

Positive Masculinities in a Refugee Context

A Case Study from Uganda



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List of Acronyms

ADA	Austrian Development Agency
ASRH	Adolescents Sexual and Reproductive Health
BCC	Behavior Change Communication
CDO	Community Development Officer
ECHO	European Union Civil Protection and Humanitarian Aid
EMBiE	Engaging Men and Boys in Emergency
FGDs	Focus Group Discussions
GBV	Gender-Based Violence
HH	Household
KIIs	Key Informant Interviews
LCs	Local Councils
MEAL	Monitoring Evaluation Accountability and Learning
NGOs	Non-Governmental Organisations
NMFA	Norwegian Ministry of Foreign Affairs
OPM	Office of the Prime Minister
PSNs	People with Specific Needs
RGA	Rapid Gender Analysis
RMM	Role Model Men (Man)
RMMB	Role Model Men (Man) and Boy/s
RWC	Refugee Welfare Council
SRH	Sexual and Reproductive Health
SRMH	Sexual Reproductive and Maternal Health
UK	United Kingdom
UNFPA	United Nations Population Fund
VAWG	Violence Against Women and Girls

Summary

This exploratory study on positive masculinity in a refugee context was conducted in July 2018 by CARE International in Uganda, Arua sub-office across three (3) refugee settlements of Rhino (including Omugo zone) and Imvepi in Arua district and Bidibidi in Yumbe district of West-Nile.

The objective was to understand more deeply and collect lessons learnt on how engaging men and boys works in the refugee setting, drawing from the experience of two ECHO¹ projects and building on initial lessons documented from the UNFPA funded initiative in June 2017.²

Deep cultural changes and transformation of gender norms do not happen in a short few months nor do they take place in a linear and gradual fashion. There are frequently set-backs, hardening of some position, relaxing of others, and often strident contradictions coexist in an apparent illogical way. Our aim was to uncover any first indicative signs of change taking place, beyond simply the people we involved in our activities. Realistically we did, or should have, expected that these indicative signs would include contradictions, set-backs and ambiguities. Embarking in this type of research was therefore an exercise in maturity by the team, accepting a level of complexity to come to the surface with findings that aren't simply all positive or all negative.

The study employed qualitative methods of data collection including Key Informants Interviews (KII), Focus Group Discussions (FGD) and vignettes.

The study findings indicate that role model men, in addition to making positive changes in their own lives, also reached out to fellow men and boys through one-to-one discussions/talks and through their exemplary behaviour. Findings further indicate changes in gender attitudes and behaviour of men, beyond simply those selected as role models, for example accompanying their wives to health facilities, caregiving and helping with household chores (e.g. bathing children, washing clothes, fetching water). Changes in behaviour were reported throughout the course of our study not only by the Role Models themselves but also confirmed by their wives or female partners and neighbours and other community members. This augurs well for broader social norm changes as per the organized diffusion process envisaged by the approach, whereby individuals spread information through their networks.

Women acknowledged the influence Role Models had on their neighbours and friends and women also reported having more free time to socialize. While the spouses of the RMM reported a change in their homes, this opinion did not emerge with the same conviction among the wives of their neighbours, nor in the community in general. This suggests that the organised diffusion might be taking place as expected but that the duration of the intervention and the time of the study were too short to capture any behaviour change taking root throughout the targeted communities.

The study also revealed some degree of backlash to the changes; for example, some of the men perceived these new behaviours as shameful, contrary to their culture, making women lazy and prejudicial to men's sense of self-respect. Some role models reported being shunned, called names and abused because of their newly-acquired behaviour, especially as they get involved and encourage fellow men to support their wives in household chores. The backlash was also experienced by some role models' wives who reported facing criticism for 'allowing' their men to behave in such a manner. Both however were adamant that the backlash bore no consequence on them and it did not affect their choices.

1. Integrated WASH, Shelter and Protection response to newly arrived South Sudan Refugees and host communities in Yumbe (Bidibidi) and Arua (Rhino Camp and Imvepi) districts of Uganda. 01/04/2017 - 30/09/2018, Multi Sectoral Assistance to South Sudanese Refugees and Host communities in West Nile.

2. Strengthening Multisectoral Approach to Gender Based Violence (SGBV)- Humanitarian Component. 01/01/2017- 31/12/2017.

Finally, the qualitative nature of this study surfaced a more nuanced and at times contradictory evolution of norms and behaviours as well as the different perspectives on these changes held by men and women. While there was broader agreement on men's contribution to household chores, there were stark differences in the opinions of men and their wives regarding a man's willingness to be open and transparent on spending decisions. Both sexes were also in agreement that GBV remains a real and present danger in the targeted communities and likely to erupt especially over very scarce resources. Additionally, both men and women's ambitions for their children also revealed some limitations in the degree of progress towards gender equality: favouring status and earning potential for boys, virtue and marriage for girls.

The study recommends continued and deeper investigations of how to best mitigate the risk of backlash experienced by project participants as well as an assessment of the extent to which the backlash has the ability or potential to impede the desired changes. In this vein, the study recommends greater community and leadership engagement, formal and informal, to address this backlash. It further recommends training more Role Models across the refugee settlements and host communities so that more men and boys are reached to form a fraternity that can support each other. Further, it is recommended that projects include activities that support the couples build alternative peer networks but especially opportunities for RMM's wives to access peer support to better withstand the backlash, an aspect not included in this project but revealed as relevant by this study.

The study highlights the importance of better understanding the non-linear evolution of gender norms and recommends further studies to explore the pace of change seen in this project between the different behaviours the project sought to change.

Finally, the study confirms that it is possible to initiate activities to tackle gender norm change in emergency contexts through short term projects and recommends more investment in gender norm change in emergency/humanitarian response.

In reflection of the rich and nuanced evidence generated through the qualitative methodologies used in this study were able to surface, the team recommends that other projects focussed on gender norms also include mixed methods in both their monitoring and evaluation systems.

Addressing social norms and behavioural change is a process which requires a long time, sometimes generations. Yet this study confirms that change can be initiated fast and that even short-term emergency projects should start to "plant the seeds of change" as immediate effects can be seen. Overall, this study found that Engaging Men and Boys (EMB) is a promising model capable of engendering positive results even within short-terms projects in emergency settings, with gains by far outweighing associated challenges.

Introduction

Uganda is home to 1,154,352 refugees and asylum seekers as of October 31, 2018³. A total of 785,104 (68%) refugees and asylum seekers are from South Sudan with women and children representing 86% of the refugee population and 65%⁴ are under 18 year old. A majority of the South Sudanese refugees are settled in North-western Uganda, also called West Nile Uganda.

CARE International in Uganda has been operating in the West Nile emergency response since January 2014 and currently works in all refugee hosting districts of West Nile. The ECHO funded projects that this study looked at were implemented specifically in the districts of Arua (covering Imvepi Settlement and Rhino Camp Settlement, including Omugo Zone and host communities) and Yumbe (Bidibidi Settlement and host communities).

The South Sudanese refugee population is highly vulnerable, with large numbers of women, children and persons with specific needs (PSNs)⁵. The renewal of conflict in 2016 worsened women and girls already limited freedoms and space and subjected them to the worst forms of sexual violence⁶. CARE's research found that violence against women and girls is pervasive and that 65% of South Sudanese women and girls have experienced physical and/or sexual violence⁷. Research by CARE have also raised gendered protection concerns for men and boys. Emotional and psychological trauma is common among refugees who have experienced violence or have witnessed violence perpetrated against family or other community members. Further, men in the South Sudanese refugee community expressed distress at the powerlessness of their current situation, reflecting the pressure of being unable to perform their socially prescribed role as the provider and protector in the family and community.

Men explained that being stripped of the capacity to provide an income or any form of support to their family was having ramifications for their psychological wellbeing, and for family cohesion. As a result of feeling inadequate and incapable, they shared that this frustration and anger was often directed at their family. For example, one man shared, "I cannot reach to the end of my role as being a man. I cannot provide for my family. I have nothing to give my wife when she asks. And so I get angry."

The pressure on local communities created by the refugee influx and resulting scramble for resources by all people, particularly women and girls, is further exacerbating gender inequality, GBV and women and girls' capacity to voice their needs and issues within women refugee and host community populations.

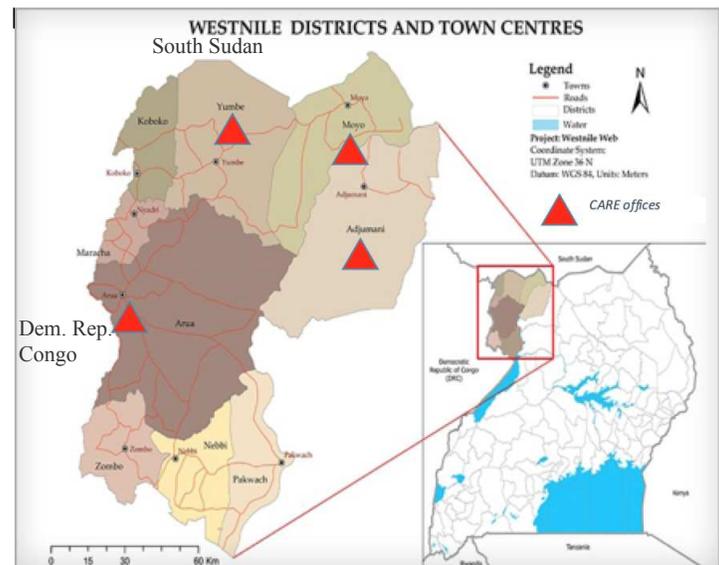


Image 1. Location of CARE Offices in West Nile, Uganda.

3. UNHCR Verification Report.

4. <https://data2.unhcr.org/en/country/uga>

5. UNHCR and OPM define PSNs as unaccompanied and separated children, women, children, and older persons at risk, persons with disabilities and serious medical conditions, and persons carrying trauma.

6. CARE "Gender and GBV Overview, meeting the needs of women, men, girls and boys in crisis, South Sudan", 2016.

7. CARE, The Global Women's Institute and ICR "No Safe Place, a lifetime of violence for conflict affected women and girls in South Sudan", 201.

Brief about the Study Area

Bidibidi Refugee Settlement:

This settlement was established in September 2016 to host the rapid influx of South Sudanese refugees, primarily arriving from the Equatorial region. Bidibidi is located in the eastern side of Yumbe district, stretching southward from the South Sudanese border and spilling over into Moyo District along the western bank of the Kochi River. It is one of the largest settlements in the world with the population of 223,939 people at October 2018.⁸

Imvepi Refugee Settlement:

The settlement is located in the North-Eastern part of Arua District and was opened in February 2017. The settlement covers parts of Lugbari and Imvepi parishes in Odupi sub-county, Terego County of Arua District. The population of the settlement is 128,338 people at October 2018.

Rhino Refugee Settlement:

Rhino Refugee Settlement is located in Arua district and the settlement is divided into a 7 zones between the Enyau River to the north and the Arua-Rhino Camp main road to the south. This include: Ocea, Siripi, Eden, Tika, Odobu, Ofua and Omugo zone. The population Rhino refugee settlement is 101,826 at October 2018.

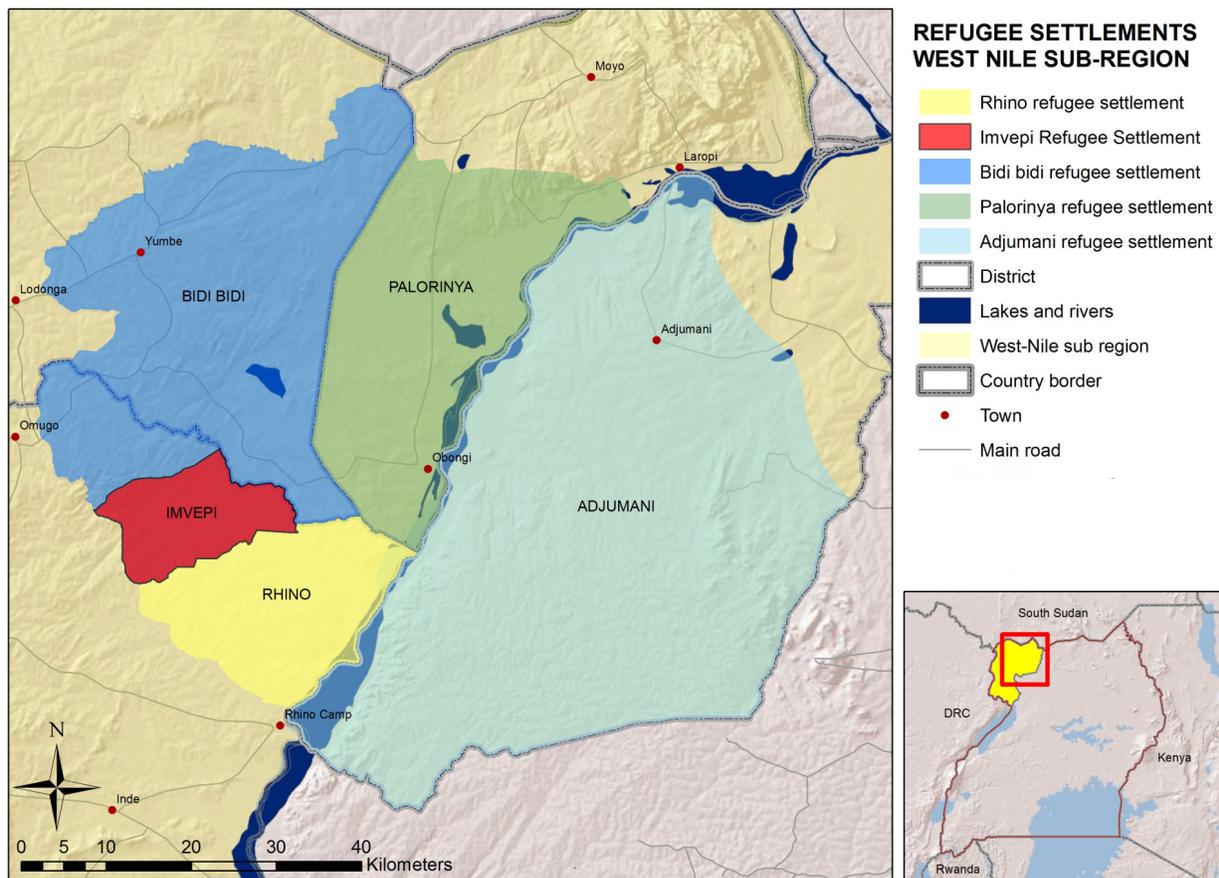


Photo 2: Map of settlement locations in West Nile, Uganda. Credit: Henry Bos/ZOA.

Methodology and Limitations

The exploratory qualitative case study was conducted by CARE International in Uganda, Arua sub-office in July 2018. The study was conducted to explore the acceptability, feasibility, sustainability and effectiveness of the Engaging Men and Boys in Emergencies (EMBiE) approach in GBV prevention and promotion of gender equitable attitudes among the South Sudanese refugees in West-Nile. This particular study focused on the adult Role Models. Field data was collected by trained Community-Based Facilitators and selected Role Model Men with support from CARE International in Uganda staff and the MEAL Advisor from CARE International UK.

The study was conducted in the three (3) settlements of Rhino (Ariwa zone, Ofua zone in Ofua 6, and Omugo zone in Omugo I, II and III including the host communities), Imvepi (Zones 2 & 3) and Bidibidi (Villages 9 & 5) in Arua and Yumbe districts of West-Nile.

Making use exclusively of qualitative methods, this study aimed to go beyond the conventional data collection tools that rely on self-reporting and can carry a considerable bias when interviewees are aware of CARE's agenda.

Understanding social norms requires probing beyond individuals' attitudes and values to explore social expectations and sanctions that guide a person's behaviour sometimes in contradiction with their stated preferences and beliefs.

This is why this report presents more nuanced and occasionally contradicting evidence between what people believe and say they do, and what they would assume someone else in the community would think is right and what they would actually do.

In addition to the more conventional key informants' interviews (KII) and focus group discussions (FGD), which embedded designed structured questions, the study employed a participatory exercise called body mapping and vignettes. The body mapping exercise was used to understand the communities' own perception of how attitudes and behaviours had changed over the course of the project and in relation to the work carried out by the Role Model Men.

Sample Selection

The selected respondents were distributed as below:

- 16 role model men and their 16 wives, all above 18 years.
- 14 couples, each neighbours of the interviewed role model men (total 28).
- 16 FGDs (8 males and 8 females) were conducted with members of the community (4 in Imvepi, 4 in Omugo, 4 in Rhino and 4 in Bidibidi).

Interviews were conducted separately and at the same time for husbands and wives in order to be able to compare the perspectives of both. Female data collectors interviewed women while male data collectors interviewed their husbands. Respondents with diverse backgrounds and experiences were selected from different settlements and clusters to ensure a variety of perspectives. The study also included a few respondents from the host communities in Omugo zone where CARE had been conducting the same activities.

Data collectors (10 men and 11 women) were selected from the existing CARE community-based facilitators within the refugee settlements and were trained to use the data collection tools developed for the exercise. Community-based facilitators were used because of their knowledge of the language and the context. They reported ease in understanding, translating and effectively using the tools provided to generate the required information from the interviews. In a short training session, they were taken through new tools (vignettes and body mapping) for conducting FGDs since it was their first time using this approach. On the last day, field data collectors together with CARE staff conducted a sense-making (analysis) workshop in Imvepi field office to start making sense of the field data generated.

The Three Vignettes

Vignettes are short stories based on very ordinary experiences and dilemmas for the respondent in order to facilitate projection onto the protagonists of feelings and opinions. This enables, at least in part, the respondent to express opinions contrary to the views of the interviewer (or the agency they represent) under the guise of expressing 'someone else's opinions'. In this study, we made use of three vignettes each designed to probe a different area of behaviour of our respondents.

The first vignette presented the story of John and Mary a married couple of refugees living in the same settlement as the respondent. The story focused on sharing economic decisions within the household. Due to financial pressure, John and Mary decide to sell an asset (motorbike) they brought with them when they were displaced. How would John decide to spend the money? Who would he consult? Would John tell Mary in total honesty how much money he realized from the sale?

The second vignette focused on conflict resolution and GBV. Liz, a refugee woman, sells the entire food ration to pay for medical care for one of the children. What reaction will she encounter from Alex, her husband, as she returns home with no food left?

In the third vignette, Fatuma is faced with competing demands on her time as children are to be cared for, the house must be cleaned awaiting the arrival of an important visitor and she runs a small activity as the means of raising some income for the family. Will her husband Juma contribute? Will he be prepared to take on some 'womanly chores' for the good of the family? If he is, which ones?

Limitations

As a qualitative study with a narrow focus, this study concentrates exclusively on the lived experiences and subjective perceptions of the people interviewed. Whilst the vast majority of enumerators were familiar with conducting interviews, some of the more innovative techniques (body mapping and vignettes) used in this study were completely new to them. However, they reported being able to use them with ease.

Baseline data on attitudes and behaviour in relation to gender norms was not collected; consequently, all the changes described here are self-reported and based on recall. We acknowledge that this is an imperfect reconstruction of the situation before the implementation of this approach but we believe it nonetheless surfaces significant information on the change process that men undergo and challenges they face.



The Role Model Men Approach

Engaging men and boys in a systematic empowerment process that helps mobilise them to dialogue, reflection and question stereotypical forms of masculinity in support of adoption of positive masculinity. It also creates opportunity for them to challenge unequal power and gender relations, unequal distribution of roles and rigid social norms that perpetuate GBV and hamper gender equality. Through the Role Model Men (RMM) approach, selected men and youth are supported through a series of trainings to develop positive forms of masculinity, positive attitudes and behaviour through a personal “journey of transformation”. This approach engages men and boys on three different levels: individual and personal level; household and intimate relations; and peer and community relations throughout the three main following components:

1. **Men as clients:** This considers men’s needs and encourages them to use different services, such as sexual and reproductive health (SRH) (e.g. using condoms, family planning), HIV testing and counselling and psychosocial support. In the South Sudanese refugee context, more emphasis is put on psychosocial support, which is also partly provided through the RMM and CARE’s GBV staff and Community Based Facilitators.

2. **Men as supportive partners:** This considers men as allies and resources in improving their own as well as women and girls’ wellbeing, as a result of their engagement in a variety of areas – e.g. maternal health, family planning, neonatal and child care.

3. **Men as agents of change** or “Role Model Men”: in the current refugee setting, this is intense and difficult to carry out because it expects men to make individual changes in an unsupportive environment and with a lot of uncertainties about the future. This involves supporting men with their own personal transformation (e.g. abandoning alcohol, managing frustrations without violence, sharing power, etc.) and using their personal experience of change to support fellow men.

Journeys of transformation – changing “manhood”

The Journey of Transformation training includes various modules and sessions that take men through a deep personal reflection on the impact of their behaviour vis-à-vis women, girls, other men and boys, society at large and them. As men are supported to reflect on the negative consequences and risks of their behaviour, they are taught practical skills from a gender lens that allows them to increasingly see the benefits of more gender equitable, power sharing and caring attitudes. These skills include business development and negotiation skills through which the value of women’s participation in economic activities is examined, financial literacy through which women’s rights to exercise control over income and agricultural production they generate is discussed, sexual and reproductive health and women’s right to protection and a life free from violence through which the impacts of GBV on women, girls and societies at large is analysed. Basic counselling skills are taught so that men learn to listen to one another and can become a source of mutual support. In the refugee setting, the training also included cultural diversity and adapting to a new settings.

Once the trained RMM have demonstrated (often through informal observations and self-reporting) a change in behaviours, each man is supported to reach out to other men (often identified abusive men). As they adopt new behaviours, participating men often become RMM themselves, further enhancing the positive organized diffusion effect of the project. However, this was not necessarily the case yet in this EMBiE (Engaging Men and Boys in Emergency) case study.

CARE Uganda experience with Role Model Men and EMBiE

In 2010, CARE Uganda started engaging men in the Role Model Men (RMM) approach in Northern Uganda through different projects. Many of the men and boys engaged were born in Internally Displaced People (IDP) camps and violence was often the default channel for resolving conflict or accessing resources. The lack of positive adult male role models while growing up in the IDP camps was also a factor for many. In addition, many boys and men had been involved in perpetuating acts of violence (often forcefully recruited) or suffered violence themselves during the insurgency. This left them with limited support to address their own trauma and guilt, often leading to substance abuse and violence against women and girls.⁹ CARE International in Uganda trained 642 Role Model Men and Boys (RMM&B) across Northern Uganda and impacts included; less tolerance for GBV at the community level; for example, at end line only 10% of the men agreed that a wife should tolerate being beaten by her husband compared to 38% in the baseline; while only 32.6% of men at baseline agreed that majority decision affecting them should be taken jointly, at end-line, the number rose to 46.2%. There was also some indication of men abandoning violent behaviours and women and girls increasingly exercising their right to a life free of violence and personal empowerment.

While this initial body of work focused on men and boys outside of humanitarian settings, it was not conducted in a completely stable context as the region was still recovering from the insurgency.

This study however focuses on the RMM approach in a more volatile environment with newly arrived refugees and attempts to capture what had to be changed in the model to be more responsive to needs of male refugees.

EMBiE is a radical innovation in Uganda's refugee crisis since the backdrop of the refugee settlements where residents are mobile and struggle to meet basic needs makes working on gender norms and masculinity particularly challenging. Furthermore, most of the humanitarian agencies active in these refugee settlements target women and girls for their programmes, leaving men and boys feeling left out, as was revealed by CARE's RGA.

Working with men and boys is critical to ensure protection of refugees and host communities. It is also important to note that, per Uganda's refugee programming laws, 30% of all beneficiaries must be host-community members (70% total programming to refugees). Thus, CARE's approach in EMBiE included both refugee men and male youth¹⁰ and Ugandan nationals (men and boys) living in neighbouring host communities. In many cases, men and boys from the host communities live directly outside the refugee settlements and have daily contact and engagement with the refugee populations. Refugees are also able to freely move within these host communities. This report will focus on the experience of the Role Model Men, not boys.

In total, CARE has trained 1,105 RMM&Bs across West Nile region who have mentored over 11,050 men and boys.

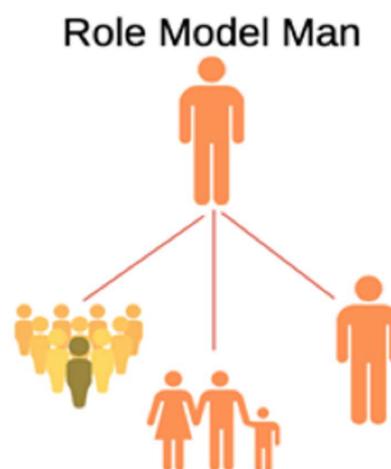


Figure 3. Model of outreach of one Role Model Man. Community, family, and individual.

9. "Empowering Women and Girls through CARE's Role Model Men (RMM) Approach", 2017.

10. Uganda defines youth as 18-35 years old.

Changes CARE Uganda made to Role Model Men Approach for Emergency Context

1.1 Selection of the Role Model Men and Boys

Selection of men and boys to be trained as role models is conducted using a very participatory approach ensuring that community members (women, girls, men and boys including local leaders) take the lead in the selection and CARE staff just facilitate the process.

Once the potential role models are identified, CARE organises a meeting with them to further explain the model and the programme in order for the candidates to give their consent to be trained and supported as role models.

1.2 Training Curriculum

After selection, the first phase of training was organized using the training manuals developed by CARE. The role models were further supported through a series of mentorship, coaching and reflection sessions to help them develop and strengthen positive masculinity through a personal journey of transformation. The training also included reflection on power, GBV and alternative non-violent ways of solving conflict, influence of fathers in caregiving and positive male authority figures.¹¹ Local leaders are also invited to be part of the training to acquaint them with the model and also for them to provide support to the trained men and boys.

1.3 Changes in Outreach

In the refugee setting, the model put more emphasis on mentorship where CARE staff provide regular mentorship and coaching to the trained role models to enable them better engage other men and boys through regular (daily or at least twice a week) meetings include dialogue and reflection sessions. In addition, each role model is responsible for mentoring 10 additional men and boys within their community to adopt more positive forms masculinities.

1.4 Emotional and Psychosocial Support

Many men and boys (both Role Models and non) among the refugees committed, witnessed and suffered violence during the conflict. Engaging in personal reflections besides training, meetings, community dialogues, sports activities were all designed to help restore hope, as many recognised that amidst the challenges, they can still remain productive and contribute to the social and economic development of the community. The RMM were also offered psychosocial support as needed by trained CARE psychosocial counsellors or other specialised partners. Most of those accessing this service were men experiencing emotional problems mostly related to domestic quarrels with their female partners. Some men reported their female partners over drinking and abusing them when drunk. Others reported their female partners calling them names and insulting them (emotional abuse) due to their inability to provide for the family. While it is well documented, including in various CARE's research that women are usually at the receiving end of intimate partner violence and abuse, this is important to acknowledge that men can also be victims of abuse and violence.

11. This training was created by CARE with technical guidance from ProMundo, a global leader in engaging men and boys in promoting gender equality and preventing violence.

Study Findings

2.1 Outreach and Organised Diffusion

All Role Model Men interviewed in this study, in addition to making positive changes in their own lives after their engagement with CARE, also reached out to fellow men and boys, as expected under this approach, hence initiating the organised diffusion of the model. This was also confirmed by their neighbours and wives. Only in one instance in Omugo zone, one wife, whilst aware her husband had participated in the training, did not know if he had attempted to persuade others.

The FGDs with community members not directly targeted by the project confirmed the RMM's outreach beyond their immediate household or neighbourhood. Through sensitization, dialogues sessions and through their exemplary behaviours, the RMM had been raising awareness on how men can use their power positively, be responsible parents and share decision-making with their spouses, mothers, or female partners. They also fostered introspection with their peers to explore constructions of masculinity in their contexts and how it affects their well-being and relationships.

These informal sessions enabled reflection on unequal power relations, gender roles, and rigid social norms and how these impact on women, girls, other men and boys. It is important to note not all men reached are living in a traditional couple (husband and wife) context. Some are single, never married, some are in informal, sometimes polygamous, relationships with and without children. These different situations provide a different experience for each RMM.

"Yes they have changed the way I am seeing and I am also copying from them (my neighbour) [...], nowadays I can help my wife to fetch water, sweeping the compound, cooking and bathing the children."

Luate Richard, a male neighbour to a Role Model Man in Imvepi Settlement

2.2 Changes in Gender Attitudes

Achieving gender equality requires deliberate efforts to engage men and boys to challenge rigid social norms and practices. However, changing such norms is even more difficult in the refugee context and particularly with populations that have been confronted with widespread and commonly accepted use of violence, including VAWG that is often of sexual nature. Given the short-term nature of the project, we were particularly interested to see if the gender attitudes, not only of the male role models but also of the community more broadly, had started to exhibit a change.

The community members interviewed, which included RMM and their neighbours/friends, reported that some men have started to respect women and they no longer treat them as property but as companions. They presented as evidence of this their experience that women were increasingly taking part in the decision-making at community level and family level including in relation to resource management, something which was not common prior to the project. These views were shared widely among the participants in our study with the notable exception of some women who participated in FGDs.

Respondents for FGDs, who were selected from members of the community not directly reached by the RMM, echoed other respondents in outlining changes in favour of greater freedom and female empowerment taking place. This however was more common among men who participated in these discussions, whilst their female counterparts did not fully agree.

Women who participated in these discussions reported continued high levels of abuse and control although they recognised considerable progress had been achieved.

16 Positive Masculinities in a Refugee Context

Our study also revealed some negative attitudes amongst some members of the community. Some reported the approach was trying to “turn men into women” and departing from the cultural norms that have shaped their community so far.

Even against this backdrop, the women who participated in the FGDs still reported changes in behaviour and gender attitudes across the community in favour of greater gender equality.

These differences in opinions between men and women, suggests that while changes have taken place, the two sexes have very different expectations. These women clearly felt the changes did not go far enough and perhaps felt aggrieved about this more than the Role Models’ wives and their neighbours’ wives who had more direct experience of the changes.

2.3 Changes in Behaviour

The study showed that RMM have changed at least some of their previous practices. In particular, they appeared more willing to share household chores, previously the sole responsibility of women. We heard in several instances of men washing clothes, cooking food, fetching water, bathing children, and involving their wives in planning and other decision-making. Our confidence in these findings was also grounded in the observation that these changes were not only reported by the Role Models themselves but also confirmed by their wives and neighbours. Interestingly, our respondents also reported that previously failure to do these very same chores by women and girls would trigger violent reactions from the men.

“My husband no longer quarrels like he used to. [...] He can allow me to go and have chats with neighbours. He even allows me to go to women groups for CARE. He changed from the old way where he used to talk with force to me. He now cares for the baby, washes utensils, sweeps the house and can fetch water.”

Joy Night, female neighbour to a Role Model Man in Ofua 6, Rhino Camp Settlement

A good provider and a moral wife

All our respondents were also asked about their dreams or ambitions for their daughters and sons with the view to assess the extent to which gender stereotypes has seen an evolution. Across all the respondents (refugees and host community), we still see that ambitious for boys are centred around earning and being a provider (doctor, engineer, etc.) and status in society (be a role model, peace builder, respected); whilst ambitions for girls often are centred around morality (‘she will have good behaviour’) and success in the private domain (good marriage). Although there were some notable exceptions where some hoped their daughter would become a lawyer or another type of professional.

Interestingly, some men have started developing high aspirations for their daughters, particularly in relation to high educational achievement (medicine, engineering and law). This was also reflected by their commitment to paying school fees for girls as well as boys and being more engaged with their children’s upbringing and academic progress.

Understanding the importance of selling the food ration

As refugees in these settlements have little to no economic opportunities, the way to access cash is often through selling the hand-outs they receive from humanitarian agencies. When individuals or families have needs (or desires) not supplied by the humanitarian agencies, the only way to fulfil those needs is through converting the food ration into cash. There is also an interesting gendered nuance in this practice. Traditionally men are seen as providers for their families. The refugees themselves described this as “the wife is seen as the goalkeeper” (comparing family life to a football game where the goalkeeper has nothing to do until someone kicks the ball in their direction). Displacement, however, changed all that particularly with the emphasis placed on gender equality by humanitarian agencies.

Whilst men have lost their traditional role of providers from where they draw much of their sense of identity; women have gained a stronger position as they are often the ones to receive all the hand-outs provided by the various humanitarian agencies. Reportedly, during domestic disputes women blame men for not being able to provide for their families. “I’m the wife of UNHCR not yours” is, reportedly, the insulting way women remind men of their loss of status. For men, selling off the food ration to convert it into cash, which they control (including psychological control), is not just a necessity due to circumstances but also a way of regaining power and identity despite its very negative consequences on the entire family (i.e. not having any food until the next ration).

Interestingly, Role Models reported no longer selling of the food ration as one of the behaviours they changed after they received the training. Considering that their economic situation has not changed and earning opportunities within the refugee settlements are still extremely limited; this admission would suggest that the practice has more to do with exercising power over the family and their wives rather than simply economic pressures.

2.4 Women’s Perspectives

As noted all of the RMMs reported having changed their behaviour at least in some aspect and their wives, partners, mothers, and sisters also appreciated the changes. Other women (neighbours and community members at large) were aware of the presence of the RMM in their community and their efforts. In particular, they appreciated RMM’s involvement in ensuring the sanitation of their homes, taking children to the health centres, supporting with clothes washing and collecting water. Women also acknowledged the influence Role Models had on their neighbours and friends.

Interestingly, the majority of women interviewed also reported having some free time to socialise now and this extended beyond the immediate vicinity of the RMM.

“Before the men were the ones digging (farming) and women used to weed crops but now, women can also dig and men can weed crops as well. [...] Before, men were not cooking but now, men can cook.”

Female participant of the FGD

Wives of the RMM acknowledge that, as a result of increased shared responsibilities in their homes, household chores were getting done early hence they now had time interact with their friends and participate in community meetings and other activities within the community.

The body mapping exercise¹² exposed changes in the way men and women behaved in the past, before the intervention and how they behave now.

In this exercise, the hands (practices) clearly highlighted a pattern of changes in the kind of roles seen as appropriate for women and men:

"Now I am able to at least create my own jobs like making kitchen garden which makes me earn some money to help my family."

Mary, wife to a Role Model Man

"My husband normally helps me at home but after the training he has improved for example when I'm breastfeeding the baby, he helps in washing the baby's clothes, I have seen my husband sweeping the compound when I'm carrying the baby. My husband also helps me cook food while I go to fetch water".

Viola Fekira a wife to a Role Model Man

The feet in the body mapping exercise (places visited) also illustrated new freedom for women and men. Where, women were previously unable to attend ceremonies/community dialogues, having formal employment or having a business they were now free to access public places like markets, attend community meetings, attend functions, go to churches and get employed or have their own business. Importantly they also noted how previously girls used not to go to school.

Also, the kind of work women were now able to do exposed them to public spaces as mentioned by one of the respondents, "Before, women used to quarrel (with their husbands) [for them to send money] but now, women have their own businesses in the markets for example selling koboyo (pancakes) and Tamiya".

Having experienced themselves, and seen several changes in the way husbands behaved at home, all of the wives of RMM interviewed re-affirmed the fact that their husbands had changed and almost two thirds of them explicitly related these changes to the training and accompaniment received.

Gossip and backlash

Interestingly the role models' wives reported much more gossip than their husbands. This would suggest that the backlash against these changes might be felt more strongly by women rather than men, particularly as some of the accusatory gossip points the finger directly at the women ("She has bewitched him" or directly addressed at the woman "Why do you allow him to do work in the house?"). The women respondents were also more likely to express hurt about this kind of gossip, although they were overwhelmingly positive about the changes experienced. This finding can be better understood when we relate it to the ambitions both men and women in this study expressed for their children. Whilst education was valued for all, parents, both directly and indirectly engaged by the project, placed a high value on a good marriage and good behaviour for their daughters. Consequently, gossip that brings into question a wife's role in a good marriage is understandably more penalising and hurtful for women.

12. Conducted with members of the community not directly targeted by the project but expected to be reached by the message through the intervention of the RMM.

Men taking up household chores also provided protection to women and girls in potentially dangerous situations such as collecting firewood. With the influx of refugees, natural resources depleted fast, causing women to walk to farther to collect firewood, sometimes causing them to walk in the dark, leaving them in an vulnerable position, including subject to violent attacks as evidenced in CARE's safety audits.

"I appreciate firewood collection support most because the collection places are far."

Wife of the role model man in Bidibidi

Interestingly, some men revealed some changes in their economic choices and priorities, which they attributed to joint cooperation and decision making with their wives. This was echoed by some of their wives. Even more compelling was the finding that, at least some of the RMM were now supporting their wives to engage in economic activities of their own. Traditionally men were rather ambivalent about the issue, often prioritising the man's income over the woman's.

"I think the changes are very good because it has reduced the workload on each of my family members and some of the families are peacefully coexisting with each other."

Viola Fekira, a wife to a Role Model Man in Ariwa Village, Rhino Camp Settlement

While these findings are very encouraging, it is important to read them against the backdrop of the economic realities of these refugees. With virtually no economic opportunities in the area and the humanitarian agencies propensity to prioritise women's economic activities, some of these changes are more likely to find their origin in necessity rather than a profound transformation in social norms. The extent to which these changes might survive once economic activities are resumed, still remains to be seen.

Moreover, the targeting women for income generating activities by NGOs and humanitarian actors continues to carry the potential to further exacerbate the sense of loss among men: the potential for violence remains real.

A further encouraging finding pointing towards a broader change in attitudes, emerged from a large number of respondents reporting changes in the behaviour of their children, which they attributed to the more responsive and involved parenting by fathers. For example, some of the Role Models' wives reported that their children were more respectful of their mothers and attributed this to their witnessing their fathers' increased respect for his wife.

"Before the training, some of the role model men used to real mistreat their wives but after the training, some have now changed. Men are now doing casual work for cash to buy clothes for their children and wives, and paying school fees."

A female participant of the FGD

2.5 Reduced Conflict at Home and Community

The vast majority of the responses across settlements and all categories of respondents pointed to changes in both attitudes and behaviour, specifically a reduction of conflict. This was clearly expressed in the various perceptions and experiences shared by the RMM, spouses, partners, mothers, neighbours and the community members. There was a close relationship between the changes (respect for wives, sharing domestic roles, equal decision making, no family conflicts, among others) made by the RMM, which were depicted by most of the families in the neighbourhood, and extended to the rest of the community.

"My wife and I decided to offer six acres of land to six refugee households for personal use to farm and supplement to their diets. I also encourage my fellow host community members to support the refugees with farmland to grow food and reduce child malnutrition. Through this, I am happy to say 8 other families have offered farmland to refugees at no cost. This has helped in our relationships with the refugees and our interacting has increased, became positive, and starting new relationships."

Gabriel, a Role Model from the host community for Rhino Camp

In general, the changes reported primarily refer to more peaceful coexistence between neighbours and a reduction of quarrels within and outside families. The interventions of the role model men and boys also strengthened ties and trust between refugees and hosts community. They reported supporting each other when one of them has a problem for example during funerals, they gather around him and lift him up.

"I take 4 cups of beans from my food rations so we can cook food for the family of our host community friend that has had a loss and other mourners. We also celebrate together. Some of our Ugandan brothers, share their land with us to grow food. Being Role Model Men has brought us together. It does not matter if we are Ugandan, South Sudanese from this tribe or that tribe. We learnt that we are all men who need to support our families, our wives, daughters, work together and resolve conflicts and problems peacefully."

Richard, Role Model from Omugo, Rhino Camp

A large portion of the FGD respondents who were members of the community not reached by the men and boys reported changes in the behaviour of men in the community particularly in relation to parental responsibility and a reduction in instances of gender-based violence.

As mentioned above, women respondents felt that the changes described were yet to be universally felt within the community. While the wives or partners of the RMM reported a change in their home, majority of women respondents did not report these to the same extent. This difference in opinion may be due to the expected time lapse in the organised diffusion of the project's messages having not reached the entire community, or could be due to women witnessing some changes around them, developing higher expectations not yet fulfilled.

2.6 Gender Based Violence

This study presents mixed findings on Gender Based Violence. Broadly the study points to a significant reduction of GBV cases mirroring some of the other changes described. Participants across the board noted that initial high incidence of GBV in the settlements had subsided. Newly displaced people arriving in the settlements were often carrying a baggage of violence and trauma and initially struggled to adjust to their new circumstances and cope with the sense of loss. Both men and women reported being depressed when they first settled in the refugee settlements as both were facing the loss and trauma of displacement. The way depression was expressed by both however was gendered: women tending to internalise their feelings whilst men transfer their frustration on them by shouting/yelling at when they are angry including engaging in some form of physical violence. This was confirmed by the men participating in FGDs who admitted previously channelling their frustration through use of violence.

Interestingly the body mapping exercise also highlighted a new behaviour. Under the feet portion of the body mapping (new places visited) women reported taking the opportunity to report GBV cases through the newly established GBV desks (also created by the project). Another interesting and unexpected finding relates to a new role spontaneously 'assigned' to the RMM by the community. Women revealed that a new preference had formed for calling upon the RMM rather than other institutions to mediate in simple GBV cases like household disputes. This shows how the community embraced the RMM however is not without risk but we have no further information on how effectively or equitably it is fulfilled by the RMM.

These more positive findings should be moderated in drawing conclusions especially when we take into account the response given to the second vignette. As mentioned, vignettes help us understand social norms and expectations as they help the respondent express views opposed to that of the interviewer and even opposed to their own stated preference or beliefs.

All respondents, including the male role models, reported that Liz would be fearful of her husband upon returning home having sold the food ration to pay for medical care for their child. Liz's fear implies the anticipation of a violent reaction from her husband.

It's interesting to see how the male role models gave an exemplary answer to the other two vignettes and direct questions, but in this case their response was not particularly different from all the other respondents. In contrast with the more veiled response of the male role models, who simply mentioned Liz's fear, their wives on occasion mentioned the expectation of a physical reaction by John ("Alex will definitely fight her" - Omugo).

These findings prompt us to conclude that although substantive progress has been achieved in reducing GBV and promoting non-violent conflict resolution, tensions around resources could still easily trigger violent reactions at household level.

2.7 Shared Decision Making on Household Resources and Parenting

The vignette of John and Mary was precisely designed to capture decision-making choices beyond simply what our respondent thought we would like to hear them say. Expectedly all of the RMM and most of our respondents of both sexes, felt that John would consult his wife in deciding how the money should be spent.

However, a far more interesting finding from this vignette emerges from the difference in opinions between men and women, regarding John's anticipated truthfulness. Expectedly, all of the RMM, believed that John would truthfully disclose to his wife the full amount of money he realised from the sale of the motorbike, however their wives overwhelmingly thought John wouldn't be quite so candid.

A similar pattern emerged between the male and female neighbours of the Role Model and the FGD participants. The men declared that John would be honest about the amount realised to his wife, whilst the wives did not believe that would be the case. Only the female neighbours of the Role Model family in Omugo zone echoed their husband's view that John would be truthful.

Some of the wives believed John would use the money to have fun (other women, drinking) whilst the majority believed he would use it for the family's needs (paying for school fees, food etc.). However, the women's recurrent belief in John's deception suggests that norms might have moved on but perhaps not entirely and that more work is needed.

In line with our expectations, the RMM also reported that Juma (vignette 2) would happily take care of all the domestic responsibilities including caring for the younger children in the family's best interest. However, in some cases (Omugo settlement) the wives of the RMM believed the chores would be divided between the couple according to more stereotypical lines. The man would take care of the livestock and would do some household chores but the caring for very small children would be left to his wife. It is also interesting to note that during our debrief with the enumerators, we learned that this was the only vignette that required some explanation. Some of the respondents' initially said they didn't understand the dilemma since these were all Fatuma's chores: this was her problem. Enumerators then had to ask, 'how would the whole family handle the situation?' to prompt the respondent to reflect how crisis might lead to a more flexible division of labour.

In conclusion, we believe that changes in decision making around household's resources and division of labour need to be further explored to better understand the extent to which the changes reported might be temporary and due to circumstances rather than a sign of permanent transformation.

2.8 Managing Peer Pressure and Support Provided

The RMM reported feeling peer pressure to conform back to their more traditional behaviours, in the form of insults directed much more towards perceived masculinity and their “role” in the household as men/husbands. Men recounted receiving comments like “these men have been bewitched by their wives”. At times the backlash against these newly acquired behaviour/changes was also felt by their spouses or female partners. Others simply pointed fingers at RMM’s wives and gossiping “She has bewitched him” or “Why do you allow him to do work in the house?”.

These types of insults would be directed at both men and their wives and did caused some ostracism towards the women. However, reportedly this also brought the women whose partners/husbands accepted the change in behaviour, closer together. Both men and their wives also stated that they did not care much about the backlash and it did not affect them, nor did it deter them from making changes more changes to their lives.

This study nevertheless recommends that the issue of backlash and its potential detrimental effect on the role models and their partners be explored further. Our research was unable to explore, for example, the role of traditional or religious leaders in relation to these couples’ experiences. In particular, we wish for further investigations to understand if the status and position of those criticising the role models and their wives bears any consequence on their willingness to persist.

The RMM were engaged in regular joint mentorship and support meetings to help the overcome the pressure. They have also been encouraged to continue the dialogue with their peers and spouses and facilitate reflections on the benefits of gender equality and positive masculinity.



Photo 3. Role Model Men, both host and refugee, pictured with CARE staff. This photo shows the friendship and support created between the two groups. Credit: Tara Agaba/CARE.

Recommendations

- ❖ This study focused only on Role Model Men while the project also included boys. To further understand the organised diffusion and any ensuing behaviour changes, and challenges related to the model, it is recommended that future projects applying this model try to understand the specific needs of young men who embark on Engaging Men & Boys approaches.
- ❖ While the Role Model Men approach established peer-support networks for men, no parallel support network was created for their wives who were then left to fend for themselves in the face of gossip and backlash. This study therefore recommends that future application of this model includes opportunities for strengthening RMM's wives or female partners' networks.
- ❖ It's unclear how the newly acquired behaviour would withstand the test of time, particularly in the case of repatriation or when households are able to resume economic activities. The model did not plan for these eventualities nor put anything in place to enable the Role Model Men to continue propagating the message of positive masculinity in a new context. Furthermore, it is unclear if, once households are able to recommence engaging in productive activities, they would revert to more stereotypical divisions of labour. This study recommends that future applications of this model take into account these eventualities as a natural evolution of the refugee context.
- ❖ The study recommends taking a deeper look at the gendered aspect of the backlash, how both sexes experience it and the potential of the backlash to impede the desired changes. We further recommend strengthening connection/support between the RMM and their peers to enable them manage the backlash, reduce the risk of RMM giving up and their wives being harassed.
- ❖ There is a need to continuously engage religious, cultural, local leaders and elders as custodians of traditional gender norms. Sustained engagement with them has the potential to reduce some, if not all, of the backlash experienced by participants in this study.
- ❖ The study confirms that an initial shift in gender norm can be achieved in the emergency context with short term projects and recommends more investment in gender norm change in emergency/humanitarian response.
- ❖ Understanding social norms requires probing beyond individuals' attitudes and values to appreciate social expectations and sanctions that guide a person's behaviour sometimes in contradiction with their stated preferences and beliefs. This study demonstrated the usefulness of qualitative methods and approaches that enable by-passing, at least in part, the bias introduced by social desirability when probing the discrepancies between behaviours and beliefs. We strongly recommend that future studies into this, or similar models, include such methodological approaches to gain a richer and more nuanced understanding of the social dynamics at play.

Conclusion

Addressing social norms and behavioural change is a process which requires a long time, sometimes generations. Yet this study confirms that change can be initiated fast and that even short-term emergency projects should start to “plant the seeds of change” as immediate effects can be seen. Overall, this study found that Engaging Men and Boys (EMB) is a promising model capable of engendering positive results even within short-term projects in emergency settings, with gains by far outweighing associated challenges.

Despite the fact that engaging men and boys in emergencies is a recent field of gender work in Uganda, the RMM&Bs approach was found to be relevant, acceptable and effective in reducing the risk of GBV and in promoting more gender equitable attitudes among the South Sudanese refugees in the refugee settlements in Imvepi, Rhino, Bidibidi and host communities.

The model has contributed to change in gender attitudes and behaviour of men and boys. Changes in gender attitudes in turn has started to produce some gradual change in practices amongst the South Sudanese refugees and host communities beyond simply the Role Models’ households.

However, discussions with the broader community, not directly reached by the activities, also revealed that there are still some negative perceptions and resistance to these changes. Some of the men perceived these changes as shameful, contrary to their culture, making women lazy and prejudicial to men’s sense of self-respect. Furthermore, the particular connotations of the backlash in form of gossip reproaching women in particular for ‘allowing’ these changed behaviours, highlights the importance of sustaining these messages of transformation to foster the acceptance and internalization of new visions of femininity and masculinity.

Overall, this study found that Engaging Men and Boys (EMB) is a promising model capable of achieving positive results even with short-term projects with gains far outweighing associated challenges.

Annexes

Annex A: Questions asked to Role Model Men

1. Where you trained as a Role Model man?
2. What did you think of this activity?
3. After you were trained, did you make any changes?
Probe: What did you change?
Give me an example of your change?
Why did you change?
4. Did you try to influence anybody with this information?
5. If yes, how did these people react to this information?
6. Probe: Was anybody unhappy about this information?
Did they disagree?
7. If yes, give me an example of the things they said when they disagree
8. Did any of these people you talked to make any changes in their lives?
9. If yes, what did they change? Give me an example of the changes you made?
10. What is your dream for your son when he grows up?
11. What is your dream for your daughter when she grows up?

Vignette 1: John and Mary – Shared Economic Decisions

John and Mary, husband and wife, live in Rhino Camp Refugee settlement; they arrived in August 2016 and came with a Bajaj motorcycle. They realize that the handouts they are receiving from UNHCR is not sufficient to meet the growing family needs. Together they agree to sell the motorcycle to meet the needs at home. John sells the motorcycle now he has 2 million Ugandan schilling in his pocket.

Questions:

To who will John listen to advice on how to spend the money?

Do you think John will tell his wife Mary exactly how much money he made selling the Bajaj motorcycle?

How do you think John will decide how to spend the money?

Vignette 2: Alex and Liz – Gender Based Violence

Alex and Liz are married and they have just received their food ration for the month but Liz had sold off the all the ration received to be able to treat one of their sick children. Then the husband Alex comes home and also the wife Liz arrives with the child cured but with absolutely no food left in the house.

Questions:

How will Alex react to the situation?

How will Liz react to the situation?

How will the whole situation be resolved in the end?

Vignette 3: Juma and Fatuma – Shared Parenting Responsibilities

There is a family of Juma and Fatuma, having 3 children: 3 months, 2 years and 4 years respectively.

Having received a ‘must attend’ invitation by UNHCR a day before to attend an event at 2 pm, and they are expecting a visit of the camp commandant in their house on the same day at 1 pm.

Fatuma makes and sells pancakes on the roadside for family income, there is a goat to be tied for grazing, the 4 years old child has to be taken to and picked from school, the 2 children/babies have to feed, there are baby clothes to be washed, jerricans to be taken to the water tank to collect water and the house/compound must be cleaned and food prepared prior to the visit. What will happen?

Questions:

What will Juma and Fatuma do?

What will Juma do?

What will Fatuma do?

Annex B: questions for the male neighbour of role model man

1. Your neighbour (*say the name of the neighbour*) has been working as a Role Model Man, has he ever talked to you about this?
2. If yes, what did you think when he spoke to you?
3. What do you think now after some time?
4. In your opinion, do you think your neighbour has changed his behaviour?
5. If yes, how?
Probe: - What changes did you see?
- What do you think of these changes?
6. What do you think of how your neighbour treats his wife?
7. What do you think the community thinks of the Role Model Men?
8. Do people gossip about this? What do they say?
9. Did you in your life make any changes after he spoke to you?
10. If yes, what changes did you make?
Probe: - Can you give me an example?

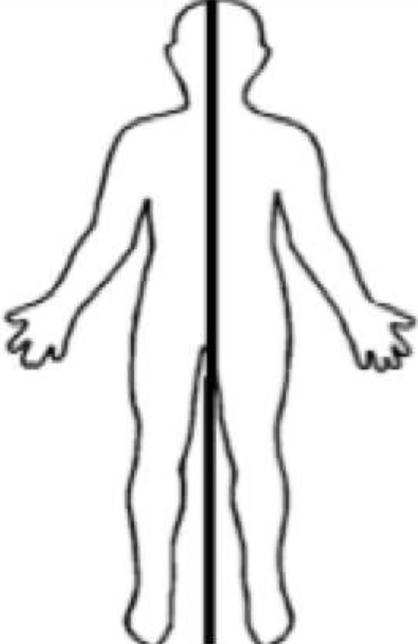
Vignettes 1, 2, 3

Annex C: Questions for the Focus Group Discussion with men from the community

1. In your community who do you think suffers more from the current situation, men or women?
2. Why do you think this?
3. In your community how do you think women are treated?
4. And how do you think men are treated?
5. In the last year, did you see any changes in the way husbands treat their wives?
6. If yes, what are these changes?
Probe: Can you give me an example?
Probe: Why do you think they are changing?
7. Do you think that there are more changes needed?
8. Do you know of any Role Model Men in your community?
9. If yes, do you know what they are doing?
10. What do you think of this activity?

Vignettes 1, 2, 3**Body Mapping Exercise**

You draw body and then a line dividing the left side from the right side. On the left side you write how things were a year ago, on the right side how they were now. Starting from the head all the way to the feet.

	<p>Head: what did people think before about how things are between husband and wife? How do they think now?</p> <p>Eyes: What did you used to see in your community about the way husbands treat their wives? What do you see now?</p> <p>Ears: What did you used to hear before about each men and women and their roles in the community? What do you hear now?</p> <p>Mouth: What did people say before about men and women and their role in the community? What are they saying now?</p> <p>Heart: How did people feel before? How do they feel now? How did men feel before? How do they feel now? How did women feel before? How do they feel now?</p> <p>Hands: What did men and women used to do before? Have they changed some of the things they do now?</p> <p>Feet: Where did men and women used to go before? Have they changed some of the places where they go? Who changed? Where do they go now?</p>
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Annex D: Questions for the Wives of Role Model Men

1. Did your husband participate in the training of the Role Model Men?
2. What did you think about this activity?
3. Did you see any changes that your husband made after the training?
4. If yes, what changes did you see?
Probe; tell me examples of what you saw? What did you see?
5. What did you think of these changes?
6. Which change did you appreciate the most?
Probe: Why do you appreciate this the most?
7. In your opinion, are more changes still needed to happen?
Probe: Which changes are needed?
Why are they needed?
8. Do you know if your husband tried to influence anybody with these things he has learned?
Probe, - who are these men?
- How did he do it?
- What did he say?
9. Are there people in the community that are gossiping about how your husband behaves?
10. If yes, what are they saying?
11. What do you think about what they are saying?
12. What is your dream for your son when he grows up?
13. What is your dream for your daughter when she grows up?

Vignettes 1, 2, 3

Annex E: Questions for the Wife of Male Neighbour of Role Model

- 1 Your neighbour (*say the name of the neighbour*) has been working as a Role Model Man, has he ever talked to your husband about this?
- 2 If yes, what did he say?
- 3 What did you think when you heard this?
- 4 In your opinion, do you think your neighbour has changed his behaviour?
- 5 If yes, how?
 - Probe: - What changes did you see?
 - What do you think of these changes?
- 6 What do you think of how your neighbour treats his wife?
- 7 What do you think the community thinks of the Role Model Men?
- 8 Do people gossip about this?
 - Probe: - What do they say?
- 9 Did your husband make any changes after he spoke to you?
- 10 If yes, what changes did he make?
 - Probe: - Can you give me an example?

Vignettes 1, 2, 3**Annex F: Questions for the Focus Group Discussion with women from the community**

1. In your community who do you think suffers more from the current situation, men or women?
2. Why do you think this?
3. In your community how do you think women are treated?
4. And how do you think men are treated?
5. In the last year, did you see any changes in the way husbands treat their wives?
6. If yes, what are these changes?
 - a. Probe: Can you give me an example?
 - b. Probe: Why do you think they are changing?
7. Do you think that there are more changes needed?
8. Do you know of any Role Model Men in your community?
9. If yes, do you know what they are doing?
10. What do you think of this activity?

Vignettes 1, 2, 3**Body Mapping Exercise**



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