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#13 Gaining Traction: Promising Shifts in Gender Norms and Intimate Partner Violence During an HIV prevention Trial in South Africa

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GAINING TRACTION:

Promising shifts in gender norms and intimate partner violence during an HIV prevention trial in South Africa

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Background

- HIV and violence prevention programs increasingly seek to transform gender norms among participants
 - Harmful gender norms widely recognized as fundamental driver of HIV and intimate partner violence (IPV) (Pulerwitz et al. 2010; Jewkes et al. 2010; Barker et al. 2010)
 - Gender norms also affect uptake of services across the HIV care cascade (Pulerwitz et al. 2019; Sileo et al. 2019)
- Evidence lacking on:
 - Whether it is possible to shift gender norms at the community level
 - How such shifts occur and how they affect IPV

Tsima (“Working together”)



activate your right
to health
promote gender
equality
activate treatment
to prevent hiv
end stigma
activate your
community

- Rural Mpumalanga Province,
with 23% HIV prevalence (HSRC 2018)
- 3-year community mobilization intervention (2015 – 2018)
 - Focused on reducing social barriers to engagement in HIV care—including restrictive gender norms and IPV
 - 2-day workshops, other community activities, leaders/stakeholder engagement
 - Implemented by Sonke Gender Justice



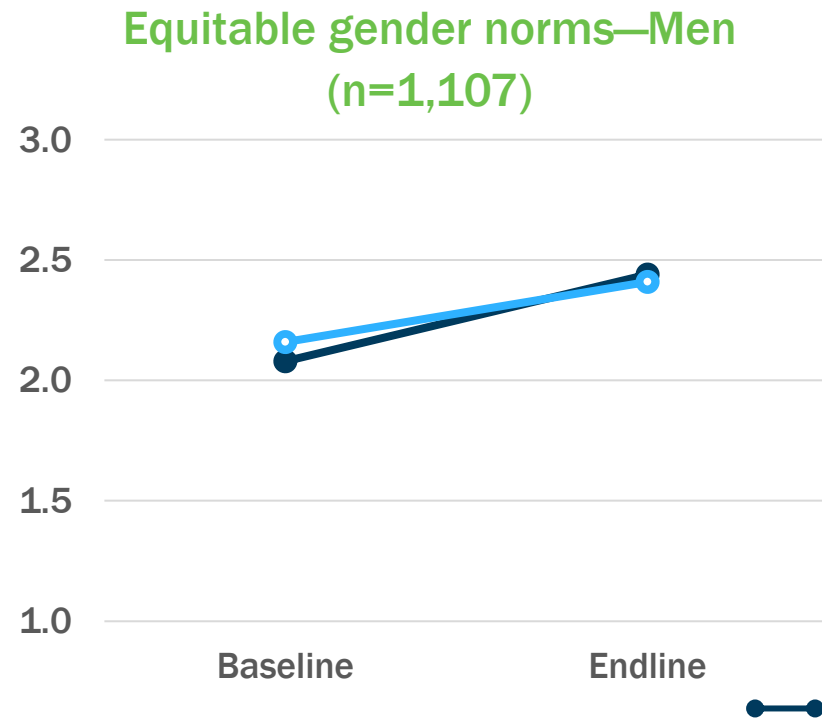
Current study was 'nested' within community-based intervention trial

- Cluster randomized controlled trial (RCT)*
 - 15 villages randomized to intervention (8) and control (7)
- Data sources for current study
 - **Pre-post cross-sectional household surveys (2014, 2018)**
 - ~2,160 randomly selected men and women ages 18–49
 - **Qualitative research**
 - 59 community members and 38 intervention staff
 - Conducted in 3rd year of intervention (2018) & post-endline (2019) to help explain survey results

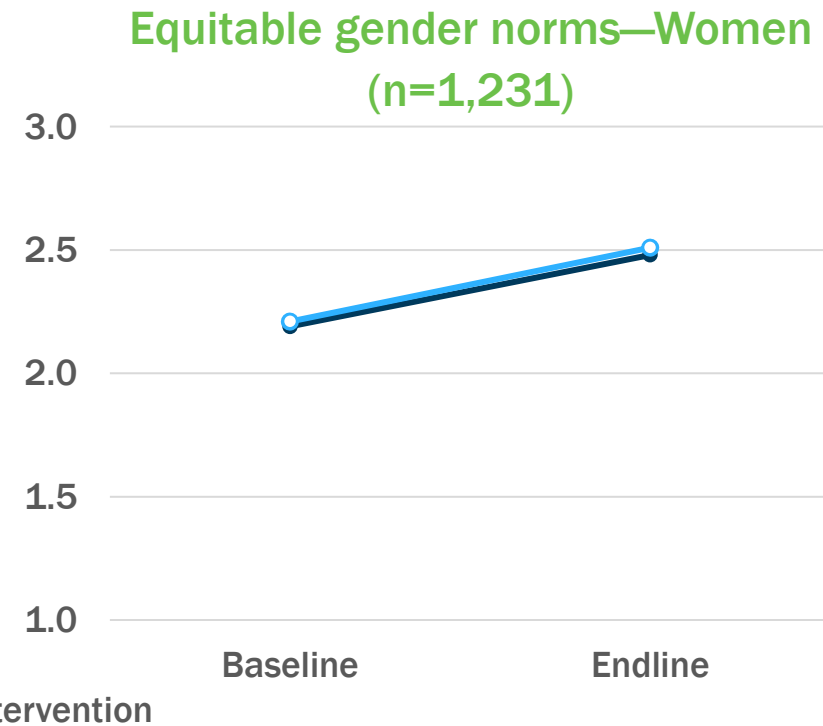
*Lippman et al. 2017; NIMH grant number 1R01MH103198-01A1

Did gender norms change?

- Yes—large increase in endorsement of equitable gender norms, in both intervention and control communities



*Equivalent to a 17% change****



*Equivalent to a 13% change****

*** $p < 0.001$ Gender norms were measured using the GEM scale (Pulerwitz et al. 2008). All analyses adjusted for the survey sampling design; effect estimates controlled for age, marital status, education, employment status.

Why such widespread improvements?

- Follow-up qualitative research suggested shifts influenced by rapid increase in access to media (via satellite TV, smartphones) in last 3–4 years
- This increased exposure to serial dramas modeling equitable relationships and negatively portraying violence

There is a change...it was rare to find DSTV in our community some years ago.... But nowadays every household has DSTV, everyone owns smart phones.
—Male community member

...in the television...you see two people have different views in their relationship. You can see them having arguments then later they sit down to resolve their differences...this is able to unite them.
—Male community member



Changes in IPV

- Among younger men, IPV perpetration declined in both intervention and control communities (aOR for survey round = 0.40 ($p < 0.05$))
- Among younger women, there was a significant intervention effect
 - IPV experiences decreased in intervention communities, and increased in control communities (aOR for intervention effect = 0.53 ($p < 0.05$))

All analyses adjusted for the survey sampling design; effect estimates controlled for age, marital status, education, employment status.

Why did IPV decline?

- Qualitative research suggested that reduced IPV in intervention villages was due to couples learning to communicate more equitably and constructively through Tsimba
- Tsimba may have facilitated personal reflection about narratives from TV, helping participants connect what they saw to their own lives

I was not communicating with her.... She was always complaining about it, arguing and sometimes I was abusing her physically when she complained, but Tsimba has changed that, we always communicate nowadays.

—Male community member

There is a big difference between watching the soapie without someone who can explain much or can tell me the lesson.... It is different when I am there facilitating, engaging, sharing common experiences... coming from the same village.

—Community mobilizer

Summary of findings

- There was a population-level shift toward greater endorsement of equitable gender norms between 2014 and 2018, potentially linked with escalation in media access
 - Local (AHDSS) and national DHS survey data confirm this increase in access via satellite/smartphones
 - We observed a similar ‘secular trend’ in gender norms in a study with ~2,000 men in Durban (KZN province)
- There was also an intervention effect on reported IPV among younger women, potentially via improved couple communication/conflict resolution skills

Implications

- Gender norms can shift substantially at the community level, in a relatively short period of time
- Pay attention in strategic planning and intervention development to broad social changes underway—and consider how these changes can be leveraged to improve health behaviors
 - For example, rapidly expanding media and internet access across sub-Saharan Africa
- Emphasize critical reflection and skills-building around equitable couple communication/conflict negotiation in HIV and IPV prevention programs
 - May help translate gender norms shifts into behavior change
 - Cost-effective intervention models available; can be built into ongoing programming, across sectors

For more details
about these analyses,
see our recently-
published paper

RESEARCH ARTICLE

Gaining traction: Promising shifts in gender norms and intimate partner violence in the context of a community-based HIV prevention trial in South Africa

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Abstract

Background

HIV and violence prevention programs increasingly seek to transform gender norms among participants, yet how to do so at the community level, and subsequent pathways to behavior change, remain poorly understood. We assessed shifts in endorsement of equitable gender norms, and intimate partner violence (IPV), during the three-year community-based trial of *Tsima*, an HIV 'treatment as prevention' intervention in rural South Africa.

Methods

Cross-sectional household surveys were conducted with men and women ages 18–49 years, in 8 intervention and 7 control communities, at 2014-baseline ($n = 1,149$) and 2018-endline ($n = 1,189$). Endorsement of equitable gender norms was measured by the GEM Scale. Intent-to-treat analyses assessed intervention effects and change over time. Qualitative research with 59 community members and 38 staff examined the change process.

Results

Nearly two-thirds of men and half of women in intervention communities had heard of the intervention/seen the logo; half of these had attended a two-day workshop. Regression analyses showed a 15% improvement in GEM Scale score over time, irrespective of the intervention, among men ($p < 0.001$) and women ($p < 0.001$). Younger women (ages 18–29) had a decreased odds of reporting IPV in intervention vs. control communities (aOR 0.53;

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Through operations research, Project SOAR will determine how best to address challenges and gaps that remain in the delivery of HIV and AIDS care and support, treatment, and prevention services. Project SOAR is producing a large, multifaceted body of high-quality evidence to guide the planning and implementation of HIV and AIDS programs and policies. Led by the Population Council, Project SOAR is implemented in collaboration with Avenir Health, Elizabeth Glaser Pediatric AIDS Foundation, Johns Hopkins University, Palladium, and The University of North Carolina.

