



## Case Studies: Gender Continuum



### *Gender Exploitative:*

#### **Female Condom Promotion in South Africa**

A pilot program was designed to increase the acceptability and use of the female condom in South Africa. Historically, female condoms have been promoted to women. After acknowledging that in the African context, men dictate the terms of heterosexual encounters, the program decided to try an innovative approach: the promotion of the female condom to men by male peer promoters. This effort involved (1) having male promoters demonstrate to men the use of the female condom; (2) explaining to men that self-protection and sexual pleasure are completely compatible with the use of the female condom especially when compared to currently available barrier alternatives; and (3) giving men female condoms to use with their female partners. Staff based their programmatic approach on research that found that “Men are preponderantly concerned with retaining control over the means of protection (while remaining) ambivalent about female-controlled methods; they wanted their women to be protected from STDs, including HIV, but the threat of infection was seen as ensuring that women remained faithful.”

### *Gender Exploitative:*

#### **Campaign to Increase Male Involvement in Zimbabwe**

To increase contraceptive use and male involvement in Zimbabwe, a family planning project initiated a communication campaign promoting the importance of men’s participation in family planning decision making. Messages relied on sports images and metaphors, such as “Play the game right, once you are in control, it’s easy to be a winner” and “It is your choice.” The campaign increased the use of contraceptive methods. When evaluating impact, the project asked male respondents whether ideally they, their partners, or both members of the couple should be responsible for making family planning decisions. The evaluation found that: “Whereas men were far more likely to believe that they should take an active role in family planning matters after the campaign, they did not necessarily accept the concepts of joint decision making. Men apparently misinterpreted the campaign messages to mean that family planning decisions should be made by men alone.”



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### *Gender Transformative:*

#### **FGC Prevention Program in Kenya**

A female genital cutting (FGC) intervention in Kenya sought to reduce the incidence of harmful cutting. Project staff realized that legislation to prohibit the practice would not address the cultural and social motivations of the community and would likely result in driving the practice “underground.” Instead, the project hired a medical anthropologist to work with the community. Through qualitative interviews with groups of women, men, and religious leaders, the project sought to understand the meaning and functions that the ritual provides to the community. Together with community members, the project staff adapted the FGC ritual by eliminating the harmful cutting but keeping the “healthy” cultural elements, such as seclusion of girls, dance, story-telling, gift-giving, health and hygiene education, etc. As a result, a new right-of-passage ritual has been created for girls called “circumcision with words,” which has become accepted by the entire community.

### *Gender Accommodating/Transformative:*

#### **Cultural Resources and Maternal/Child Health in Mali**

A child survival project in Mali, aiming to reduce morbidity and mortality rates among children and women of reproductive age, focused on using indigenous knowledge and cultural resources to increase and improve communication and health-seeking behavior during pregnancy. Research showed that one of the most important obstacles to women’s maternal healthcare-seeking behaviors was the absence of discussion about pregnancy between husbands and wives, as well as with other members of the household. The women in this area felt that they could not take advantage of maternal health services because they could not initiate conversations with their husbands nor solicit their consent and financial support, as the heads of the household. The project staff asked a *griot* to compose a song that educated people about maternal healthcare, along with promoting the *pendelu*—a traditional article of women’s clothing—as a symbol of pregnancy and couple communication. This campaign dramatically increased the level of communication between wives and husbands concerning maternal health. Additionally, the campaign resulted in more positive attitudes and behaviors related to pregnancy at the household level, including husbands supporting their wives by reducing their workloads, improving their nutrition, and urging them to seek medical attention and maternal health services.



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### *Gender Accommodating:*

#### **Handwashing for Diarrheal Disease Prevention in Central America**

The Central American Handwashing Initiative aimed to reduce morbidity and mortality among children under 5 through a communication campaign promoting proper handwashing with soap to prevent diarrheal disease. Four soap companies launched handwashing promotion campaigns: radio and television advertisements; posters and flyers; school, municipal, and health center programs; distribution of soap samples; promotional events; and print advertisements. The basic approach was to present a mother as caretaker of the family and to describe or illustrate the three critical times for handwashing: before cooking or preparing food; before feeding a child or eating; and after defecation, cleaning a baby, or changing a diaper. They also emphasized essential aspects of the handwashing technique: use water and soap, rub one's hands together at least three times, and dry them hygienically.

### *Gender Accommodating:*

#### **Youth Roles in Care and Support for People Living With HIV (PLHIV)**

In Zambia, one project has sought to involve young people in the care and support of PLHIV. This project carried out formative research to assess young people's interest and to explore the gender dimensions of care. The assessment explored what care-giving tasks young women and young men feel more comfortable with and able to carry out, as well as what tasks PLHIV themselves would prefer to have young women or young men carry out. Based on this research, the project adopted an approach that incorporates preferred tasks for young women and young men in order to develop youth care and support activities for PLHIV.