

Promoting gender equity for HIV and violence prevention in Ethiopia: Emerging results from the Male Norms Initiative evaluation



Material utilized in the community mobilization intervention

Male gender norms, or social expectations about how men should behave, have been shown to promote HIV risk and related behaviors, such as partner violence.¹ There is growing evidence of the importance—and success—of involving men and explicitly addressing gender dynamics in HIV/AIDS and violence prevention initiatives.² PEPFAR is supporting interventions to address and evaluate these issues through the Male Norms Initiative (MNI) in Ethiopia, Namibia, and Tanzania. In Ethiopia, partners EngenderHealth, PATH, PROMUNDO, Hiwot Ethiopia, and Miz-Hasab Research Center implemented and evaluated the impact of activities among young men.

Study design

Set in three low-income subcities in Addis Ababa, Ethiopia, this quasi-experimental study compared the impact of different combinations of program activities (based on experiences from the Men as Partners program and Program H). Participants included young men ages 15 to 24 who were members of youth groups. Three groups of young men were exposed to different interventions and followed over a six month period. The combined intervention arm included interactive group education (GE) with community mobilization (CM) activities; the other intervention group included CM only; and the comparison group did not receive intervention activities until after the study period ended.

Study methods

PATH led the evaluation, in partnership with Miz-Hasab Research Center. Surveys were administered in May and June 2008 to a cohort in each arm prior to the intervention ($n = 729$) and after the intervention ended six months later ($n = 647$). The response rate was 89%. The surveys focused on support for (in)equitable gender norms as measured by the Gender Equitable Men Scale (GEM Scale),³ and gender-related behaviors, including violence and HIV risk. The GEM Scale is a 24-item scale with attitudinal statements about gender roles related to domestic work, sexuality, relationships, violence, and health. It has been psychometrically evaluated in multiple cultural contexts, including Ethiopia ($\alpha = .88$). Data from young men who participated in both baseline and endline are reported here.

Qualitative interviews with a subsample of intervention participants and their primary female partners were conducted at endline ($n = 23$). Couple members were interviewed individually. The data were used to explore the process of change due to the intervention, as well as validate reported changes by participants from the perspective of their female partners.

Intervention

Hiwot Ethiopia implemented the GE and CM intervention activities with technical assistance from EngenderHealth.



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The Miz-Hasab Research Center
Addis Ababa, Ethiopia

The GE activities used discussion and role plays to promote critical reflection of common gender norms that can lead to risk. The GE activities included 18 sessions and were implemented for about two hours once a week. The CM activities included radio spots, distribution of IEC materials, music, dramas, with gender equitable message, as well as community discussions and condom distribution.

Key findings

At baseline, gender norms varied among young men.

Support for equitable gender norms varied, with 58% agreeing that ‘a woman should tolerate violence in order to keep her family together,’ 50% agreeing that ‘a woman should obey her husband in all things,’ and 12% agreeing that ‘a man should be outraged if his wife asks him to use condom.’

Participants reported moderate risk at baseline.

Almost 40% of the youth reported having sex in the past, and 44% had a primary partner over the past six months. Three-fourths (76%) of sexually experienced youth reported condom use during their last sexual encounter. A substantial proportion reported partner violence, with, for example, 27% having slapped a partner.

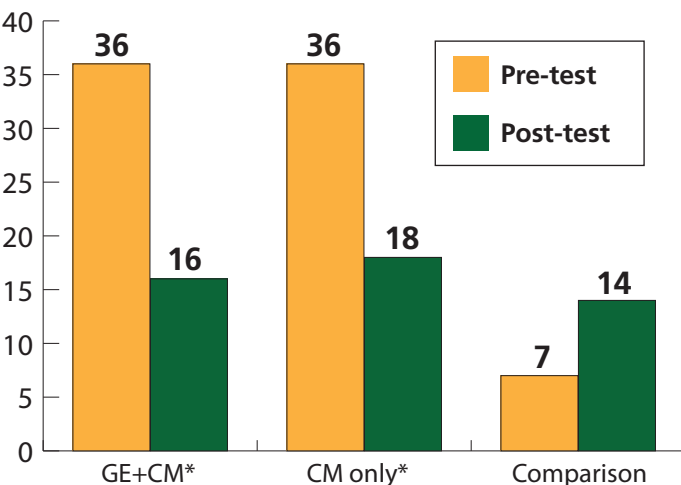
Intervention led to increased support for more equitable gender norms.

Both intervention arms had a positive, significant impact among participants, with no change in the comparison group. Those who changed became more supportive of equitable norms/less supportive of inequitable norms. Young men in the GE+CM arm were nearly twice as likely as those in the comparison group to increase their GEM Scale score.

Reductions in partner violence reported in both intervention arms; agreement with more equitable gender norms associated with reductions in violence.

The percentage of respondents who reported being physically violent toward a female partner over the past

Percent of reported physical violence against partner over past 6 months



*p < 0.05

six months decreased in both the GE+CM and CM arms (See graph; $p < 0.05$), while violent behaviors stayed the same or increased in the comparison arm. High equity GEM scale scores were associated with a 34% reduction in the odds of partner violence ($p = 0.08$) among all groups.

Young men perceived positive changes in behavior due to participation in the intervention.

The great majority of participants said their behavior had changed due to participation in Hiwot Ethiopia activities. More participants from the GE+CM arm (95%) reported positive changes than in the CM arm (82%). Participants in both interventions reported that they had changed their ideas about gender roles, increased their knowledge of HIV/AIDS, could negotiate condom use, and learned how to improve partner communication.

Most females reported positive changes in their partners.

Most female partners indicated that they had seen clear changes in their partners' behavior since they participated in Hiwot Ethiopia's programs. These changes included new, open discussions about HIV/AIDS, sex and protecting oneself from diseases; talking about faithfulness in relationships; helping with household chores; and not engaging in unhealthy behaviors like smoking or chewing chat. For example, the wife of one young man said:

My husband told me about unwanted pregnancy, abstinence, and HIV. He told me that we have to take care of ourselves from these problems and we have to care for each other. In relation with the program, I can say he now cares about his "house" and I can say this program makes everything good.

Conclusions

The results from this evaluation suggest that the Male Norms Initiative had a few main positive effects. First, young men participating in the intervention groups expressed more equitable gender norms at endline compared to baseline. Second, participants from both intervention groups reported less violence over time than those in the comparison group, who reported virtually no change. Finally, combined interventions were often most successful in leading to change, but community activities alone also showed some impact.

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