

**Building on Solid Foundations:** Case studies to strengthen and deepen the impact of work with men and boys for gender equality in Africa through the MenEngage Network



## Acronyms

ANPPCAN	African Network for The Prevention & Protection against Child Abuse and Neglect
AU	African Union
CDF	Children’s Dignity Forum
FGM	Female Genital Mutilation
GBV	Gender-based Violence
IPV	Intimate Partner Violence
MEA	MenEngage Africa
MEN	MenEngage Namibia
MET	MenEngage Tanzania
NDHS	Namibia Demographic and Health Survey
TDHS	Tanzania Demographic and Health Survey
TECMN	Tanzania Ending Child Marriage Network

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## Background to the documentation

In October 2017 Sonke Gender Justice and Men Engage Africa hosted the Five Days of Gender Based Violence Prevention Meeting in South Africa. The purpose of the meeting was to share ideas, exchange promising practices, collect evidence that can strengthen collective advocacy and develop innovative ideas on “mainstreaming” violence prevention.

In preparation for the meeting, Sonke commissioned the identification and documentation of innovative practices on GBV prevention by MenEngage Africa (MEA) partners using the case study methodology. It was agreed the documentation would clearly describe and document the innovative practice, clearly demonstrate why the practices are innovative and make recommendations about how to strengthen the practice.

## Criteria for Innovation

Generally, innovation is subject to a variety of interpretations and applications. It is utilized, often glibly, as a synonym for creative, interesting, fresh and new. However, as the volumes of scholarship on innovation would suggest, it is a specific concept with particular elements, many of which are continuously emerging and still being defined. Innovation in the development sector is equally fluid and subject to interpretation. According to Dr. K S Sebastien, development practitioner and writer based in India, there is no consensus among development workers, as well as funding agencies on what constitutes innovation, particularly when looking at the specific contexts of the development projects. Sebastien does, however, attempt some degree of definition, arguing that innovation are improvements or new applications to current programmes. Specifically, he argues that:

*“In the context of development sector, innovations are basically improvements made in technologies of service delivery, processes to enhance community participation and mobilization, information, education and communication or behavior change communication materials and activities, operational procedures such as service delivery protocols, training curricula and educational approaches, management, information and logistics systems, capacity-building mechanisms, financing approaches, organizational restructuring, and even new services to unserved or under-served populations.”<sup>1</sup>*

For the purposes of this study, it was also useful to reflect on the concept of social innovation. According to the Stanford Graduate School of Business:

*“Social innovation is the process of developing and deploying effective solutions to challenging and often systemic social and environmental issues in support of social progress. Solutions often require the active collaboration of constituents across government, business, and the non-profit world.”<sup>2</sup>*

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<sup>1</sup> <https://www.linkedin.com/pulse/being-innovative-while-re-inventing-wheel-social-sector-sebastian>

<sup>2</sup> <https://www.gsb.stanford.edu/faculty-research/centers-initiatives/csi/defining-social-innovation>

Faculty at the Business School also argue that "the concept of social innovation focuses attention on the ideas and solutions that create social value—as well as the processes through which they are generated, regardless of where they are coming from." When looking at the drivers and solutions to GBV, particularly the role that cultural and religious factors play in perpetuating and ultimately alleviating this social ill, innovative interventions relating to ending GBV can arguably fall into the realm of social innovation.

In light of these theoretical definitions, and reviewing the MenEngage Africa projects selected for the GBV prevention case studies, the following criteria for innovation was developed.

In the context of GBV prevention, an innovative project:

- Works with groups generally perceived to be difficult to penetrate or resistant to change – this includes cultural “gatekeepers” such as religious and traditional leaders or politicians with a strong political agenda
- Adopts an integrated approach to an issue in a collaborative environment. This would include linking issues such as GBV and HIV, or looking at the impact of child marriage and FGM on health, education and emotional development. An integrated approach is based on collaboration with a broad spectrum of actors
- Builds on existing knowledge, tools and ways of doing
- Is sustainable, where new ideas, values, behaviours are streamlined and presented as everyday practice and therefore likely to be taken up by communities and continued
- Can be applied and/or modified in different contexts

## Methodology

A desk-top review of the MenEngage networks in Namibia and Tanzania was conducted by perusing recent progress reports submitted by MenEngage country coordinators, as well as other relevant documents. MenEngage Namibia (MEN) was selected for its recent work around intimate partner violence (IPV), and MenEngage Tanzania (MET) for its focus on child marriage and female genital mutilation (FGM).

Interview instruments were developed in the form of opened-ended discussion questions for MenEngage staff and Secretariats in each country; MenEngage network members; strategic partners; and community members. A total of 10 persons were interviewed in Namibia and 9 persons in Tanzania. Interviews lasted between forty-five minutes and one and a half hour. In some cases, interviews were recorded and transcribed. In other cases, hand-written notes were taking during interviews.

The consultant spent two and a half days at the MenEngage offices in Windhoek and Dar es Salaam. All interviews were conducted at the offices of the Secretariats as the scope of work either did not warrant visits to the field, or budgetary and time constraints did not allow for it.

## Limitations to the study

This study was conducted in the spirit of an external evaluation whereby efforts were made to better understand a programme, the building blocks of its success and scope for improvement. However, the short time frame naturally could not do justice to capturing the programmes and rich work of the MenEngage networks in its entirety.

While country coordinators made every effort to schedule relevant meetings, there were instances where participants who had agreed to be interviewed did not arrive as scheduled. In Namibia, the consultant was only able to interview one of the twelve young men who participated in the IPV Pilot Session, despite two others indicating their willingness to be interviewed. This was disappointing as it could have been an attempt of a first follow-up to the Pilot Session and for the young men to come together to reflect on the training. The perspective of the young man interviewed is therefore not a representation or accurate reflection of the IPV Pilot Session as a whole.

In Dar es Salaam, despite the MET coordinator following the correct procedures to schedule interviews with Members of Parliament (MPs), the process is long winded and time consuming. Therefore, no interviews with MPs took place. In addition, two MET members cancelled the interviews shortly before the scheduled time. Much of the work on FGM takes place in Tarime, in the northern Mara region on the border to Kenya. Time constraints did not allow for travel to Tarime and therefore the consultant resorted to information supplied by Secretariat staff on the FGM programme.

## CASE STUDY 1 – *It's No Secret* – Intimate Partner Violence in Namibia and the *the Potential of the Intimate Partner Violence Session Guide*

### Contextual analysis

Gender-based violence in Namibia is a serious societal concern in a country with a mere population of 2,104,900, the official number according to the 2011 Namibia Population and Housing Census.<sup>3</sup> The 2013 Namibia Demographic and Health survey (NDHS)<sup>4</sup>, captured, for the first time, the extent of domestic violence within its society. With various global studies identifying domestic violence (a term which the NDHS uses interchangeably with family violence, spousal violence or intimate partner violence), as the most common form of violence against women, the NDHS measured this particular type of violence in great detail.

According to the 2013 NDHS, 33% of ever-married women aged 15-49 years reported ever having experienced physical, sexual, and/or emotional violence from their spouse, with 28% indicating they had experienced such violence in the 12 months prior to the survey. In

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<sup>3</sup> Namibia Population and Housing Census 2011 - Namibia Statistics Agency, Government of the Republic of Namibia

<sup>4</sup> Source: 2013 Namibia Demographic and Health Survey - <https://dhsprogram.com/pubs/pdf/FR298/FR298.pdf>

addition, the survey also looked at the issue of marital control, a recognized warning sign and often a precursor to violence in a relationship. Presenting six types of controlling male behaviours to respondents, the survey noted that 27% of ever-married women indicated their husbands displayed three or more of these types of behaviours. The six types of controlling male behaviours are:

- (1) he is jealous or gets angry if she talks to other men
- (2) he frequently accuses her of being unfaithful
- (3) he does not permit her to meet her female friends
- (4) he tries to limit contact with her family
- (5) he insists on knowing where she is at all times
- (6) he does not trust her with money



From 2013, intimate partner violence (IPV) became a more national concern. In a public forum, the Minister of Gender Equality and Child Welfare indicated that there had been 150 murders of female partners in Namibia between 2013 and 2015<sup>5</sup>. Extensive media coverage on the issue gave rise to an increase in the national discourse around IPV, its root causes and ways to address it. In media reports and in general conversation, IPV was often referred to as “passion killings”, a term many disagreed with as it suggests degree of romantic connotation to the murder of women. In response to the scourge of violence in the country at the time, the then President, Hifikepunye

Pohmaba, called for a National Day of Prayer and instituted the second National Gender-Based Violence Conference in 2014.

The root causes of IPV in Namibia are multi-layered. All respondents interviewed spoke of deep-seated, harmful gender norms and beliefs in Namibia’s patriarchal society, with very defined ideas of masculinity. Men’s perceived fixed roles as providers and heads of households are often blurred with controlling and possessive behaviours. Men are often expected to be in charge, even when they lack the capacity or the resources to do so. In instances where men are unable to provide, particularly as a result of unemployment or economic inequality in society, coupled with the instance where women are thriving and become more independent, violence can occur. There are also deeply-entrenched cultural norms that reinforce perceptions that women should occupy a subordinate position, with men playing a dominant role.

According to Sister Namibia, a feminist organisation based in Windhoek, GBV disproportionately affects women from poorer socio-economic backgrounds. However, although poverty is one of the key drivers of GBV, the organization states that “the status of

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<sup>5</sup> Source: Interview with James Itana who indicated that data on GBV is notoriously difficult to collate and verify. Even in cases where government officials present data, the source is not communicated.

women, gender norms and alcohol consumption also contribute to the large-scale occurrence of violence.”<sup>6</sup>

### Key aspects of the IPV Session Guide

In response to the high levels of IPV from 2013, and in a strategic decision to adopt a narrower view of GBV and investigate more closely, a specific aspect of GBV in Namibia, MEN developed the IPV Session Guide.

The tool was developed out of the learnings from MEN’s 2009 Men Care Southern African Fatherhood pilot programme that focused on getting men more involved in supporting their partners during pregnancy. This 2009 programme contained a strong social behaviour change component and highlighted the need for a sustained approach to working with men. The programme eventually saw changes in attitudes among men who’d begun to see pregnancy as involving *both* their partners. Men in the programme also displayed an increased willingness to be tested for HIV.<sup>7</sup>

Observing the impact this intimate behaviour-change intervention had, prompted MEN to develop the IPV Session Guide, a training and communication tool for working with men and boys to address IPV. The intervention is designed to create spaces for men to reflect on their roles, privilege, socialisations, masculinities and the manner in which all of these could contribute to a propensity for violence within a relationship. It was also an opportunity for men to discuss the places they are able and willing to go to seek health-related and psycho-social help. The inclusion of sexual and reproductive health and rights (SRHR) also revealed that men have little knowledge not only about their partners’ SRHR as well as their own.

The IPV Session Guide contains the following nine components/sessions:

- Session/Meeting 1: Introductions (Talking about our Intimate Relationships)
- Session/Meeting 2: Gender roles in Intimate Relationships
- Session/Meeting 3: Intimate Partner Violence (Matlakala’s story)
- Session/Meeting 4: Intimate Partner Violence Clothesline
- Session/Meeting 5: Sexuality and Intimate Relationships
- Session/Meeting 6: Men and HIV services
- Session/Meeting 7: Healthy and Unhealthy Relationships
- Session/Meeting 8: Effective Communication and conflict management in Intimate Relationships
- Session/Meeting 9: Developing a personal action plan towards ensuring that we prevent and mitigate incidences of Intimate Partner Violence in our relationships

In addition to a significant number of dialogue sessions, the tool makes provisions for getting participants to engage in “homework”, essentially exercises they can complete at home. One such exercise is the gender division of labour. This exercise requires participants

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<sup>6</sup> <https://sisternamibia.com/gender-based-violence/basic-gender-information/numbers-figures/>

<sup>7</sup> Reported during one-to-one interview with MEN Coordinator, James Itana.



to reflect on and list the household responsibilities assigned to men and women. These exercises are also designed to encourage dialogue between men and women as participants are expected to discuss the training and its content with their partners.

Sessions are facilitated and designed to be as participatory and interactive as possible. Questions are posed at participants in order to stimulate critical thinking and dialogue. Examples of questions include:

- Are your perceptions about the roles of men and women affected by what your family and friends think? How?
- Does religion, culture and media have an effect on these gender rules? If so, in what way(s)? How does religion, culture and the media portray women? How does religion, culture and the media portray men?

Sessions are intended to build on and speak to each other, eventually touching on all/most aspects of IPV and ways to identify and respond to them in a non-violence and progressive manner.

If the tool is being conducted with a group of trainers, it is likely to be covered in approximately four days. If the tool is being implemented at a community level with a group of men, it is recommended that it be conducted in no less than two weeks, equating to participants meeting every other day. This is the minimum amount of time required to conduct a session and have participants return to their homes to reflect on it or complete homework exercises.

### IPV Training with church representatives: highlights, challenges and implications for future roll out

As early as 2012, the National Training Manual on Engaging Men and Boys on GBV in Namibia highlighted the need for a holistic approach to responding to GBV, including working with religious leaders. Namibia is deeply religious as a society where religious leaders are respected and influential. The possibility that an interpretation of religious texts, coupled with strong cultural beliefs could reinforce gendered perceptions of women as submissive, is of obvious concern.

In February 2017, MEN conducted a training programme with nine church representatives using the IPV Session Guide. The overall goal of the workshop was to introduce church representatives to the IPV Session Guide and explore the role that churches can play towards addressing IPV. IPV Training participants were identified through MEN's engagement with the Council of Churches in Namibia and its Ecumenical Action Against Gender-Based Violence, a project underway since 2012.



The training workshop report indicated the following achievements were observed during the training. Among the church representatives, there appeared to be:

- Increased awareness about GBV, particularly IPV
- Deepened understanding about sex and gender
- Deepened understanding on sexuality
- Increased awareness about service providers and challenges faced by clients trying to access services and shortcomings of services
- Increased and deepened knowledge on HIV&AIDS, HIV&AIDS related services such as prevention of mother-to-child transmission (PMTCT) and male circumcision
- Increased awareness about possible approaches that churches and individuals can take to address GBV in their respective churches
- Increased awareness about MEN and LifeLine ChildLine (MEN Secretariat) including activities and services provided by these organisations

It is worth noting that five out of the nine participants at this workshop did not complete a post-training assessment and so there are no verifiable methods to determine increased knowledge. In addition, although a number of action points were agreed upon at that meeting, it is unclear to what extent they were actually implemented. Action points are included in the tool in the form of homework exercises (when the tool is implemented at the community level). In one session, participants are requested to craft a personal action plan that will help them to stay out of the gender box.

In this study, the consultant interviewed two church representatives that attended the IPV Session Guide training. Alphonse Koruhama, a youth leader at the Gospel Truth Ministry Church and director of a newly-established NGO called Possibility Thinkers, appreciated the training as it offers men license to speak about their feeling and discuss issues in relationships. “Working in a group also helps men to be more accountable to each other,” he stated. “After the training, I have been making use of the themes I learned and trying it out with friends. I started a communication WhatsApp group with close friends. I’m actively encouraging discussions on relationships within the group.”

Shortly after the training, Alphonse convened an event at his church and invited several speakers, including James Itana, MEN Coordinator, to address the congregation. According to Alphonse, his church does not regularly speak about issues of GBV, nor does the pastor include these issues in his sermons. James’s presentation, which included topics around power relations, inequality, GBV and HIV, was very well received by the audience. “Young people have been asking me to convene a follow-up,” Alphonse noted.

Rheinholdt Kharigub of the Catholic Men’s Association and Parish Council attended the IPV training on behalf of his parish priest. He indicated that the Catholic Church, through its social responsibility programme, hosts an annual conference where social issues, including GBV, issues affecting men, the role of culture etc., are discussed. Some of Rheinholdt’s highlights of the IPV training included exploring the contradictions inherent in society’s expectations of men and its role in allowing and sustaining violence in relationships. “We men are expected to be strong, to be in control and take care of things,” Rheinholdt said. “And sometimes we think that means being violent, being tough, making sure we’re not vulnerable or weak.”

He also appreciated gaining knowledge about the service providers available to assist men who are experiencing difficulties in relationships. These include Lifeline Childline (which Reinhold has regularly begun to recommend to people within his community), the Ministry of Gender Equality and Child Welfare, the police and religious leaders. He has also been using aspects of the training informally, counselling family and friends in his community, encouraging dialogue between parties in conflict and making referrals. *"In exile, Jesus wept* – this biblical quote says to me to me that it's okay for men to cry," said Reinhold.

Including action points in the tools is very useful but only to the extent that there is follow-up. This is discussed in the section below.

### Considerations for the future

One lesson learned during this initiative was the need for MEN, rather than working through the Council of Churches, to make direct contact with churches and establish relationships in this way. This is likely to be much more sustainable since, to implement the actions agreed upon at the training, and to ensure follow-up takes place, senior church officials and decision-makers need to be involved. As a result of making use of the Council of Churches as a vehicle to recruit participants, some church leaders did not attend the training but rather sent representative of the church. In most cases, these representatives were not senior, decision-making figures.

After the IPV training, Rheinholdt, (a member of the men association but not a senior decision-maker as this is reserved for the parish priest) encouraged his parish priest to include an IPV component to the church's pre-marriage and marriage counselling. However, this excellent idea has not yet borne fruit as relations between Rheinholdt and the priest deteriorated when Reindholdt, experiencing his own domestic difficulties, turned to the priest for assistance and was disappointed in the level of support he received. Reinhold has agreed to revive this idea and approach the priest to discuss incorporating IPV in the marital counselling programme.

Alphonse, through his work at Possibility Thinkers, at the church and in other community initiatives, has access to a number of young people. Therefore, the possibility of him making greater use of the tool is high. In addition, Alphonse is a Mandela Washington Fellow, at times referred to as the Young African Leaders Initiative (YALI) and has access to a number of networks and resources, including financial resources. He is willing to write a proposal (MEN is willing to offer support in this regard) that would centre around IPV training with men and boys in his network.

In both cases involving church representatives, there was no reported backlash regarding IPV messaging nor resistance to include IPV in church messaging or church activities. However, from a monitoring and evaluation perspective, it is impossible to determine if there has been any measurable impact made as a result of IPV training, or in particular, Aphonse's event, the only activity followed up and documented. Naturally, the scope of this review only included perspective from two of the nine church representatives trained and is therefore limited. What is clear is that there needs to be more frequent follow-up by MEN on the utilisation of the training tool and plans for future use.

## IPV Session Guide training with MEN members: highlights, challenges and implications for the future

Seven members of the MEN were trained on using the IPV Session Guide in January 2017. Two members, Absai Kashululu of Women's Action for Development and Ngamane Karuaihe-Upi of Fathers United Namibia, were interviewed. Both indicated they found the training extremely useful. "The IPV Session Guide offers opportunities for men to open up and reflect on their relationships, highlights and difficulties, in a non-judgemental space," Mr Kashululu indicated. "The training can also build self-esteem and encourage men, who are more often than not, reluctant to seek any kind of health-seeking behaviour, or avenues for help." In addition, the tool offers important definitions related to the concepts of gender and gender-based violence. Wrestling with the potency of harmful cultural norms and its influence on IPV, was another aspect of the tool that was appreciated.

In June 2017, Mr Kashululu had the opportunity to participate in an exchange programme with MenEngage Botswana and institutions working on GBV. He facilitated a training programme with participants in Botswana using the IPV Session Guide which was well received.

Ngamane Karuaihe-Upi, a well-known family therapist, motivational speaker and media personality, is in the process of establishing Fathers United Namibia, an NGO working to create improve and increase the involvement of men, boys and fathers and family and community life. "I appreciated the ability of the training to allow men to question their understanding of violence and to engage in deep self-reflection," noted Mr Karuaihe-Upi. "We have to ask ourselves why we so easily resort to violence." Although Fathers United Namibia is still to be registered and fully functional, it has convened a number of dialogues in Windhoek and Mr Karuaihe-Upi has used aspects of the training as the basis of discussion. In addition, Mr Karuaihe-Upi is often called upon for public speaking engagements and is also a qualified therapist. He indicates that he uses aspects of the training in his work with men and boys and in his various media engagements.

In addition, although not interviewed, Women's Solidarity, a member of the network, has also been using the IPV Session Guide in its work with communities. Similarly, William Chiremba, Deputy Commissioner at the Namibian Correctional Services found the IPV training very useful for understanding the factors contributing to situation many men find themselves in; namely the penal system in Namibia. Since January, MEN and Correctional Services have been attempting to secure a day for training of correctional officers who engage directly with perpetrators. This training is now scheduled to take place in September 2017.

## Engagement with the Ministry of Gender Equality and Child Welfare: possible endorsement and implications for the the future

The Ministry of Gender Equality and Child Welfare is a strategic member of MEN and a member of the Advisory Council. The relationship between Lifeline Childline and the Ministry goes back many years with the former drafting the 2012 National Training Manual and Training Plan for Men and Boys on GBV, SRH and HIV/AIDS on behalf of the Ministry. More broadly, MEN is involved in the coordination of the implementation of the GBV policy and active in the government's cluster that deals with GBV and human rights. MEN also assists the Ministry with lobbying, advocacy and producing evidence on GBV, thereby strengthening the argument for greater domestic and foreign investment on the issue.

Despite being invited, no representative from the Ministry of Gender Equality and Child Welfare attended the IPV Session Guide training in January. According to Mr Benson Matali, development planner within the Ministry, although they were not actively involved in the design of the tool, they would nevertheless support its adoption and utilisation. This is however, contingent on issues of lesbian, gay, bisexual, transgender, intersexed (LGBTI) not being prominent within the tool, which, at the moment, it is not. According to Geraldine Van Wyk of UNDP, a strategic partner of MEN and member of the Advisory Committee, this absence of LGBTI issues within the tool is concerning. "The government needs to acknowledge which groups are being left behind," she noted.



Through its close relationship with the Ministry of Gender Equality and Child Welfare, there is an opportunity for MEN to lobby for the adoption and standardisation of the IPV Session Guide. In order for government to have the tool endorsed as a national, standardised training manual, MEN will be required to engage the Permanent Secretary and its relevant processes. "The 2012 National Training Manual should be up for review in the near future and an IPV component can be included," said Mr Matali, offering a concrete opportunity to greater government engagement on the IPV Session Guide.

In addition, the Ministry of Gender Equality and Child Welfare has recently established a number of regional men's support groups. "These support groups are currently functional in five regions. We established them to create dialogues on issues affecting men," Mr Matali noted. "In some cases, they are coordinated by regional offices of the Ministry, and in other cases, civil society organisations." These men's groups are currently making use of the National Training Manual and therefore, in time, can make use of the IPV Session Guide. MenEngage Network will take this discussion forward with the Ministry of Gender Equality and Child Welfare.

## IPV Pilot Session with men in the community: highlights, challenges and implications for the future

In May 2017, the IPV Session Guide was piloted with twelve men over a period of two weeks. Retention was an issue as although the programme began with twelve men, this whittled down to approximately six by the programme's end. Only a small number of participants steadily attended. There has not been an opportunity to follow-up with the men in order to determine the extent to which they utilised the knowledge gained in the training or to reflect upon any change in behaviours and attitudes. This case study site visit was the first occasion to do so and only one participant kept the appointment for the interview.

Richard Kakuenga, a 38-year-old man who participated in the training, indicated that the trained helped him to increase his understanding about HIV and IPV, and most importantly how to seek help if experiencing violence in a relationship or witnessing violence in a community. "They showed us, if there is something happening in



your village, like violence between a man and a woman, how you can solve the problem and to whom you can report," said Richard. "We can go to someone, a friend, and ask for advice to solve the problem. We can go to the police or a social worker."

Richard's perception of the training was valued but as the sole interviewee, cannot be taken as representative of the group's experience. In addition, he did not share the information gained in the workshops with his partner (an aspect of the programme that is encouraged), who was not living with him at the time. However, according to James, the workshop was successful in instilling the message that more positive dialogues between men and women are likely to reduce the possibility and incidence of violence.

Lifeline Childline is planning to implement these continuous dialogues with groups of men. It is not expected that all members of MEN would be in a position to implement such workshops. Therefore, whilst the ideal would be for MEN members to implement the training as a package (either a 3-day Training of Trainer programme or a 9-session dialogue series over a period of a few weeks with groups of men in a community), this may not be possible, particularly given funding constraints. For now, it is acceptable that some members are making use of aspects and snippets of the tool.

### Vibrancy and functioning of MenEngage Namibia

The IPV Session training tool place in January 2017, yet MEN members have not met since to reflect on the tool, the extent to which it has been used or other areas of work. The utilisation of the tool is not divorced from the functioning of the network, which does not appear to be as vibrant as it could be.

There is room for greater ownership of the tool among the members. Members easily opt for requesting James Itana, MEN coordinator, to facilitate workshops, when, given that the training took place in January 2017, MEN should be at least volunteer to co-facilitate training. MEN members should be actively seeking opportunities to use the IPV Session Guide. This training tool is still in draft form and will be discussed at length at MEN's next Annual General Meeting, scheduled for October 2017.

In addition, members have indicated that they have not convened since the training and communication among the group, including sharing of information and input into processes, is not as regular as it could be.

### Meeting the criteria for innovation

MEN's work around the IPV Session Guide can be viewed as innovative, based on the following criteria developed by Sonke:

Innovation Component	Extent to which the criteria was met
Works with groups generally perceived to be <u>difficult to penetrate</u> or resistant to change	<b>Partially</b> – working with churches is essential as they often have very fixed ideas about relationships. However, church leaders sent <i>representatives</i> to the IPV training rather than decision-makers; this is a lesson on the importance of direct engagement and relationship building with church leaders
Adopts an <u>integrated approach</u> to the issue in a collaborative environment	<b>Fully</b> - The IPV Session Guide links issues of HIV and SRH to GBV.
Builds on <u>existing knowledge</u> , tools and ways of doing	<b>Fully</b> - The IPV Session Guide was designed using prior knowledge and lessons learned from the Men Care Fatherhood programme
Is <u>sustainable</u> , where new ideas, values, behaviours are streamlined and presented as everyday practice and therefore likely to be taken up by communities and continued	<b>Fully</b> – The training contents and exercises are designed in a way that's cognisant of the lifestyles of men at community level; it contains exercises to be completed at home and with partners. The 2012 National Training Manual and Training Plan for Men and Boys on GBV, SRH and HIV/AIDS is up for review and is therefore an opportunity for IPV to be integrated. The regional focus groups for men currently being established by the Ministry of Gender is another opportunity for aspects of the tool to be used and incorporated into every life.
Can be applied and/or modified in different contexts	<b>Fully</b> - The IPV tool questions gendered notions and realities of power relations and inequality and its influence on violence in relationships. These notions, unfortunately, can be found in most societies.

### Emerging lessons and considerations for MenEngage Namibia

Overall, the IPV Session Guide is a well-thought through and comprehensive guide that could effect positive change between men and women in a relationship and act as mitigation against violence. However, in order for the tool to yield maximum benefit, the following points should be considered:



- Although MenEngage identified church representatives through the Council of Churches in Namibia and its Ecumenical Action Against Gender-Based Violence project, direct engagement with church leaders is more sustainable. In this way, MEN can build a relationship with the church's decision-makers (not simply their representatives), and ensure their participation in the training and follow-up activities
- There are several church platforms and opportunities for the message of IPV to be communicated. These include church counselling, sermons, events, baptisms, and men's groups and structures within the church. However, close follow-up with churches is essential to ensure agree-upon actions are followed through.
- Implementing the IPV tool at a community level with men should ensure a core, committed group of men are able to engage over a period of time and complete the 9-session training programme. Follow up with these participants is essential since behaviour change happens over time
- More thinking needs to be applied in getting buy-in on LGBTI issues and incorporation into the tool.
- Members of MEN should take greater ownership of the network, identifying opportunities for training and following through on actions and commitments made
- MenEngage Namibia/Sonke Gender Justice should capacitate Lifeline/Childline staff on engaging men and boys to play a more active role in MEN. The Coordinator's skills and time appear to be stretched very thinly.
- The lack of financial resources to assist in the implementation and utilisation of the tool by members was a recurring issue. Therefore, devising fundraising strategies to support MEN's activities should be prioritised.
- Network members need to convene more often and find creative and innovation forms for communication in order to create and sustain vibrancy and momentum within the network

## CASE STUDY 2 - Efforts to eradicate female genital mutilation and the practice of child marriage in Tanzania

### Contextual analysis

MenEngage Tanzania (MET) has recently intensified its efforts to reduce and end the practice of child marriage and female genital mutilation (FGM). The interrelatedness of the issues requires a collaborative approach, and the network is poised to tackle it effectively. In 2016, the network made a strategic decision to focus on child marriage and FGM in Tanzania. Cultural beliefs and customs see many girls, at the onset of puberty, undergo





the practice of FGM. Once a girl has been cut, she is viewed as being ready for marriage. In this way, the issue of teenage pregnancy closely follows the dual challenge of child marriage and FGM. In Tanzania, current legislation does not permit teenage mothers to return to school. In this way girls who have been cut, become wives and mothers at a young age, are prevented from reaching their full academic potential. This sets off or continues a cycle of poverty.

The issue of child marriage has, in the past few years, gained global and continental momentum with the Girls Not Brides campaign and the African Union's End Child Marriage Campaign. According to *Girls not Brides*, the country has one of the highest child marriage rates in the world, with 7% of girls being married before the age 15.<sup>8</sup>

The prevalence of FGM is equally dire. According to the Tanzania Demographic and Health Survey (TDHS), *"between the 2004-05 TDHS and the 2015-16 TDHS-MIS, the proportion of circumcised women age 15-24 who were circumcised at age 13 or older increased from 25% to 36%, suggesting that the age at which girls are being circumcised is increasing."*<sup>9</sup>

In the Mara region, where CDF's implements its programme, there is a 32% prevalence rate among women aged 15-49. However, in the most recent TDHS, women were asked about circumcision practices among their daughters aged 0-14 years.

*"Overall, according to mothers' reports, less than 1% of girls age 0-14 were circumcised. Almost all circumcised girls have mothers who are also circumcised. It is worth noting that, the low prevalence rate among young girls has to be interpreted with caution since it represents the current rather than the final FGC/M status for this age group. As mentioned above, more than one-quarter of women age 15-49 were circumcised at age 13 or older, so it is still possible that a significant number of girls age 0-14 may yet be circumcised. Some women also may have been reluctant to report that their daughters were circumcised because the practice is outlawed."*<sup>10</sup>

### Overview of the intervention to address FGM and eradication of child marriage: highlights, challenges and implications for the future

It is clear that deviating from behaviours and beliefs that are strongly steeped in cultural norms takes a very long time. The Children's Dignity Forum, the Secretariat for MET, began working on FGM in 2009 and have recently began observing positive changes and a reduction in the practice. Interventions adopt both a carrot and stick approach. FGM, according to legislation is a crime with the possibility of up to thirty years in prison; communities and practitioners of FGM are aware of this and this has acted as a deterrent. However, there are also awareness-raising activities that aim to unpack the rationale for the practice, identify the drivers and introduce alternatives to the community. A significant barrier was not only the high prevalence of the practice but the perceived importance of the

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<sup>8</sup> <http://www.girlsnotbrides.org/child-marriage/tanzania/>

<sup>9</sup> Source: <https://dhsprogram.com/pubs/pdf/FR321/FR321.pdf>

<sup>10</sup> Ibid.

practice to communities. After being cut, girls would not be allowed to cry and would be expected to walk through the community in a celebratory manner, to exclams of praise.

“It took us a long time to convince the traditional leaders and communities to even sit and listen to us. They were very resistant,” said Dorothy Ernest, former MET coordinator and current monitoring, evaluation and learning officer at CDF. “In the beginning, the well-organised clans would send community members posing as traditional leaders. We only became aware later on, that the people we were speaking to, weren’t actually traditional leaders.” Other ways in which community sought to circumvent efforts to change their customs included performing FGM at night and in secret, as opposed to the public event that usually followed the practice. In addition, there have been cases where girls were being cut at the same ceremony in which boys were being circumcised; again, an attempt to hide the practice.

Communities hold onto the practice of FGM largely because it has been passed down through the generations. Girls that are uncut are believed to be unclean and therefore, not able to be married, posing a financial burden to their household and bringing stigma and discrimination to their families. Workshops with traditional leaders held by CDF centred around the physical and emotional effects of FGM on girls, and the manner in which the rights of girls to education, sexual and reproductive health (childbirth is difficult for many girls that have been cut and many end up with obstetric fistulas) and general physical well-being was being violated.



After several years, the interventions began to bear fruit. Not only did communities come to appreciate the harmful effects of FGM but CDF was able to suggest alternatives to FGM. Practices such as smearing the face of young girls as a rights of passage are now routine. In addition, recognising that FGM has financial benefits to the *ngaribas* (women who are paid to perform the actual cutting) and therefore presents an obstacle to abandoning the practice, alternative to replace the practice required creative thinking. CDF began offering training pottery and sewing workshops to *ngaribas* in order to increase their capacity to secure income in other ways.

CDF also recognises the importance of the police to enforce laws relating to FGM and has carried out a number of training workshops with police. As in the case of traditional leaders, there are no quick fixes and CDF intends to work with police over a period of time to ensure new knowledge has been acquired as well as attitude and behaviour change. In addition, efforts are fuelled by a partnership with the Network Against Female Genital Mutilation (NAFGM)

In addition, in partnership with the United Nations Population Fund (UNFPA), MenEngage Africa convened an FGM meeting in July in Tanzania in July 2017. The meeting was convened to discuss the launching of a regional campaign and to identify methods of engaging the Pan-African Parliament and subsequently their constituencies on FGM. The

meeting also invited religious leaders (Christian and Muslim) who argued strongly against FGM as an inherent part of religious practice or doctrine.

### Breaking with tradition

*For us, FGM is a practice we grew up with, so we were just perpetuating it. We believed that if you were circumcised, it would bring wealth to the home. But after trainings with CDF, this has all changed. Now I know that even if a girl is circumcised she can bring wealth. In my village in Tarime, we no longer practice FGM. I have a 19-year-old and she is not circumcised, although her older sisters were. CDF trained traditional leaders in Tarime and then in Dar es Salaam and Dodoma. We were challenged to go and change the attitudes in our communities. It was not so difficult as we've seen the effects of FGM – girls have difficulties in giving birth; there is a lot of blood. Some end up dying; some are being affected psychologically. In my clan, the Bukonye, we have stopped completely. There are still some clans that practice, maybe because they don't have the knowledge. I know it's a crime, punishable with thirty years in jail, and I agree with it. The ngaribas are now paid in other ways. If the ngaribas in other clans can be trained to do other things, such as sewing or pottery, we can stop the practice.*

Elias Maganya Magori, Traditional Leader

### Two Networks, One Voice

CDF is also the coordinator for the Tanzanian Ending Child Marriage Network (TECMN). Together TECMN and MET have been advocating for amendments to the Law of Marriage Act, which permits girls to marry at the age of 15, and at the age of 14, with the consent of their parents. Although the legislation was deemed illegal by the Constitutional Court in 2016, there has an appeal by the government and therefore MET and TECMN continue to advocate for raising the minimum age for marriage.



Some initial concerns about duplication by the two networks, and confusion regarding branding have been raised. Many of the MET members are also members of TECMN. At the MET AGM in 2016, members decided to ensure all programmes implemented have a strong focus in men and boys in order to differentiate itself from TECMN. The possibility of combining the two networks has not been seriously considered as TECMN is dedicated to eliminating child marriage while MET has a broader mandate. In addition, there are difficult issues to negotiate if the two networks were to combine, in particular, LGBTI, which MET has committed to and which some organisations in TECMN are not in support of. Despite these philosophical differences, TECMN and MET have proved to be a powerful collaborative force on the issue of eliminating the practice of child marriage. In order to effect legislative changes, the networks opted to engage directly with Members of Parliament (MPs). They identified champions among the MPs that would drive the agenda forward. In addition, previous formal and informal

relationships with MPs meant the latter were easily accessible and willing to participate and buy into the process.

In February 2017, both networks convened a meeting where they were able to address forty MPs (those from the ruling party as well as the Opposition) on the importance of changing the legislation to reflect the rights of girls. “I urge all of us MPs and civil society organisations to come together to initiate a campaign that will rid our country of the scourge of child marriage from down at the grassroots level,” said Hon. Mary Mwanjelwa Mwanjelwa, a member of the Parliamentarians for Global Action who are advocating against Child Marriage. “We need to enhance efforts to end child marriage in Tanzania” The Hon. Fatma Toufik was equally vocal. “MPs should speed up the process to change the Marriage Act of 1971 by working with civil society organizations to push for change,” she said. “There should be co-ordination with the Ministry of Education to include the issue of child marriage in the school curricula as well as engagement of men and boys in the campaign to end it.”

MET will maintain its advocacy efforts with the Ministry of Health, Gender and Community Development, the Attorney General and the Speaker of Parliament to lobby for access to the parliamentary sessions.

While there is consensus on the need to eradicate child marriage, the issue often encounters opposition once its linked to teenage pregnancy and advocacy for teenage mothers’ right to education is made. The networks intend to continue their pressure to ensure legislative changes to the Marriage Act despite the international furore caused the Tanzanian President, John Magufuli’s statement in June 2017, declaring a permanent banning of pregnant girls from school.

### Vibrancy and functioning of MenEngage Tanzania

MenEngage Tanzania is comprised of 19 members. Two members, Michael Kehongoh of C-SEMA, an organisation working on child rights and Leodgard Lazarus of the African Network for the Prevention and Protection against child Abuse and Neglect (ANPCAN) made themselves available for interviews. Both organisations spoke of the concrete value they receive from being part of the network and their increased capacitation, within their own organisations, to engage men on issues related to abuse of women and children. Both consider being involved in the meeting with MPs on eradicating child marriage as an eye-opener. The platform is also a space for much-needed engagement and sharing of lessons learned, even though some of the members had established working relationships long before MET was established.

There is a sense of a high level of ownership within the network. MET does not simply function based upon the time and resources of CDF. Activities and ideas can and do emerge from all members with the latter having reasonable expectation of the facilitation role the secretariat plays. “We share responsibilities and work together on activities,” said Michael Kehongoh. “We own the decisions of the network. It’s a very participatory and engaging space.” According to both members, CDF does not dictate what the network should do but exists to coordinate the collective decisions made. “The ICT materials developed are very

involved and we contribute comments before they get printed,” indicated Leodgard. “The communication among us is good and we are transparent.”

MET is also benefitting from high levels of contribution by CDF staff. At least five members of CDF volunteered to be interviewed and it unclear where CDF work stops and MET work begins, a healthy indicator of commitment.

### Meeting the criteria for innovation

MET’s work around the child marriage and FGM can be viewed as innovative, based on the following criteria developed by Sonke:

Innovation Component	Extent to which the criteria was met
Works with groups generally perceived to be <u>difficult to penetrate or resistant to change</u>	Fully - MenEngage Tanzania is implementing a long term programme with traditional leaders and to a less extent, religious leaders, both cultural custodians
Adopts an <u>integrated approach</u> to the issue in a collaborative environment	Fully – There a recognition of the relationship between child marriage, FGM and teenage pregnancy, and to an extent, its impact on education and the cycle of poverty
Builds on <u>existing knowledge, tools and ways of doing</u>	Partially – due to the sustained period in which CDF has been involved in FGM eradication in Tarime (approximately 9 years), the origins of the programme are unclear. However, both FGM and child marriage work is coordinated through networks, suggesting that programmes are making use of a wide body of knowledge and experience
Is <u>sustainable</u> , where new ideas, values, behaviours are streamlined and presented as everyday practice and therefore likely to be taken up by communities and continued	Fully – there has been buy-in about the concrete economic and health benefits of abandoning FGM. Alternative practices, such as face-smearing, are now common, and income-generating activities are now offered to community members
Can be applied and/or modified in different contexts	Partially – Similarly efforts are possible in other contexts although it would be dependent upon a number of contingencies, including the presence of functional networks in the country. (See recommendations below)

### Emerging lessons and considerations for MenEngage Tanzania

The work currently being implemented by MET on FGM and child marriage eradication can certainly be described as promising. The following recommendation should be considered for even greater impact:

- MET’s efforts related to the eradication of child marriage and FGM is strongly aided by TECMN and NAFGM respectively. This level of advocacy is strengthened by the presence of a strong network or association with similar expertise. Countries wanting to learn from or replicate this would, at the very least, need to have a

vibrant, coordinated civil society through which the issue of child marriage can be taken up.

- Although there have been efforts to distinguish MET from TECMN, there is still a risk in regards to brand confusion. At least one MET member has indicated his organisation is resigned to allocating different human resources to the both networks as action points tend to be get conflated. More creative thinking needs to go into how to avoid brand confusion and reduce the strain on human resources for organisations occupying membership in both networks.
- While Tanzania is clearly demonstrating momentum around ending child marriage at the national level, there could be more engagement with the AU Campaign to End Child Marriage and its related processes. According to CDF's Executive Director, Koshuma Mtengeti, Tanzania is far ahead with regards to national achievements regarding child marriage. This is correct, although the AU is mandated to open spaces for greater civil society engagement and MET should make use of these entitlements.
- Working through parliamentary processes can be very instrumental; there must be shared, non-partisan vision by MPs in both the ruling party and Opposition.
- Although MenEngage Africa is committed to addressing LGBTI issues, there seems to be little being done on a practical level, largely due to a societal rejection of the issue. Some members of TECMN have indicated they would not join MET due to the latter's association with addressing LGBTI issue. Greater advocacy is therefore needed on LGBTI, in general, specifically, how LGBTI is positioned within the network.
- Members requested accelerations on the MET strategic planning processes as well as capacity building to develop a fundraising strategy.

## List of interviewees

### Namibia

Name	Organisation/position
James Itana	LifeLine ChildLine/ MEN Coordinator
Absai Kashululu	Women's Action for Development – Training officer
Ngamane Karuaihe-Upi	Fathers United Namibia/family therapist/media personality
Alphons Koruhama	Director, Possibility Thinkers/Youth Leader, Gospel Truth Ministry Church
Reinholdt Kharigub	Catholic Men's Association (Catholic Church)
William Chiremba	National Correctional Services of Namibia – Deputy Commissioner
Patience Keke	National Correctional Services of Namibia – Assistant Commissioner
Benson Matali	Ministry of Gender Equality and Child Welfare – Development Planner
Ms. Geraldine Van Wyk	United Nations Development Programme
Richard Kakuenga	Participant from IPV pilot sessions

## Tanzania

Name	Organisation/position
Michael Jackson	MET Coordinator
Koshuma Mtengeti	CDF Executive Director
Sophia Temba	CDF Child Protection and Participation Officer
Lennyster Byalugaba	Girls Empowerment Officer
Dorothy Ernest	MEL Officer
Michael Kehongoh	C-SEMA
Leodgard Lazarus	ANPPCAN Tanzania
Nancy Minja	CDF
Elias Maganya Magori	Traditional leader

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