

Helpdesk Research Report: Communication Initiatives to Change Attitudes and Behaviours

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Query: Please identify literature on communications interventions in developing countries designed to change attitudes and behaviours, particularly around gender relations and the value and role of women and adolescent girls. Is there any evidence of impact and lessons learned?

Enquirer: DFID Nigeria

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1. Overview

The concept of behaviour change communication first emerged in the 1970s. It was closely associated with social marketing, which aims to promote particular attitudes, behaviours and social norms through communication interventions and commercial marketing methods (Tufté and Mefalopoulos, 2009; Adams, 2009). It has been widely used in health education, thus much of the literature included in this helpdesk query is related to the health sector. Health programmes can affect social norms related to gender roles since gender norms are linked to all facets of health behaviour. Initiatives that seek to affect gender norms as a goal in itself, however, are still relatively new (White, Greene and Murphy, 2003).

Initially, communication initiatives adopted a diffusion approach, aimed at changing individual attitudes and behaviour. This includes information dissemination, large-scale media campaigns and other one-way communications. More recently, attention has also been paid to adopting interpersonal and participatory approaches (Tufté and Mefalopoulos, 2009). Interpersonal communication refers to face-to-face communication that can either be one-on-one or in a small group. Participatory development communication aims to empower the community towards collective decision-making and action through enhanced knowledge and skills to identify, prioritise and resolve needs and problems (UNICEF, 2005).

A contemporary form of behaviour change communication is entertainment education (also known as 'edutainment'). It is a research-based communication process or strategy that aims to both entertain and educate, in order to increase audience knowledge; and change attitudes, social norms, and behaviour (UNICEF, 2005). This can involve radio and television programming; theatre, music, arts and photography. It can involve both diffusion and participatory approaches. Edutainment has been shown to be a powerful mechanism to achieve change. It allows for audiences to experience and relate to the lives of characters and provides for role modeling of positive norms, attitudes and behaviours (Usdin et al., 2005; Barker, Ricardo and Nascimento, 2007).

Participatory methods can be integrated into many edutainment initiatives. Theatre, for example, can involve varying degrees of participation, blurring of lines between actors and audiences (UNICEF, 2005). Radio can invite listeners to send in suggestions for story lines (Durá, and Singhal, 2008). Participatory video has been found to be an effective way of raising awareness of gender issues and promoting community dialogue and change. It has also been beneficial in providing empowering women involved in the process by giving them an important role, providing them with various skills, and boosting their self-esteem (Dragon, 2001; Molony, Konie and Goodsmith, 2007; Lee and Bolton, 2007).

Group education is also considered effective in promoting attitudinal and behavioural change. The category of group education is broad and can encompass traditional styles of rote learning or participatory methods, such as role-playing, guided imagery and case studies. The aim is to promote critical reflection on how gender norms are socially constructed (Barker, Ricardo and Nascimento 2007). Community educators and facilitators can be trained to lead and moderate sessions, contributing further to community participation. The use of tangentially relevant entry points for dialogue with communities can help lead into discussions on more controversial topics, such as violence, sexuality and equality (Interagency Gender Working Group, 2003; C-Change, 2009).

Studies and evaluations of various communication initiatives addressing gender issues have found positive outcomes. For example:

- Some studies have found that group educational activities, one of the most common programme approaches for men and boys, is effective in leading to changes in attitudes and in some cases changes in behaviour (Barker, Ricardo and Nascimento 2007). Participatory workshops for women that have allowed for expression through sketches and photography have encouraged women to engage in public forums and express themselves (Rattine-Flaherty and Singhal, 2009).
- Film screenings and a participatory video project in Kakuma refugee camp, Kenya was found to have contributed to an increase in level of knowledge of family planning, HIV and testing for HIV; and to a perceived positive impact on women's quality of life and attitudes towards women (Lee and Bolton, 2007).
- A television show in South Africa aimed to counter gender-based violence (Soul City) reached a large audience and contributed to an increase in knowledge of issues of gender-based violence. At the interpersonal and community level, qualitative analysis suggests the intervention contributed to enhancing women's and communities' sense of efficacy, enabling women to make more effective decisions about their health and facilitating community action (Usdin et al, 2005).
- An initiative involving radio, film and community workshops aimed at countering early marriage in Yemen resulted in an increase in awareness about the benefits of delaying marriage; postponement or prevention of a number of child marriages; and buy in by political and religious leaders (Freij, 2010).
- The Stepping Stones initiative which has been implemented in various countries and adopts a range of approaches has contributed to better gender relations - greater equality, mutual respect and empathy, increased respect for women's rights, sharing of household work, and improved gender relations (Interagency Gender Working Group, 2003).

Key lessons learned from communication initiatives include:

- Conduct formative research when conceptualizing communication strategies. In the case of mass media, for example, extensive formative research has resulted in the ability of the mass media material to resonate with audiences. Such research is best done in consultation with members of the target group (Usdin et al., 2005; UNICEF, 2005; Barker, Ricardo and Nascimento, 2007).

- Mixed methods are considered to be especially effective. Interventions designed to include multiple components (e.g., group education workshops combined with mass media campaigns; or theatre combined with community dialogue sessions) have been shown to be more effective in improving outcomes than single component interventions (C-Change, 2009). While mass-media campaigns show evidence of learning, change in attitudes and behavioural intentions, they contribute to sustained behaviour change when combined with more interpersonal activities (Barker, Ricardo, Nascimento, 2007; UNICEF, 2005).
- Build on tradition and popular culture. Approaches and activities should build on tradition and culture such that it can resonate with communities. Theatre, puppets, dance and music, for example, are strongly rooted in the traditional cultural and artistic expressions in many communities and can resonate more in certain communities (Dagron, 2001). Outreach activities should also build on cultural preferences: for example, male community educators in Yemen used poetry to convey the harmful social and health consequences of child marriage, whereas female educators used stories (Freij, 2010). Building on tradition is also important in muting opposition from conservative segments of society (Adams, 2009).
- Reach out to community leaders. The involvement of community leaders such as teachers, cultural custodians and government officials in projects is key to greater impact and sustainability of changes. Such leaders have the influence to promote and/or implement change and the legitimacy and respect of communities to influence their thinking and behavior (Bushee, and Brice, 2008; Freij, 2010).

2. General literature on communication for attitudinal and behavioural change

UNICEF, 2005, 'Strategic Communication: For Behaviour and Social Change in South Asia', Regional Office for South Asia, UNICEF

http://www.unicef.org/rosa/Strategic_Communication_for_Behaviour_and_Social_Change.pdf

This working paper presents a synthesis of recent experiences in South Asia and elsewhere in applying various communication approaches for behaviour and social change. 'Communication for Behaviour Development' is discussed in section 2.5. A behaviour development communication strategy is aimed at changing knowledge, attitudes and practices of participant groups; and facilitating broader social change at local and national levels. The section focuses on two key contemporary communication strategies: (i.) entertainment education (EE) and (ii.) interpersonal and participatory communication.

(i.) Entertainment Education is a research-based communication process or strategy that aims to both entertain and educate, in order to increase audience knowledge; and change attitudes, social norms, and behaviour. The entertainment factor results in high recall and keeps audiences engaged even after the activity is over by triggering conversations and dialogue. Audience attitudes and behaviour can change as a result of role-modelling and the development of 'para-social relationships'; whereby the audience develops interpersonal relationships with media characters and model attitudes and behaviours after them.

Lessons learned from EE for behaviour change include (extracted from p. 25):

- EE can be adapted or created based on local customs, practices and needs of the public.
- EE need not be limited to mass media such as TV, radio and music but could be successfully advanced through local folk media, arts, photography and so on.
- Formative research is needed while conceptualising a good EE strategy.
- Summative research in the form of rapid exposure surveys and monitoring of changes in attitudes and behaviours is important to assess the effects of EE.
- Pre-programme publicity and priming helps overcome the lag in building listenership.
- Listeners' groups result in audiences coming together and spurring dialogue and discussion about the messages they hear on radio.
- EE intervention needs to have a ground-based service delivery partner when the practice being promoted needs essential services such as health services.

- EE strategy can successfully integrate inter-sectoral partnerships to widen its reach, provide services and to monitor and evaluate its impact.

(ii.) Interpersonal communication (IPC) refers to face-to-face communication that can either be one-on-one or in a small group. Its objectives are to share information, respond to questions, and motivate the listener to adopt specific behavioural practices. “Diffusion theory informs us that many people tend to rely on mass media to learn about new ideas but they use interpersonal networks to move from knowledge to trial and continued practice of a new behaviour” (p. 26).

Participatory development communication aims to empower the community towards collective decision-making and action through enhanced knowledge and skills to identify, prioritise and resolve needs and problems. Examples of participatory communication methods and media include (extracted from pp. 27-28):

- Community-managed media: Use of community audio tower (CATS) for a public address system, low-powered radio broadcasts, cable television, puppetry, audio visual media used in group meetings, community theatre, and information technology kiosks
- Interactive theatre: Use of three forms of Augusto Boal’s theatre of the oppressed including image theatre, invisible theatre, and forum theatre. These forms involve varying degrees of people’s participation, blurring of lines between actors and audiences, and consciousness-raising of the community. This method calls for skill and training in facilitation for effectiveness.
- Peer educators and leaders: Working with already established peer educators who represent the community, and supporting and cooperating with professional and traditional leaders to gain support from the community.
- Inter-sectoral Cooperation: Linking local organisations, including the private sector and social marketing organisations; networking with existing programmes to reinforce and integrate messages in capturing participants’ interest in the community organizing process.

The paper provides the following recommendations for planning evidence-based and results-based communication programmes, more generally (extracted from p. xiv):

- Communication strategies work best when they are integrated with various strategies for behaviour change or behaviour development, social mobilisation, and advocacy aimed at achieving clearly identified objectives; and when they are linked to other programme elements and service provision.
- Communication strategies need to extend beyond individuals and households to include service providers, traditional and religious leaders, and decision makers at different levels to engender systemic social change.
- Research, monitoring and evaluation are essential, and ought to be part of any strategic communication plan.
- Participatory communication methods yield results, if planned well and if they are responsive to people’s needs.
- Entertainment-education (EE), currently an underused communication strategy in South Asia, has the potential to be more widely used. Past EE successes have the potential to be scaled up; results ought to be well researched and documented, and lessons learned widely shared.

Dagron, A. G., 2001, ‘Making Waves: Stories of Participatory Communication for Social Change’, The Rockefeller Foundation, New York

http://www.communicationforsocialchange.org/pdf/making_waves.pdf

This report profiles fifty ‘case stories’: brief descriptions of experiences of participatory communication for social change throughout Africa, Asia and Latin America. The experiences are diverse and linkages with development projects aimed at economic and social change have not always been successful. The report provides an overview of different forms of communication interventions that have been used to promote social change:

Radio: approximately twenty of the fifty case stories are of radio stations. Participation in radio can range from total ownership to various degrees of audience involvement in programming and management. Benefits of radio as a tool for social change and participatory communication include:

- Cost effectiveness
- Relevance in terms of language and content, particularly in rural areas where much of the population is illiterate
- Relevance in terms of local practices, traditions and culture
- Sustainability once the initial investment in equipment is made
- Strong outreach and geographic coverage
- Opportunities to link with the Internet

Video: there are many examples of innovative participatory video experiences from around the world. A key outcome is the fact that women with little education are capable of using the video tool, and their role in society can immediately change as a result. The process rather than the product is often more important in such experiences; the process before the video product, the use of the camera in community discussions, and the process after the video product is completed. Benefits of video include:

- Affordability and simplicity
- The combination of an interactive process and a video product, which allows for continuous participation and dialogue and immediate feedback
- The power of visuals
- Opportunities to link with the Internet

Theatre: theatre, puppets, dance and music are strongly rooted in the traditional cultural and artistic expressions in many communities. They can provide the space and tools to help communities organise themselves and improve their quality of life. Benefits of theatrical methods include:

- Cultural relevance and preservation and strengthening of traditional values
- Cost-effectiveness and ability to appreciate immediate impact on the audience
- Ability to establish a live dialogue that could contribute to the learning process
- Ability to reach isolate areas that do not have electronic-based information

The review outlines some of the issues that distinguish participatory communication from other development communication strategies aimed at social change (extracted from p. 26):

- Horizontal vs. Vertical: People as dynamic actors, actively participating in the process of social change and in control of the communication tools and contents; rather than people perceived as passive receivers of information and behavioural instructions, while others make decisions on their lives.
- Process vs. Campaign: People taking in hand their own future through a process of dialogue and democratic participation in planning communication activities; rather than expensive unsustainable top-down campaigns that help to mobilise but not to build a capacity to respond from the community level to the needs of change.
- Long-term vs. Short-term: Communication and development in general is conceived as a long term process which needs time to be appropriated by the people; rather than short-term planning, which is seldom sensitive to the cultural environment and mostly concerned with showing “results” for evaluations external to the community.
- Collective vs. Individual: Urban or rural communities acting collectively in the interest of the majority, preventing the risk of losing power to a few; rather than people targeted individually, detached from their community and from the communal forms of decision-making.
- With vs. For: Researching, designing and disseminating messages with participation; rather than designing, pre-testing, launching and evaluating messages that were conceived for the community, and remain external to it.
- Specific vs. Massive: The communication process adapted to each community or social group in terms of content, language, culture and media; rather than the tendency to use the same techniques, the same media and the same messages in diverse cultural settings and for different social sectors of society.
- People’s needs vs. Donors’ musts: Community-based dialogue and communication tools to help identify, define and discriminate between the felt needs and the real needs; rather than donor-driven communication initiatives based on donor needs (family planning, for example).

- Ownership vs. Access: A communication process that is owned by the people to provide equal opportunities to the community; rather than access that is conditioned by social, political or religious factors.
- Consciousness vs. Persuasion: A process of raising consciousness and deep understanding about social reality, problems and solutions; rather than persuasion for short-term behavioural changes that are only sustainable with continuous campaigns.

2. Multi-sectoral gender communication initiatives

Lee, K. and Bolton, P., 2007, 'Impact of Film Aid Programs in Kakuma, Kenya: Final Report'.
<http://www.filmaid.org/where/bu%20report%20final%20evaluation.pdf>

FilmAid is a nonprofit organisation that aims to use the power of film to promote health, strengthen communities, and enrich the lives of vulnerable and uprooted populations. Its programming seeks to facilitate social change by providing communication tools, information and opportunities for people to come together, explore, express and debate ideas. This study evaluates the impact of FilmAid's programme in the Kakuma Refugee Camp in Kakuma, Kenya. FilmAid's activities in the camp comprised of:

- Daytime educational film screenings, conducted in conjunction with partner aid programmes. These films were shown to small groups and were followed by facilitated discussion
- Evening screenings, consisting of children's cartoons, educational shorts, and feature films that are educational and stimulating
- Participatory Video Project (PVP), which teaches youth to use video as a story-telling tool. The aim is to develop participants' confidence and self-esteem and to provide a means for communication and critical thinking

The study finds that FilmAid is effectively:

- Educating people at the camp about conflict prevention and resolution; HIV/AIDS and other infectious diseases; domestic violence; and gender equity
- Providing them with knowledge and examples of how to take action in these areas
- Helping them to deal with their problems and restoring hope

The data indicates that FilmAid has had an impact on knowledge and behaviour change. In the areas of reproductive health, family planning, HIV/AIDS and gender equality, the research finds:

- A marked increase in level of knowledge of family planning, HIV and testing for HIV; and a perceived positive impact in these areas.
- Greater knowledge of gender issues among respondents who were exposed to FilmAid films (had attended a daytime and/or evening screening) than those who had no exposure to FilmAid. For example, knowledge of rights of widows and inheritance issues; of whether or not aid workers are allowed to have sexual relations with underage girls; of whether a girl/woman can get pregnant by having sex one time without protection. The majority of the respondents also indicated greater willingness to discuss these issues.
- A perceived positive impact on women's quality of life and attitudes towards women: "For example, more than 50% of respondents feel FilmAid films have increased women's participation in the community and respondents indicate their attitude towards women's issues has been positively affected. Seventy percent believe that FilmAid films have made a positive impact on attitudes toward female education" (p. 16).

The study also revealed some negative effects of FilmAid programmes. Safety and security related to evening screenings was a key issue, in particular men taking advantage young girls during such occasions. The report recommends that FilmAid directly address this issue and others, such as domestic violence, in their programming.

Solórzano, I. et al., 2008, 'Catalyzing Personal and Social Change Around Gender, Sexuality, and HIV: Impact Evaluation of Puntos de Encuentro's Communication Strategy in Nicaragua', The Population Council Inc.

http://www.puntos.org.ni/sidoc/descargas/marketing/materiales/investigaciones/SDSI_impact_evaluati on.pdf

Puntos de Encuentro is a feminist NGO in Nicaragua that works with women's and youth groups and engages in 'progressive social change'. This report evaluates its 'Somos Diferentes, Somos Iguales (SDSI) project (2002-2005) that aimed to promote young people's rights and individual and collective empowerment, particularly in relation to sexual and reproductive health, gender-based violence and rights issues. The NGO's activities combine mass media 'edutainment' programmes, capacity building and networking. They include:

- A weekly television soap opera, broadcast on national commercial and local cable stations, which addresses sensitive topics such as sexuality.
- A live nightly radio call-in show, broadcast on national and local radio stations, which discusses and debates issues similar to those addressed in the television series.
- A multi-media campaign and a series of regional workshops with the slogan, 'We need to be able to talk', in order to promote discussion on taboo subjects.
- Youth leadership training and capacity building, focusing on skills relevant to issues of gender, stigma, discrimination and gender-based violence.
- Coordination with youth organisations and national and local journalists.
- Educational pamphlets and flyers, resource packs, and billboards.

The evaluation finds that exposure to the SDSI project was widespread. "The survey findings indicate that greater exposure to SDSI led to positive changes on a population level. The intervention resulted in a significant reduction of stigmatizing and gender-inequitable attitudes, an increase in knowledge and use of HIV-related services, and a significant increase in interpersonal communication about HIV prevention and sexual behaviour. Qualitative findings indicate that SDSI played an important role in promoting community-based dialogue on key topics, strengthened youth leadership, and fostered alliances between organizations. The data suggest that greater exposure to SDSI has positive effects on interpersonal communication, which in turn helps people perceive their own personal risk of contracting HIV, and provides greater capacity for individuals to address the issue of prevention with their partners" (p. 2) The results suggest the importance of addressing social contexts and processes in order to affect individual behaviours.

Rattine-Flaherty, E. and Singhal, A., 2009, 'Analyzing Social Change Practice in the Peruvian Amazon through a Feminist Reading of Participatory Communication Research', *Development in Practice*, vol. 19, no. 6, pp. 726-736

<http://utminers.utep.edu/asinghal/Articles%20and%20Chapters/flaherty-singhal-2009-DIP-Feminist%20readings%20of%20participatory-research-1.pdf>

Communities in the Peruvian Amazon face various social and health problems, in particular lack of access to health care; high pregnancy rates and low life spans for women; gender-based violence; and gender inequity (women are considered subservient to men, have little education, and have minimal say on issues that affect their welfare, such as number of children to have). The NGO Minga Perú operates in the Region of Loreto and addresses health and gender issues. Its activities include a radio series (see following article) and community-based interventions facilitated by local women leaders. These latter interventions, the focus of this paper, have included participatory sketches or photography that allow participants that have often been marginalised to communicate and express themselves. This is particularly relevant for women who have traditionally been shy to engage in public forums due to lack of education or low self-esteem. Participatory approaches have thus encouraged the alternate discourses and empowerment of women. The narrative that accompanies the visual has triggered wider storytelling, reflection and discussion. A dominant theme and narrative has been domestic violence. In addition to discussion, women made collective decisions on how to eliminate it from their homes.

The paper argues that "in contrast to large-scale, campaign-style approaches to changing individual attitudes and behaviours, participatory methods – such as sketching and photography – allow

individuals and communities to own both their social problems and the solutions that they hope to construct. Participatory research methods can offer opportunities for raising critical consciousness among individuals and communities about societal realities” (p. 733). They entail risks and responsibilities, however, as they are more likely than traditional survey interviews to lead to ‘emotionality’ – heightened anger, shame and resentment. It is essential to invest extensive time and energy to build relationships and trust and to create a ‘safe’ space in which to interact.

Durá, L. and Singhal, A., 2008, ‘Listening and Healing in the Peruvian Amazon: An Assessment of Minga Peru’s Intercultural Radio Educative Project to Prevent and Control Domestic Violence and HIV/AIDS’, Project Assessment Submitted to Minga Peru
http://utminers.utep.edu/asinghal/technical%20reports/FINAL-Revised_July-8-2008-singhal-dura-minga-UNIFEM%20report.pdf

This paper describes an assessment of the work of Minga Perú, focusing on its participatory health education radio programme, *Bienvenida Salud*. This programme was part of the Intercultural Radio Educative Project against violence and HIV/AIDS in rural communities and schools (2006-2008). The thrice-weekly radio programme is designed to entertain and educate to increase listeners’ knowledge about reproductive health, sexual rights and gender equality; to encourage favourable attitudes and shifts in norms; and promote changes in behaviour. The language used is simple, and technical terms are avoided. *Bienvenida Salud* incorporates catchy jingles, music, informational spots, testimonials and contests to enhance audience appeal.

Minga adopts a ‘culturally respectful, participatory communication framework’ that emphasises listener participation: “Minga views its listeners not as passive consumers of the programme but rather as active producers” (p. 8). The programme’s stories are based on real-life events, usually those sent to Minga by listeners (a free postal service is provided). This allows Minga to incorporate audience-specific content, language, culture and concern, and to veer away from a prescriptive “do this” tone. By mid-2008, the organisation had received over 10,000 audience letters.

Participatory communication is also encouraged through the use of on-the-ground community resource persons (community *promotoras*) and school-based initiatives, involving teachers, students and community members). This includes training several students as radio correspondents, in charge of encouraging youth in their respective communities to listen to *Bienvenida Salud* and provide feedback and ideas for new subjects to cover. They played a big role in spurring letter-writing; and voiced a sense of pride in having been selected to play this role. Teachers received training to integrate issues of domestic violence and HIV/AIDS into school curriculum, which they considered useful in terms of their professional development and networking. They found that student-centred classroom dialogue was the most successful form of communication, followed by debate, dramatization, poster making, role playing, and problem solving among others. Other community activities included income-generating activities aimed at allowing women to exercise their right to live a healthy and productive life, free of violence; and to gain self-esteem.

The assessment survey found that the show had high listenership among teachers and students; listenership was higher among rural students than urban students, which was in line with the goal of the NGO to reach rural communities. The assessment found that the Intercultural Radio Educative Project had made a positive impact in the lives of participating communities. Discussion forums revealed, for example, that many students noticed changes – both ideological and behavioural – in male-female and parent-child relationships.

3. Sectoral gender communication initiatives

Health and Family Planning

White, V., Greene, M., Murphy, E., 2003, 'Men and Reproductive Health Programs: Influencing Gender Norms', Commissioned by USAID

http://www.usaid.gov/our_work/global_health/pop/news/gendernorms.doc

This review describes fourteen programmes designed to change social norms related to gender roles. Addressing gender norms and expectations is considered essential to promoting behaviour change. Key themes emerge from the review:

- Initiatives that aim to affect gender norms as a goal in itself are still relatively new. It is only in the last decade that they have become a significant subset of programming in the global health arena.
- Substantive evaluations of programming are not common. As such, it is unclear whether attitudinal changes reported by participants of studies are sustainable. Even less common are evaluations that go beyond health outcomes and specifically report the programme's effect on gender norms.
- Health programmes can affect social norms related to gender roles indirectly, even if they do not directly aim to address them, as gender norms are linked to all facets of health behaviour. Programmes designed to address gender-based violence, for example, may include a short module on gender roles and challenging contemporary definitions of masculinities.

The review provides an example of how inadequate consideration of gender as a determinant of health can reinforce negative gender norms: "between 1993 and 1994 in Zimbabwe, the Male Motivation and Family Planning Campaign affected many Zimbabwean men. The planners integrated language from competitive sports and images of local soccer heroes into some of the campaign's materials. As intended, the messages appealed to the male target audience and contraceptive use increased. The action-oriented and assertive imagery and messages reinforced gender stereotypes, however. According to surveys, not only did men become more interested and involved in selecting a family planning method, men tended to dominate and even assume full responsibility for this decision. Rather than endorsing shared decision-making between both partners in a couple, the mass media campaign had the effect of sanctioning and encouraging male-dominant behaviour" (pp.1-2).

The document provides a matrix of programmes reviewed that summarises their objectives, methods, audience, evaluations, successes and challenges (see pp. 41-44).

Adams, S., 2009, 'Social Marketing for Health and Family Planning: Building on Tradition and Popular Culture in Niger', German HIV Practice Collection - German Development Cooperation (GDC)

<http://www.german-practice-collection.org/en/successful-programmes/sexual-health-and-rights/social-marketing-for-health-and-family-planning>

This study examines the social marketing methods used by the Association Nigerienne de Marketing Social (Animas-Sutura) in Niger to address issues of sexually transmitted infections (STIs), HIV/AIDS, reproductive health and family planning. Social marketing is seen here as the use of commercial marketing methods to target messages to particular segments of society in order to increase knowledge, change attitudes and promote particular practices.

Social marketing of condoms was originally rejected in Niger in the 1990s when Muslim clerics opposed and destroyed billboards with ads for condoms, claiming that they were an attack on the culture of the society. There has, however, since been growing public recognition of the need to prevent the spread of HIV and reduce the rate of population growth.

Animas-Sutura aims not only to make condoms and other family planning and health products more accessible, but also to change attitudes and behaviour through information, education, skills and constant reminders. It has adopted the following innovative communication methods in Niger:

- Relying on tradition and popular culture to avoid historical rejections, the campaign chose for the name and symbol of its condoms the traditional founla had, which is known for the excellent protection it provides against the sun. Market research demonstrated that people could easily make the connection that Founla condoms protect against unwanted pregnancy and disease.
- Television spots and songs featuring popular entertainers. They addressed the importance of condoms in preventing STIs, HIV and unwanted pregnancy; and issues of family planning and spacing pregnancies. This medium was adopted to target youth in urban areas. The songs could also be played on the radio, which could extend the reach to youth in rural areas.
- Radio sketches in Niger's three most widely spoken languages. Each episode was a mini-drama designed to inform and provoke thought about: risky sexual behaviour and unwanted pregnancy, when to use condoms, how to negotiate with partners; early marriage and forced marriage; and the spacing of births. Radio broadcasters, NGO staff and volunteers, and school teachers were trained to develop the skills to facilitate discussion and debate subsequent to radio broadcasts.
- Postures, brochures, banners, clothing items
- Live events, such as street theatre and parades

An assessment of the radio sketches made the following findings:

- In addition to reaching youth, the series had also reached parents and stimulated discussion within families.
- Girls and women had been less engaged than boys and men because men tended to control the few radios (often battery-operated) in rural villages and fewer girls attend school.
- Radio broadcasters and others tasked with facilitating discussion were often ineffective in this role.
- Radio reception was often too poor to hear the sketches.

The assessment recommended a second radio series that targeted not only youth but also rural women, truck drivers, sex workers and military recruits. The themes were expanded to cover: advancing women's rights; ending genital mutilation; stopping sexual harassment and degradation; ending forced marriage and child marriage; providing girls with schooling; encouraging sexual fidelity within couples; discouraging early sexual relations; and de-stigmatising people living with HIV.

This second series was broadcast on more radio stations and accompanied by increased radio debates and organised discussions. More extensive training and guidance was provided to discussion facilitators. Women's groups were also organised and trained in this role. In order to address the problem of radio access, women in villages were given solar powered radios with wind-up options (Freeplay Foundation).

Key lessons learned from experiences in Niger and the work of Animas-Sutura are (extracted from pp. 33-34):

- Anticipate the worst. The failure of an earlier social marketing project provided fair warning and strong incentive for the current project team to advance with caution and do its best to befriend potential opponents and never offend them but, if offence occurs, act swiftly to make amends. Building on tradition and popular culture and having a traditional chief as an active member of its board have been two ways of doing this.
- Build on tradition and popular culture. From the outset, the project has used tradition and popular culture to such great advantage that they might even be considered keys to its success. Grounding the project in tradition has made conservatives feel comfortable and using popular culture has made it possible to get the project's messages across to sexually active young adults, the group most in need of hearing those messages.

- Engage professionals in marketing and mass communications. Marketing and mass communications are areas of professional expertise. Communications campaigns cannot be done effectively as a quickly learned sideline by experts in other fields.
- Engage experts in reproductive health, human rights and education. Ensuring that communications are accurate, convey the intended messages and are effective means of educating target populations (e.g., rural women) and changing their behaviour requires expertise in the subject matter and in ways of getting the subject matter focused, packaged and delivered.
- Engage many partners and make communications interactive. Getting the project's messages across, so all sexually active youth and adults will truly hear them and act on them, requires the interactive engagement of masses of people. Doing that and also getting condoms and other products into the hands of those people would not be possible without a strategic range of active partners, including community-based NGOs and private businesses. The engagement of those partners also gives them a stake in the project and good reason to become its enthusiastic supporters and advocates.
- Recruit strong and active founding members and board members. The founding members and board of Animas-Sutura provide it with expert oversight and input and also with credibility and influence. Their active engagement helps keep the project on track and moving forward, winning the support of government, other partners and all elements of the general public including traditional chiefs and religious leaders.
- Establish a solid base of evidence and keep building on it. "Know your epidemic" has become a mantra for results-driven AIDS activists but it can be broadened to "know your issue" and be an equally good mantra for activists in the fields of sexual and reproductive health, family planning and human rights. It points to the needs to glean the most comprehensive, reliable and up-to-date information possible from existing study reports and other documents, to identify needs for additional information and to design and implement studies that gather that information.
- Strive for excellence in training, tools and supervision. A challenge for the Social Marketing Project will always be to improve the training of its own staff and the staff and volunteers of partner organizations, to improve the tools they need to do their jobs well and to monitor and supervise their activities and, thus, provide quality control in the project's interactive communications and marketing. The challenge is made that much greater by the project's reliance on so many people who are only contributing small portions of their working time to the project and who must be trained quickly and then work on their own much of their time, without benefit of having served apprenticeships where they work alongside more experienced people. The project's continuing efforts to improve its monitoring and evaluation tools will serve it well in this regard.
- Keep the messages fresh and frequent. Social marketing is like any other kind of marketing in that it is most effective when its messages are kept fresh and frequent so that people always find them interesting and, above all, so they act on them.

Bushee, J. and Brice, K., 2008, 'Gender Development Project Review Report: Kenya and Indonesia', STOP AIDS NOW!, Amsterdam

http://www.stopaidsnow.org/documents/GDP%20Review%20report_final.pdf

This report discusses the Gender Development Project (GDP), implemented in Kenya and Indonesia to address the greater vulnerability of women and girls to HIV/AIDS. Workshops were held to establish local coalitions in each project; and local groups were invited to submit proposals for HIV prevention activities that integrate promotion of gender equality and human rights. Communicating such an integrative approach to beneficiaries was a challenge for some groups, particularly in Indonesia. The community may find it difficult to see how HIV is connected to gender inequality; and gender equality can be viewed as too threatening in patriarchal societies. In addition, community members can be put off by discussions of HIV when dialogue turns to sex. Groups in Indonesia and

Kenya developed successful strategies to address difficulties in introducing and/or discussion GDP issues with their beneficiaries. These tactics contribute to lessons learned (see pp. 27):

- Use of tangentially relevant entry points for dialogue with communities helps lead into discussions on HIV/AIDS. Such entry points include such issues as economic empowerment, education and religion. The use of such entry points also help get men and boys become involved in discussions. In schools, entry points include discussions around school-related problems, then easing into personal and family problems, and finally, addressing relationship and sexual issues, including HIV. Drama clubs and debates have also been used to address GDP issues.
- It is important to involve men and boys from the start of an activity. This helps create greater acceptance of the activity, and to ensure their overall greater participation as well as that of women and girls.
- It is important to integrate activities that address the economic well-being of beneficiaries. The struggle for day-to-day survival still hampers the involvement of women (and men) in awareness raising activities around HIV/AIDS. This point is especially relevant in relation to women living with HIV.
- The involvement of community leaders such as teachers, cultural custodians and government officials in projects is key to the greater impact and sustainability of the changes the GDP is seeking to achieve. They played an important role in GDP projects. Such leaders have the influence to promote and/or implement change and the legitimacy and respect of communities to influence their thinking and behavior.

The report finds evidence that “the GDP has promoted more egalitarian gender-based attitudes, behaviour and norms and in increase in awareness of and concern for women’s rights” (p. 5). Such changes have occurred at the individual and community levels. Based on the assumptions of the GDP, it can be assumed that this has contributed to a more enabling social environment for reducing HIV/AIDS infections rates. In particular (see p. 5):

- There were many examples of the outspokenness of community leaders, such as teachers, cultural custodians and government officials involved in activities, on negative practices as wife inheritance, early marriage and violence against women, all of which make women more vulnerable to HIV: “Their changes in attitude have had a palpable effect on the attitude and behavior of their constituencies towards such issues”.
- Greater knowledge and awareness of Project beneficiaries has led to increased denunciations against violence against women, more individuals undergoing HIV testing, and higher condom uptake and negotiation. These changes have also contributed to further behavior changes, such as greater sharing of domestic duties and changes in gender roles.
- There is also evidence there is a greater increase in open dialogue in target communities regarding sex, HIV and condoms. This rise in dialogue appears to be linked to a rise in self-confidence, particularly among women.
- The gender equality and rights-based approach of the Project has resulted in positive effects, such as an increase in dialogue and advocacy in beneficiary communities around women’s rights, including the right to inherit and own land. In addition, there has been an increase of women in leadership positions and seeking and aspiring to leadership roles.

Gender-based Violence

Usdin et al., 2005, ‘Achieving Social Change on Gender-based Violence: A Report on the Impact Evaluation of Soul City’s Fourth Series’, *Social Science and Medicine*, vol. 61, no. 11, pp. 2434-2445

http://econpapers.repec.org/article/eesocmed/v_3a61_3ay_3a2005_3ai_3a11_3ap_3a2434-2445.htm

The report discusses the impact evaluation of the fourth series of Soul City, which focused on domestic violence. Soul City is an edutainment intervention, whereby social issues are integrated into entertainment formats (television episodes, radio drama, full-colour print booklets). Edutainment has been shown to be a powerful mechanism to achieve social change objectives. It allows for audiences to experience and relate to the lives of characters, provides for role modeling of positive norms, attitudes and behaviours, including individual and collective efficacy. For the fourth series, a partnership was formed between Soul City and the National Network on Violence Against women, which provided a platform for community mobilisation and support. At the societal level, the initiative advocated for the implementation of the Domestic Violence Act. At a community level, the Fourth Series aimed to create an enabling environment that allowed for dialogue, collective efficacy and action to shift social norms, increase supportive behaviour and connect people to help. At an individual level, the intervention aimed to increase knowledge and awareness, personal attitudes, self-efficacy, intention to change, and behaviours. The partnership set up a toll-free helpline to support audiences. This helpline was built into the Soul City drama and advertised in all materials.

The evaluation found that Soul City successfully reached 86%, 25% and 65% of audiences through television, print booklets and radio, respectively. On an individual level, there was an increase in knowledge, including about the helpline, and a 10% increase in respondents disagreeing that domestic violence was a private affair. This is significant as the perception of domestic violence as a 'private affair' is considered a key barrier in countering domestic violence. At the interpersonal and community level, qualitative analysis suggests the intervention contributed to enhancing women's and communities' sense of efficacy, enabling women to make more effective decisions about their health and facilitating community action. The helpline connected women to help and received numerous calls. The evaluation did not show a link between Soul City and domestic violence behaviour. This, however, could be in part due to insufficient sample size. Nonetheless, exposure to Soul City was associated with positive behaviour of 'doing something' to counter domestic violence.

Despite the positive results, the report stresses that it is unrealistic to expect a six month intervention to bring about large, lasting changes in society; the intervention is thus viewed by Soul City as an ongoing process. Key factors that contributed to the success of Soul City series four include:

- the extensive formative research which resulted in the ability of the mass media material to resonate with audiences
- the partnership of popular mass media and the social advocacy of a national coalition and related support structures. This, however, was also challenging in terms of combining different agendas and needs to get coherent action.

Molony, T., Konie, Z. and Goodsmith, L., 2007, 'Through Our Eyes: Participatory Video in West Africa', *Forced Migration Review*, vol. 27, pp. 37-38
<http://www.fmreview.org/FMRpdfs/FMR27/24.pdf>

This brief report discusses the 'Through Our Eyes' participatory video initiative, piloted in Guinea and Liberia, designed to raise awareness of and help prevent sexual and gender-based violence (SGBV) in conflict-affected communities. Participatory video activities, from production to public screening, are driven by individual community members. Themes and topics are relevant to local audiences and presented in culturally appropriate ways. Such community videos help survivors of sexual and gender-based violence involved in the production process to tell their own stories, shed some of the stigma associated with their experience and help others. They also benefit from learning new technical, interpersonal and team skills. The participatory process strengthens a sense of community as teams reflect together on the kinds of violence that have affected their lives, the messages they want to deliver and how best to deliver them. The videos are effective tools for awareness-raising, promoting community dialogue and encouraging the reporting of incidents. After the screenings, which are usually attended by 30 to 100 people, audience members are encouraged to discuss the issues raised. Some share personal stories or offer ideas on how to tackle the problems.

Early Marriage

Freij, L. S., 2010, "Safe Age of Marriage" in Yemen: Fostering Change in Social Norms - A Case Study', USAID, Extending Service Delivery (ESD)

http://www.pathfind.org/site/DocServer/ESD_Legacy_Child_Marriage.pdf?docID=18744

This paper describes the 'Safe Age of Marriage' programme, implemented in Yemen by the Extending Service Delivery (ESD) Project, in partnership with the Basic Health Services (BHS) Project in Yemen and the Yemeni Women's Union (YWU). The programme was community-based and aimed to end child marriage (marriage before age of 18) and improve the poor health and social outcomes of young girls by changing entrenched social/gender norms about the value of the girl child and the importance of girls' education.

The programme trained community educators to engage in outreach activities. Participants attended participatory training workshops that were interactive and challenged them to re-examine socio-cultural and religious norms and practices related to child marriage. The workshops aimed to strengthen facilitation skills; expand knowledge on Islam's perspectives on child marriage, education and family planning; and increase awareness of the emotional/psychological consequence of child marriage. Each community educator was then responsible for holding a minimum of four awareness-raising sessions per month, using a range of techniques, such as: discussions, role-plays, storytelling, poetry recitations, and debates. The sessions were held in schools, literacy classes, health centers, mosques and other social venues. Activities in schools included school plays, magazine and essay competitions on the health and social consequences of early marriage and importance of education. Community educators also organised monthly fairs, mobile clinics, information booths, radio messages, newsletters and screenings of a local movie about a Yemeni girl who was married off at a young age and died in labour. The film was followed by a facilitated discussion.

Outcomes of the outreach interventions include:

- An 18% increase in awareness about the benefits of delaying marriage
- The postponing/prevention of 53 girl-child and 26 boy-child marriages
- Buy in by leaders: the Ministry of Religious Affairs in Amran asked all religious leaders to disseminate messages on the health and social consequences of child marriage in their Friday sermons

Key challenges and lessons learned include (extracted from p. 4):

Programme Planning

- Maximize reach through collaboration with government initiatives: Coordinate the startup activities, especially the dates of training workshops with major government activities. An overlap with the Ministry of Health's national vaccination campaign and political elections delayed the training workshop, as community educators and YWU coordinators were involved in the campaign and elections.
- Promote local buy-in: Work through local and national organisations to counter local suspicion about the motives of foreign aid in supporting changes in social habits. Actively engage religious leaders, the main gatekeepers in rural communities, to increase the acceptance of the project.

Cultural

- Counteract gender inequities by addressing special needs of female community educators: Since Yemen is a patriarchal society and enforces gender segregation, the female community educators were reticent to ask questions and voice their concerns during the training workshop. Their literacy skills and basic knowledge on reproductive health and family planning were lacking, as compared to their male counterparts.
- Incorporate outreach activities that build on cultural preferences: Male community educators used poetry to convey the harmful social and health consequences of child marriage, whereas female educators used stories.

Political

- Minimize political and religious opposition: Make the effort to select community educators who belong to the major political parties in the country. Become familiar with the arguments for and against the child marriage and rights of the girl child to minimize the politicization of the issue and accusations such as: "This is a western project", "they want to spread sin", and "they want to limit the Muslim population."
- Engage political leaders in basic project messages: Share the negative social and health consequences of child marriage with political leaders and parliamentarians.

Capacity Building

- Strengthen capacity of implementing agency: Take the time to assess the knowledge and skills of the staff, especially planning, implementing, monitoring and supervising project activities. Develop a step-by-step guide, including checklists, to improve the efficiency and effectiveness of YWU coordinators. Work with implementing agency to appoint a full-time project coordinator at the implementation site to supervise and monitor senior YWU coordinators overseeing the project activities of community educators. Replace traditional/hierarchical supervision with supportive supervision.
- Strengthen facilitation skills of community educators: Train community educators on a range of facilitation techniques to use when disseminating their messages to lessen message fatigue on child marriage.

4. Communication initiatives targeted at men and boys

Barker, G., Ricardo, C., Nascimento, M., 2007, 'Engaging Men and Boys in Changing Gender-Based Inequity in Health: Evidence from Programme Interventions', World Health Organization, Geneva

http://www.who.int/gender/documents/Engaging_men_boys.pdf

This review assessed the effectiveness of programmes seeking to engage men and boys in achieving gender equality and equity in health. One of its key findings is that group educational activities, one of most common programme approaches for men and boys, is effective in leading to changes in attitudes and in some cases changes in behaviour. The category of group education is broad and can encompass traditional styles of rote learning or participatory methods, such as role-playing, guided imagery, case studies and 'what-if' activities. The aim is to promote critical reflection on how gender norms are social constructed. It may be challenging to get men involved in such activities due to their work commitments or initial belief that discussion groups are 'female' styles of interaction. Once they become involved, however, studies have shown that they find the group work useful and relevant to their needs. Activities should reflect on how gender norms affect their own lives.

The review also finds that community outreach and mass-media campaigns (e.g. radio, television, billboards) have changed attitudes and behaviour, with positive results for men, their partners, their children and their families. These programmes have often been short-term, however, due to inadequate funding. Efforts should be made to research the benefits of scaling up interventions. The review outlines good practice in the area of community outreach and mass-media campaigns (e.g. radio, television, billboards). Effective and promising campaigns and outreach have:

- Used positive, affirmative messages showing what men and boys could do to change. Characters in theatre, television shows, radio dramas or print materials are seen changing or acting in positive ways. Men or couples are portrayed as happy, indicating the benefits of changing. Other campaigns have appealed to men's sense of justice or desire to provide care for their partner and/or children.
- Engaged in extensive and sometimes costly formative research to test messages, develop characters or storylines. This is best done in consultation with members of the target group.
- Identified groups of men or individual men who influence the behaviour of other men, including coaches, fathers, religious leaders and celebrities.
- In some cases, involved high cost and high-quality media content, including commercials, soap operas or television and radio dramas with professional actors and technicians.

Although costly, they have tended to reach the highest number of men and boys (and women and girls).

- In some cases, targeted specific groups of men and boys (e.g. married men, men as fathers).
- In some cases, targeted a single type of behaviour or issue (e.g. use of condoms). There are examples, however, of how focusing on a single issue without talking about gender equality broadly has been problematic. While men have paid more attention to family planning, they have done so in a gender-inequitable way. Thus, it may be preferable to include specific health issues with broader messages related to gender equality
- Adopted a mix of interventions, such as combining individual-based or group-based programmes (counseling or group education) with mass media and/or community campaigns. While mass-media campaigns show strong evidence of sustained change in attitudes and behavioural intentions, they contribute to sustained behaviour change when combined with more interpersonal activities.

Interagency Gender Working Group, 2003, 'Three Case Studies: Involving Men to Address Gender Inequities', Prepared under the auspices of the Interagency Gender Working Group, Subcommittee on Men and Reproductive Health

<http://www.prb.org/pdf/InvolvMenToAddressGendr.pdf>

This report presents case studies of three programmes that aim to bring about social change by acknowledging and bringing out the linkages between individual behaviour and community norms. Although the programmes have not been formally evaluated, they provide useful models of social change, including how to involve men in social change.

Salud y Género's Work in Mexico: Salud y Género's work in gender education and advocacy promotes equity in mental health and reproductive health through workshops and group activities that involve men, women and mixed groups. The aim is to raise awareness of and to diminish the negative effects of male socialization on the health of men and women, which is often poorly understood. Workshops are based on dialogue, experience sharing and reflection. They have adopted various exercises that deal with male socialization and men's health, e.g. 'The Time Tunnel', whereby participants go back in time and review their lives to discover specifics that have made them the way they are. Workshops also look for less controversial discussion topics that can serve as an entry point to discuss topics such as violence, alcohol, sexuality and equality. The topic of 'fatherhood' has often been effective as a point of intervention for strengthening equitable relationships through sharing in childcare.

Society for Integrated Development of Himalayas (SIDH)'s Work in northern India: SIDH's strategies are founded in the belief that people are motivated to change only if they see a personal gain in their effort. Their methods comprise a four-day training module for staff and youth. Day one provides an introduction to the concepts of 'gender' and 'sex' and provides statistics on discrimination; day two aims to reach participants on a deeper cultural and emotional level, using popular idioms, traditional songs, films, exercises and discussion; day three focuses on reproductive health through discussion in separate groups followed by discussion on socio-cultural aspects and role-plays with all groups combined; and day four looks at how these issues are linked to personal responsibility, leadership and justice. SIDH engages in longer term support in order to encourage personal changes. Youth supervisors visit villages at regular intervals after the training to meet with young participants and to provide refresher courses.

Stepping Stones: Stepping Stones is a communication, relationships, and life skills training package with a focus on reproductive health and HIV prevention that has been used throughout Africa and Asia. It is a community-based programme and begins by meeting with community leaders to explain the purpose and process and to obtain support. Community leaders may then call a community meeting for members to learn about Stepping Stones and be invited to participate. This is followed by a series of workshops (training packages include a manual with exercises and games and a video) for peer groups divided by age and sex (older men, older women, younger men, younger women). Sessions with all the peer groups are held at regular intervals in order to share ideas in a structured way. The whole community ultimately meets to watch a drama created by peer groups and to hear the 'requests for change' in the community from each of the peer groups. Positive outcomes have been reported in the countries reviewed:

- Increased knowledge of reproductive health issues and enhanced communication skills: Workshops provided a forum for sexual issues to be discussed openly for the first time. They also improved communication skills for men and women; women were better able to express themselves in public and men were better able to speak openly and resist peer pressure.
- Improved gender, inter-generational and peer relationships: The ability of individuals to change their sexual behaviour is determined not only by knowledge and skills but also by gender relations and peer, family and community influences. “Participants in Stepping Stones reported better gender relations— greater equality, mutual respect and empathy, increased respect for women’s rights, sharing of household work, and improved sexual relations— as a result of improved life and communication skills and the ability to talk about sexuality” (p. 52).
- Changes in behaviour: The changes above have in turn contributed to changes in behaviour, including reduction in conflict, gender violence and alcohol consumption; increased practice of safer sex; more equitable sharing of household resources and discussion on household expenditures.

Factors contributing to the effectiveness of Stepping Stones include (see pp. 55-57):

- Working in Separate Peer Groups: Participants reported that working in peer groups separated by sex and age enabled them to identify their needs, analyze causes of problems, look for solutions, and decide what issues to share with other groups. Working in peer groups also enables men and women, young and old to freely discuss sensitive sexual issues without domination, accusation or derision.
- Valuing Different Perspectives—the “Fission And Fusion” Process: Peer groups meet together three times for structured dramatic presentations to each other and discussion. During this process, facilitators, who ideally are the same sex and age as their groups, openly acknowledge and value different perspectives rather than downplaying differences to reach an artificial consensus. The review showed that the “fission and fusion” approach, in which peer groups share perceptions and learn to communicate better across sex and age lines, is critical to attitude and behavior change.
- Participation of Partners and Family Members: Communication between couples is most likely to improve if both partners attend Stepping Stones.
- The “Special Request” Strategy: The Stepping Stones process culminates in a final meeting where each peer group makes a “special request” for change to the whole community. The community then has to accept or reject the request. The special requests are an effective tool because the community is an important social structure and acceptance makes the requests binding. In Uganda, older men, who had previously waited outside schools to pick up girls and take them to bars, stopped doing this as a result of dramatization and the “special request” at one such meeting.
- Positive Peer Pressure: Working in peer groups, bringing the peer groups together, the community drama, and requests and agreement on acceptable behavior—these things together establish positive peer pressure.
- Comprehensive and Participatory Approach: The participatory approach of Stepping Stones is key in making participants feel valued and respected.
- Experiential, Enjoyable, and Interesting Learning Activities: In all countries, participants most frequently mentioned role-plays, drama, songs, and drawing as activities bringing about change. Performing arts are not only entertaining and educational, they allow people to express themselves and to practice what they have learned. Role-plays help participants to practice communication in difficult situations and can be replayed using new skills to result in a different outcome.

Challenges to Effective Implementation include (see pp. 58-63)

- **Persuading Men to Attend:** It is difficult to motivate men to attend, especially men who most need to change their attitudes and behavior. Suggested strategies for involving men include using male community leaders and mobilizers to promote Stepping Stones to men.
- **Men's Resistance to Women's Participation:** In some countries, men were opposed to women participating. In most cases these were men who were not themselves participating.
- **Getting Both Partners and Younger and Older People to Attend:** Getting both partners to attend is also a challenge. Often a significant barrier is lack of childcare.
- **Attracting the Poorest and Most Marginalised Groups:** Often, it is the better-off literate young men participated as poorer men cannot afford the time away from work.
- **Ineffective Community Meetings:** Making sure that the final community meetings are effective can also be a challenge. Older men tend to speak most, which is frustrating for other groups. The dramas created for the final meeting can cause conflict because of the nature of the special requests and the fact that many in the audience have not participated in Stepping Stones.
- **Difficulty Sharing Knowledge Within the Community:** Some participants were hesitant to share their new knowledge with others, because they lacked credibility as educators. The perception of non-participants was that the participants had "superior attitudes" and were unwilling to share information
- **Sustaining Change:** Sustaining change is critical, but the extent to which different communities have been able to do this has varied.

Clark, S., 2010, 'Extra-Marital Sexual Partnerships and Male Friendships in Rural Malawi', Max Planck Democratic Research Institute, Heidelberg, Germany
<http://www.demographic-research.org/volumes/vol22/1/22-1.pdf>

This study finds that men who believe that their best friends had extra-marital sexual relationships (considered a key route to HIV/AIDS transmission in sub-Saharan Africa) are significantly more likely to themselves report having had such relationships. The correlation reflects men's beliefs about their friends' behaviour rather than actual behaviours. The study also finds that men who have friends who behave differently from themselves are more likely to change their behaviour with respect to extra-marital sexual relationships than are men who report the same behaviour. It may thus be effective to target individuals within men's social networks to disseminate messages about the risks of concurrent sexual relationships. It may also be beneficial to reach out to opinion leaders either inside or outside men's existing social networks to disseminate these messages.

C-Change, 2009, 'Incorporating Male Gender Norms into Family Planning and Reproductive Health Programs', Guidance Brief, Communication for Change, USAID, Washington, DC (4pp)
http://www.c-changeprogram.org/sites/default/files/Gender%20Norms%20Program%20Brief%20Nov09%20FINAL_0.pdf

This brief aims to provide family planning and reproductive health (FP/RH) programme planners and implementers with suggestions for how to incorporate activities that address male gender norms. It discusses a WHO-sponsored study that reviewed various strategies and interventions to address gender norms. Strategies reviewed are:

- Encouraging equitable communication, joint decision-making, and shared responsibility for FP through couple counselling.
- Encouraging men to critically reflect on gender norms and their impact on FP behaviours and outcomes through participatory group education or other participatory community activities.

- Addressing notions of gender in FP through community channels of communication such as participatory theatre or community dialogue.
- Portraying gender-equitable role models through mass media.
- Promoting the norm that 'real men' are no longer obstacles to FP through role models, such as model couples.
- Engaging men's involvement in the health and well-being of the family through fatherhood programmes.

The study finds that interventions that accommodated male gender norms, such as approaching men as gatekeepers and encouraging them to endorse contraceptive use, have not challenged inequitable power dynamics that favour men and limit women's ability to make decisions.

The brief presents evidence-based recommendations to guide FP/RH programmers in adopting a male gender norms component:

- Complete a detailed gender analysis, which identifies gender roles, differential access to resources structural factors, and apply this to programme development.
- Adopt methods that can be scaled up: while small group formats give men a safe space to critically reflect on prevalent male gender norms, they can be time- and labour-intensive and difficult to scale up. Attention should be paid to less resource-intensive efforts, such as group education and the use of mass media to stimulate dialogue and reflection, for example, promoting positive images of masculinity through radio or television programmes.
- Promote dialogue among sexual partners: Programmes, like the 'Together for a Happy Family' project in Jordan, have created opportunities for sexual partners to communicate about family planning and reproductive health through counselling, group sessions, and other activities, in combination with, in this particular example, a national multi-media campaign to encourage couple communication and dialogue.
- Promote dialogue within communities: group education workshops, community theatre, or mass media can reduce stigma, facilitate learning, create a more supportive environment for positive health-seeking behaviour, and trigger collective action.
- Design multi-component interventions: interventions designed to include multiple components (e.g., group education workshops combined with mass media campaigns; or theatre combined with community dialogue sessions) have been shown to be more effective in improving outcomes than single component interventions.
- Engage men in FP/RH through other sectors: integrating FP/RH into other sectoral and life skills training can attract the participation of men and change perceptions. A project that integrated FP topics into ongoing educational sessions related to the building of water systems and latrines, for example, showed an increase in contraceptive knowledge, gender-equitable FP attitudes, and partner communication about FP.
- Research the effect of programmes on attitudes, beliefs, and behaviours in the long-term as well as the short-term.
- Build organisational capacity in implementing male gender norms programming in FP/RH.

Khanyile, N., 2008, 'Building the Capacity of Traditional Leaders, Government and Civil Society to Involve Men and Boys in Achieving Gender Equality', Sonke Gender Justice Network's Report to the Ford Foundation on One Man Can Campaign Activities Carried out July 1, 2007- June 30, 2008

<http://g3p.aidstar-one.com/service/download.php?id=388&name=on%20eman%20can%20Sonke-Narrative-Report-to-Ford-Foundation-Year-One-FINAL.pdf>

The One Man Can campaign seeks to prevent gender-based violence and HIV/AIDS through various methods including the use of communications strategies to shift social norms about men's roles and responsibilities in achieving gender equality. Specific activities have included:

- Digital stories: these are a series of mini-documentaries that tell the life stories of men and women who have been affected by HIV/AIDS and gender based violence and who are now actively working to address both. The goals of this project is to provide the space for

participants to share stories and gain a sense of achievement and group solidarity; and to provide a library of educative tools on the realities of HIV/ AIDS and gender-based violence. Collaborations with NGOs, schools and clinics help to ensure that the digital stories are widely viewed.

- Media outreach: ongoing media outreach is seen as instrumental to targeting the general public with One Man Can messages and ultimately shifting social norms. These have included a BBC podcast of ongoing work; and discussions on developing a television series targeting children on issues of HIV/AIDS, gender and human rights
- Painting murals

5. Guides and toolkits

Tufte, T., and Mefalopulos, P., 2009, 'Participatory Communication: A Practical Guide', Working Paper, no. 170, The World Bank, Washington, DC

<http://siteresources.worldbank.org/EXTDEVCOMMENG/Resources/Participatorycommunication.pdf>

This guide provides perspectives, tools, experiences and lessons learned in participatory communication. It provides a brief overview of the emergence of behaviour change communication in the 1970s and 1980s. This was closely associated with social marketing, which aimed to promote particular behaviours or social norms through communication interventions. It has been widely used in health education. Initially, models of strategic communication focused on developing appropriate content and targeting, with the goal of individual change behaviour. More recently, attention has also been paid to adopting participatory approaches. In the area of outreach and media campaigns, for example, one-way communication approaches include information dissemination, media campaigns and other diffusion approaches. Two-way communication, on the other hand, involves an open-ended process that aims to explore issues, generate new knowledge and solution. The guide emphasises that the research phase of developing communication strategies must always involve two-way communication methods. It also stresses that in order to have a sustained outcome, participatory communication needs to be seen both as a means and an end. Short-term projects need to be linked to the long-term process of empowerment.

International HIV/AIDS Alliance, 2008, 'Feel! Think! Act! A Guide to Interactive Drama for Sexual and Reproductive Health With Young People', International HIV/AIDS Alliance

http://www.ibe.unesco.org/fileadmin/user_upload/temp/_Alliance_drama_557_EN.pdf

This toolkit looks at how interactive drama can be used in work with young people to encourage them to think about and take action to improve sexual and reproductive health (SRH). The guide contains ideas for drama and discussion activities designed to help young people learn about SRH issues and gain skills in facilitating and using interactive drama tools and techniques. It aims to increase the use of drama as a creative and participatory process to address SRH issues rather than using a one-way message delivery tool; and to equip practitioners with the necessary knowledge, skills and attitudes to use interactive drama effectively in order to reduce stigma and discrimination towards vulnerable groups.

5. Additional information

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About helpdesk research reports: This helpdesk report is based on two days of desk-based research. Helpdesk reports are designed to provide a brief overview of the key issues; and a summary of some of the best literature available. Experts are contacted during the course of the research, and those able to provide input within the short time-frame are acknowledged.