TRANSFORMING MASCULINITIES: A faith-based approach to GBV prevention
Presented by Prabu Deepan
Tearfund is a Christian relief and development agency, working in 50+ countries.

Our SGBV response is currently in 11-countries, mostly in conflict/humanitarian settings.

Our SGBV focus areas: Faith leaders and communities; Survivors; Gender Justice; FGM/C and Child-marriages.

Emerging theme: Gender transformative approach to peace-building.
TRANSFORMING MASCUINITIES

An evidence-based approach to transforming harmful concepts of gender and masculinities, and to promoting gender equality.

HAND IN HAND: BIBLE STUDIES
Resource provided to faith leaders regarding healthy gender relationships, as a support in delivering sermons, sharing testimonies and counselling couples.

TRANSFORMING MASCUINITIES
Training manual used for faith leader workshops and to train Gender Champions.

COMMUNITY DIALOGUES
Guide used by Gender Champions to facilitate the community dialogue group discussions.
Community dialogues run for six weeks and follow key themes in the order described below:

- **WEEK 2**: Gender roles and norms in daily life
- **WEEK 4**: Faith and SGBV
- **WEEK 6**: Looking ahead/envisaging a community free of SGBV

Weeks 1-5 are conducted in single sex groups, while Week 6 is in combined sex groups.

Male only sessions are led by male Gender Champions and female only sessions by female Gender Champions.
WHY A FAITH-BASED INTERVENTION?
95% of respondents affiliated to a faith, and **83.6% of them say it’s important/very important** to them.

**Faith engagement** was highlighted as one of the few variables that remained a significant correlation with reduced experience of physical/sexual IPV for women, even when adjusted for other factors.

The belief that women can say no to sex with her husband strongly correlated with **reduced experiences** of IPV.

Female respondents with faith engagement were more likely to **believe IPV is unjustified**; and that a woman can refuse to have sex with her husband; and reported more say in decision-making.

Men actively involved in their faith were more likely to hold equitable attitudes around gender; and were **less likely (reduced by half)** to have perpetrated IPV in the last 12 months (both Christian and Muslim).

Passages Project (Kinshasa, DRC): Cohort survey (baseline) and social norms exploration study findings show that faith leaders and communities as significant influence on IPV and use of FP for both men and women.

Tearfund’s own formative research findings from Rwanda, Burundi, CAR, Liberia and DRC:

- **Faith leaders and communities** play a significant role in influencing gender norms.
- Faith/peoples understanding of scriptures **influences** and shape people’s behaviors and beliefs on gender, gender norms and SGBV.
- Especially the use of scriptures to justify male-dominance and controlling behaviors, male superiority/women as inferior to men and the justification of violence.
Scripture-based reflections on key scriptures that influence gender norms. 
Brings the discussions on gender equality within people’s understanding of faith.
Group learning and a safe space for dialogues.

- Promotes accountable practices at all levels.
- Refresher training, continuous coaching and workshops for gender champions and faith leaders.
- Designed to complement existing faith structures for easy integration and adaptation.
<table>
<thead>
<tr>
<th>Country</th>
<th>Intervention phase</th>
<th>Intervention model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nigeria</td>
<td>Pilot</td>
<td>Integrated (FP+GBV)</td>
</tr>
<tr>
<td>Myanmar</td>
<td>Pilot</td>
<td>Standard</td>
</tr>
<tr>
<td>Burundi</td>
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<td>Standard</td>
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<tr>
<td>Brazil</td>
<td>Pilot</td>
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<tr>
<td>Rwanda</td>
<td>Pilot</td>
<td>Standard</td>
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<tr>
<td>Iraq (Kurdish Region)</td>
<td>Pilot - adaptation</td>
<td>Integrated (GBV+PB)</td>
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<tr>
<td>Central African Republic</td>
<td>Pilot/pre-scale up</td>
<td>Standard</td>
</tr>
<tr>
<td>DR Congo</td>
<td>Scale-up</td>
<td>Standard and integrated</td>
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WHAT CHANGES ARE HAPPENING?

"Things changed in my home and in the Church as Church members testify. I have trained two teams already and one more is about to finish the course. In my community a woman was beaten and mistreated because she was giving birth to only girls, but now things changed because of the training they got and the sharing of the teachings with her husband."

Ps. Musonera Alex
Ntaho Parish
Intervention Stats:
- Over 400 Faith Leaders (Christian, Islamic and Yezidi leaders) trained.
- 200+ Gender Champions have been trained, and are actively involved in facilitating community dialogues.
- More than 3000 people have completed community dialogues.

How’s impact being measured?
- Pre/Post KAP assessments, case studies, KII’s, project monitoring reports.
- Baseline/endline surveys, ethnography studies, ongoing panel visits, referrals (What Works & Passages).

What Impact does this have?
- Faith leaders and communities are supporting survivors of SGBV.
- Faith leaders are preaching sermons to promote gender equality and positive masculinities, and also report change in their own lives.
- Participants of community dialogues and gender champions are reporting changes in their attitudes on gender equality, relationships, more involvement of men in household work and childcare, joint decision-making.
- Faith leaders are accompanying survivors to access legal and healthcare services.

“Today, I am on a journey to take action. I have resolved to be a gender champion in my home. As a husband and father of three daughters I understand the responsibility I have to be a positive role model to my daughters by the way I treat their mother.”

Ben Chikan, Nigeria
TRANSFORMING MASCULINITIES:
A faith-based intervention to reduce intimate partner-violence and increase family planning use among newly married couples and first-time parents.

THE FP ADAPTATION
CONTEXT: PASSAGES PROJECT

✓ **USAID-FUNDED**, 2015-2020; DRC, Senegal, Niger, Nepal

✓ **CONSORTIUM-LED**: Georgetown University Institute for Reproductive Health, FHI 360, John’s Hopkins Global Early Adolescent Study, Population Services International, Save the Children, Tearfund

✓ **GOAL**: Improved family planning use and sexual and reproductive health among youth, especially newly married couples, first-time parents, and very young adolescents

✓ **STRATEGY**: Through three work streams - research, practice and global leadership:
  - Capitalize on life course transitions
  - Conduct gender-synchronized and multi-level interventions
  - Explain what makes interventions effective in real-world contexts
  - Consider cost, complexity, adaptability
  - Address issues of scale and sustainability
THE ADAPTATION: MASCULINITÉ, FAMILLE, ET FOI
TRANSFORMING MASCULINITIES & PROMOTING FP THROUGH RELIGIOUS LEADERS/FAITH COMMUNITIES

SNAPSHOT
Partners: Tearfund, PSI, IRH

Scope: 17 Protestant congregations, Kinshasa

Target: Newly married youth & first time parents (18-24 yrs)

Intervention: Trained faith/youth leaders (gender champions) conducting community dialogues, role model story-sharing, marriage counseling, sermons. Health talks and referrals.

Design: Cluster RCT with pre/post design following women/men (n=900), diffusion survey (n=1252), in-depth interviews (n=64).

To what extent does a gender norms intervention with religious leaders and faith communities increase FP use among newly married couples and first time parents in participating congregations?
Theory of Change: Transforming Masculinities

**TM/MFF Intervention Components**
- Trained Protestant Faith leaders
  - Seminalization on scriptural perspectives on gender, FP and IPV
  - FP health talk by Community Health Workers (CHWs)
  - Ability to support GCS
  - Exchange visits to learn from other faith leaders
- Trained Gender Champions (GCs)
  - Seminalization on scriptural perspectives on gender, FP and IPV
  - FP health talk by CHWs
  - Ability to lead community dialogue sessions
  - Exchange visits to learn from other GCs

**Primary audience:** Couples: newly married couples (NMCs) and first-time parents (FTP), 18-24 years, participate in:
- Community dialogue sessions
- Peer support from other couples
- Marriage counseling.

**Secondary audience:** Congregants, Protestant
- Community mobilization (events and campaigns)
- Group discussion (intergenerational and group dialogues sessions)
- Public testimony (sermons, story-sharing)

**Widespread Efforts among congregation members**

**Sphere of Control**

**Intermediate Outcomes**
- Attitudes
  - Attitudes towards FP use
  - Gender equitable attitudes
  - Rejection of use of IPV
- Supportive Normative Environment
  - Reference group: protestant congregation members, faith leaders, spouse, close friends, parents
  - Social support to challenge gender and FP norms
  - Perceived social norms about masculinities
  - Perceived social norms about IPV
  - Perceived social norms about FP use
  - Perceived approval of IPV
  - Perceived approval of FP

**Sphere of Influence**
- Self-efficacy and Outcome Expectations
  - FP knowledge
  - Skills for using and negotiating FP
  - Self-efficacy for using FP
  - Self-efficacy to negotiate FP use with partners
  - Motivation to comply with new FP norms.

**Sphere of Interest**
- Among NMCs and FTPs:
  - Increased modern FP use among NMCs and FTPs
  - Improved relationship quality
  - Increased couples communication and shared decision-making
  - Reduced IPV

**Impact**
- Increased SRH and wellbeing, including healthy timing and spacing of pregnancies

**Enabling Service Environment**
- FP health talk and referral cards to young adult couple groups
- Training of CHWs on YFS and IPV referrals/response
- Provision of YFS and GBV referrals
- Promotion of youth friendly Hotline
FAITH LEADERS (Protestant) at national, provincial, and congregational levels receive training and commit to creating an environment that supports family planning use and rejects family violence. These influential leaders provide sermons and guidance to congregations to spread positive change, working alongside selected Gender Champions.

GENDER CHAMPIONS are congregation members selected by faith leaders to act as change agents and peer mentors. They facilitate group discussions with young couples called ‘community dialogues.’

NEWLY MARRIED COUPLES & FIRST-TIME PARENTS (ages 18-35) participate in community dialogues for eight weeks. The final two sessions on family planning include a family planning health talk. They engage in other congregation-wide activities and receive support from their peers.

CONGREGATIONS receive sermons and testimonies, and participate in group discussions and mobilizing events. They reflect on gender equity and the ways in which they interact and make decisions.

AN ENABLING SERVICE ENVIRONMENT strengthens connections to health services. ASF/PSI trains providers in youth-friendly services, leads family planning health talks, offers referrals to family planning and gender-based violence services, and maintains their confidential health hotline.

WEEKS 1-5 IN SINGLE SEX GROUPS OF COUPLE MEMBERS/FIRST TIME PARENTS
- WEEK 1: Introduction/SGBV root causes
- WEEK 2: Gender roles and norms in daily life
- WEEK 3: Power, status and SGBV
- WEEK 4: Faith and SGBV
- WEEK 5: Moving forward and reflections

WEEKS 6-8 COMBINED SEX GROUPS
- WEEK 6: Looking ahead/ensuring a community free of SGBV
- WEEK 7: FP sessions 1-3
- WEEK 8: FP sessions 4-6 & ASF/PSI health talk
WHAT’S EARLY DATA SHOWING?

MONITORING

**Young adults from experimental sites access ASF/PSI services:**
- 2x more hotline calls in experimental sites compared to control.
- Diffusion events correlated with spike in calls and clinic visits.
- 70% more clinic visits in experimental sites.

**Increase in sermons addressing MFF themes (IPV, FP):**
- Primary data analysis of ethnography study shows over 80% accept the intervention and increased discussions from the "pulpit" and within the congregations.

**Intervention stats to-date:**
- 40 Faith Leaders Trained from the 8 congregations, national and regional leadership.
- 38 Gender Champions active.
- 314 young couple members/first-time parents (individuals) have completed the community dialogues.
- Retention rate above 80% (based on figures from 1st cycle).
- 97 sermons, 38 testimonies since February 2017, and 27,000 person contacts in the 8 experimental sites.
For more information, please visit: www.tearfund.org/sexualviolence