



Research Question

To what extent does a gender norms intervention with religious leaders and faith communities increase family planning use and reduce IPV among newly married couples and first time parents in participating congregations?



Social Norms Addressed

- God created men as superior to women.
- It is acceptable for a man to use violence to correct his wife's behavior or discipline a child.
- As household decision-makers, a man can dictate a woman's ability to seek and use family planning.



Partners

Georgetown University's Institute for Reproductive Health (IRH), Tearfund, and Association de Santé Familiale (ASF)/Population Services International (PSI)



Location

Kinshasa, DRC:
17 Église du Christ au Congo (ECC)
Protestant congregations in Lukunga, Funa, Tshangu, Mont Amba Districts



Timeline

October 2015 – September 2020

Transforming Masculinities

Challenges & Opportunities

The rates of intimate partner violence (IPV) perpetrated by men against their female partners in Democratic Republic of Congo (DRC) are among the highest in the world, as physical violence is an accepted male behavior and a way of asserting control as head of the household. Socially-understood gender roles endorse early marriage and high fertility, and the threat of IPV prevents women from seeking health services, including family planning.

To foster environments that support family planning use, mounting evidence suggests that interventions should simultaneously work with men, women, and the community structures that produce and enforce gender norms. In addition, working with individuals in transitional life stages such as newly married couples or first-time parents presents an opportunity to intervene as identities, norms, and behaviors are changing.

Developed by Tearfund, *Transforming Masculinities* is an evidence-based approach to promote gender equality and positive masculinities within faith communities. It is based upon the understanding that spiritual beliefs and faith leaders are part of the structure that shapes social and gender norms, and focuses on prevention and response to sexual and gender-based violence.

About the Intervention

Known locally as **Masculinité, Famille, et Foi**, the intervention adapts the *Transforming Masculinities* approach to include reflection on normative environments and the acceptability of family planning. It consists of a series of trainings, group discussions called ‘community dialogues,’ and diffusion activities that guide faith leaders, young couples, and congregations to identify, create, and embrace positive masculine identities and gender-equitable behaviors. In addition, an enabling service environment provides a foundation of high-quality, youth-friendly health services across both experimental and control sites. Working with newly married couples and first-time parents, the intervention encourages reflection, dialogue, and action to build norms that condemn violence and enable access to family planning services.



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.

What we hope to achieve

By working with faith communities, we aim to improve sexual and reproductive health and well-being among newly married couples and first-time parents, including healthy timing and spacing of pregnancies. As young couples enter new life phases, this foundation and supportive environment will lead to improved relationship quality and couple communication, and reduced IPV. More broadly, we hope to contribute to the knowledge base on the implementation, monitoring, and evaluation of successful social and behavior change interventions, particularly the role of a faith- and community-based interventions addressing gender norms as a gateway to improving sexual and reproductive health.

Evaluation

Effectiveness of the intervention will be evaluated after 16-24 months using a pre-test/post-test cluster randomized control trial in 17 congregations. 1,100 couple members will be interviewed as they are leaving church to assess the relationship between social norms, attitudes, family planning use, and IPV. To assess diffusion, a survey will be conducted with 1,700 congregation members. A participatory explorative process was piloted to determine the social norms related to target behaviors, and the primary influencers and reference groups for each norm. Sixty-four in-depth interviews will be conducted and ethnographers will undertake structured observations to document implementation and assess diffusion and scalability.

Scale & Sustainability

If early results are promising, *Transforming Masculinities*—guided by a Technical Advisory Group consisting of representatives from government, local and international organizations, and youth—will establish a scale-up strategy for expansion through ECC’s vast network of DRC parishes.



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