or not. I realize that her attitude is different. I feel happier.”

Club member, farmer, aged 52, in-depth interview
Cambodia and Indonesia

Kampong Cham, Cambodia
- Ministry of Women’s Affairs, UNFPA, and UNV
- Male/female adolescents aged 12-14
- Caregivers
- Provides referrals and linkages to services to referral services

Papua, Indonesia
- PKBI (IPPF affiliate), LP3A, UNFPA and UNV
- Male/female adolescents aged 13-15
- Caregivers
- Builds upon existing “Violence free villages”
Key Lessons Learned

• Teams need **sustained capacity building** throughout the design and implementation of the project
  • Support to **shift to a primary prevention approach**
  • Encouragement and guidance to embrace **participatory methodologies**
  • **Facilitators** must be carefully selected and strongly supported
  • Greatest personal and professional transformation occurred among the project staff and facilitators and this **internal transformation is the foundation to facilitate individual and community transformation**
Key Lessons Learned

• **Emotional expression** – encouraged during communication and conflict resolution sessions – was very new for most

• **Volunteerism is a promising strategy** to reinforce, expand, and sustain intervention impact
  • Volunteers need support and recognition for their efforts to build their confidence and motivation to start and continue volunteerism efforts

• **Strong referral networks** for VAWG survivors needed
Lessons learned: engaging men and boys to transform harmful masculinities

• Explain the **benefits that men will gain** from the programme to encourage their participation

• Be careful that they do not take on a “protector” role of women vs. supporting and empowering women

• Address the concerns of men that feel threatened by the changes an intervention can bring to the community

• Take into account their work schedules, locations of meetings, migration of men in the community to maintain their participation
Thank you!

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