

**Gender Equality & Women's
Empowerment Program III (GEWEP)
Midterm Study**

GLOBAL SYNTHESIS REPORT

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Submitted by:



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Global Insight brings together interdisciplinary teams of scholars and independent researchers to tackle our most politically and culturally sensitive questions in partnership with practitioners. We work across sectors in fragile contexts to produce data-driven, gender-sensitive, multi-methods empirical research. Our work is designed to identify, map, and measure the causal mechanisms at the root of inequality, violence, vulnerability, and chronic insecurity.

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Acronyms

AFG	Afghanistan
BDI	Burundi
CANTERA	Centre for Popular Education and Communications
CARE	Cooperative for Assistance and Relief Everywhere
CN	CARE Norway
COVID-19	Coronavirus 19
CSO	Civil society organization
DRC	The Democratic Republic of the Congo
EMB	Engaging men and boys
GEM Index	Gender Equitable Men Index
GEWE	Gender Equality and Women's Empowerment
GEWEP	Gender Equality & Women's Empowerment Program
ILO	International Labor Organization
MASVAW	Man's Action to Stop Violence Against Women
MLI	Mali
NER	Nigeria
NGO	Non-governmental organization
RWA	Rwanda
UNDP	United Nations Development Programme
UNEG	United Nations Evaluation Group
UN Women	United Nations Women
USAID	United States Agency for International Development
VSLA	Village Savings and Loans Associations
WRO	Women's rights organizations
WLO	Women led organizations

1. Executive Summary

Across six countries, this study¹ examines the effect of a men’s and boys’ engagement intervention—aiming to change men’s and boys’ attitudes and behaviors around gender equality, women’s empowerment, and positive masculinities; including participants’ own masculine identity—and the state of civil society’s rights and protections, tracing improvement and erosion since 2020. Importantly, this is not an evaluation, rather this is a midterm study that comes alongside the Gender Equality & Women’s Empowerment Program III (GEWEP) implemented by CARE International. Instead of evaluating this program, this study focuses narrowly on the attitudinal and behavioral impact of this model intervention for engaging men and boys. GEWEP also sought to contribute to the civil society space, and thus we conclude this study with a discussion of the unique experiences of women’s rights and women-led organizations that did and did not partner with GEWEP teams.

To generate this global report, the Research Team both drew on the six country reports which accompany this study and engaged in entirely new analyses. Analysis for this global report pooled data from all six countries, while using analytical techniques to identify where any one country unduly influenced findings at the global level. To strike this balance between common tendencies across countries, and differences between countries, this study takes care to identify and report country-specific results alongside global findings. This is especially true where we identified countries as unique outliers.

For the section on men’s engagement, the Research Team leveraged an experimental design, advanced statistical methods, and multiple sources and types of data, including a multi-country survey with 3,226 respondents², to investigate the relationship between men’s engagement, including their level of engagement (“treatment saturation”), in program activities and associated changes in their attitudes and behaviors towards women and girls, gender equality, violence against women and girls, and masculinity. Across six countries—Afghanistan, Burundi, the Democratic Republic of the Congo (DRC), Mali, Niger, and Rwanda—the Research Team explores common factors that influence treatment effect, positively and negatively.

The final half of this study focuses on the changing civil society landscape in Afghanistan, Burundi, the DRC, Mali, and Niger, with a focus on mapping the presence of and changes experienced by, women’s rights and women-led CSOs. With this aim, the report examines broad trends in the evolution of civil space across these five countries, including key issues like access to information, freedom of assembly, forced registration, and government engagement, as well as the unique and increasing challenges that women-led organizations face.

At this pivotal time at the midpoint of CARE’s Gender Equality & Women’s Empowerment Program III (GEWEP), Global Insight has partnered with CARE Norway and GEWEP III country offices to produce this global report, which draws on data from six country contexts. The objective of this work is threefold. Firstly, this study aims to better understand the effectiveness of various approaches used

¹ This study was approved in the United States by HML IRB, protocol #2265, and the National Institute of Statistics of Rwanda (NISR), protocol # 0183/2023/10/NISR

² Please note, children were not involved in data collection. This study includes data only gathered from respondents 18 years or older.

in program countries, specifically the relationship between men's engagement in program interventions and changes in men's attitudes towards women and girls, gender equality, violence against women and girls, and masculinity. Secondly, this research sets out to examine common factors that influence program results, positively or negatively, across geographical areas. Finally, this study maps the presence of and changes experienced by, women's rights and women-led CSOs. Learnings from this study are expected to contribute to better implementation and results for GEWEP and better design of any future programs with the goals of norms change, engaging men and boys, and strengthening civil society.

GEWEP 2020-2024

Gender Equality & Women's Empowerment Program III (2020-2024) is a Norad-funded program that aims to improve gender equality in 9 program countries: Afghanistan, Burundi, the DRC, Mali, Myanmar, Niger, Rwanda, Palestine, and Jordan. The program centers on five outcome areas: women's economic empowerment, norm change/engaging men and boys (EMB), strengthening civil society, sexual reproductive health and rights, and improving resilience. This study focuses on two of those outcomes: norm change/engaging men and boys and strengthening civil society. Of note, the program, like this study, was affected by security concerns in several locations. This includes program locations in Myanmar, the entire country of Afghanistan, North Kivu, Rutshuru, Masisi and Nyiragongo in the DRC, Tillaberry, Dosso, Tahoua, and Maradi in Niger, and Bandiagara, Djenné, and Mopti in Mali.

Findings

Engaging Men & Boys

Treatment Effect: Does exposure to engaging men and boys activities make a difference in men's and boys' attitudes towards gender norms compared to control groups not exposed to EMB activities?

Participation in GEWEP is associated with a 5.0% higher GEM Index score at a global level, indicating greater support for gender equality and women's empowerment (GEWE) and greater alignment with positive masculinities from those that participated in the program. This is especially true for Burundi and the DRC which saw the greatest statistically significant, within-country impact of program participation (treatment effect). Participating in GEWEP had a moderate impact on attitudes in Niger, while treatment effect was not statistically significant in Mali, Rwanda, or Afghanistan.

Men who participate in GEWEP are more likely to take action that reduces gender inequality within the household, the workplace, or the community. Those involved in EMB activities are 2.5 times more likely to report that they took action.

Across contexts, GEWEP is creating change best characterized as incremental. Especially sticky attitudes and behaviors related to identity require time and consistency to slowly move participants toward more support for sensitive topics like GEWE and positive masculinities. This finding is illustrated by the .06 GEM Index score difference between those with low and those with high program participation.

Recommendation: Fund additional research into the stickiness of attitudes comparing women’s and men’s equality, value, and rights to one another as opposed to collaborative or additive attitude formulations.

Factors Mediating Treatment Effect: What are the main factors that affect men’s uptake of gender equality or positive masculinity attitudes?

Globally, men who participated more often or in a wider range of GEWEP activities (treatment saturation) hold attitudes more supportive of GEWE and aligned with positive masculinities. Those involved in GEWEP more often and in more GEWEP activities (higher treatment saturation) are 1.28 times more likely to take action to reduce gender inequality. Greater program participation is significantly associated with higher GEM Index scores in Mali and Rwanda, but not in Afghanistan. Afghanistan is the only country where neither treatment versus control comparisons nor comparisons based on men’s level of participation revealed evidence of higher GEM Index scores.

Direct equality between men and women represents a bound to changes in men’s attitudes. Regardless of program participation, men struggle to accept beliefs and norms that situate women as equal to men. Instead, men still view equality in complimentary (women and men having different siloes of equality) and zero-sum terms.

Men reported mockery by peers ignorant to the benefits of GEWE and positive masculinities. Peer pressure to abide by societal norms, especially those norms that are detrimental to gender equality, reduces the sustainability of positive changes in men’s attitudes and behaviors. Alternatively, some fear judgment for lingering negative behaviors. This was especially true for physical violence, which may cause perpetrators to lose important family or community relationships or to be stigmatized as mentally ill.

Political factors also play a large role in the longevity of behavioral change. Those living under especially repressive authoritarian regimes expressed frustration with not being able to put their newly positive beliefs into practice. In contrast, those in countries with governments supportive of GEWE credit community-level meetings and government efforts in helping to solidify GEWEP teachings. Finally, elders and faith leaders play an especially important role in reinforce positive behaviors.

Recommendation: Expand GEWEP activities to more communities. Consider joining together nearby communities during implementation to reinforce peer support across communities.

Recommendation: Continue and expand upon the engagement of village elders and faith leaders as authority figures in their communities. Offer trainings to elders and faith leaders using sacred text to provide evidence they can draw on when advising other men and families. Encourage a formal or informal training-of-trainers model as appropriate in each context.

Recommendation: Support continued research into the complexities of attitudes around masculinities, especially at points of contradiction, interpersonal and sexual violence, and involvement with armed actors.

Program Activities: What are the main interventions used in EMB in a specific country? Does the program use different methods to address different areas of result? What are the different methods? Does the EMB intervention in a specific country prioritize specific areas of results, what are they?

Program activities are localized to target different needs and results areas. All countries implemented GEWE trainings sessions with male leaders and male community members, reflection sessions with community members, and men's groups. Male champion groups were the least common intervention (delivered only in Afghanistan, Burundi, and Rwanda).

Globally, the most effective program activities are (1) interactive, collective sessions with a focus on male leaders and (2) couple or family-centric activities. In Afghanistan, Burundi, the DRC, Mali, and Rwanda training sessions on masculinities or gender equality/women's rights targeting male leaders, and reflection sessions with leaders or community members are associated with more support for GEWE and greater alignment with positive masculinities. Acting as a role model couple and participating in couples counseling and family talks result in higher GEM Index scores in 80% of the countries where these program activities were implemented.

Recommendation: Explore ways to encourage greater collaboration between headquarters and country offices and between country offices implementing GEWE activities. This will eliminate confusion around intervention strategies, improve monitoring and reporting, and offer opportunities for cross-country sharing of best practices.

Civic Space & CSOs

State of Civic Space: In which way has the civic space improved or deteriorated since 2020 in the country?

Globally, the sustainability of organizations in the civic space is stable but consistently affected by (1) the requirement to register and (2) infringement on partnerships and coalitions. Forced registration creates financial and legal barriers for CSOs, which often begin and exist for some time as informal, unregistered organizations. More than one-third of CSOs report that formal registration is inaccessible. The ability to form partnerships and coalitions with other CSOs without government interference is fairly intact outside of Afghanistan. However, in Afghanistan, 87.5% of CSOs report government interference and 93.8% report this interference has increased since 2020.

Freedom of expression is weak and worsening. 79.3% of CSOs report encroachment on the right to freedom of expression, with 75.0% (63.4% without Afghanistan) reporting tighter restrictions in this area since 2020. 45.9% of CSOs report lacking protections for their right to speak freely about human rights, fundamental freedoms, and critically about the government. More than half (51.9%) note this situation has deteriorated since 2020.

Advocacy and lobbying are restricted in 35.9% of cases. Moreover, 41.3% of CSOs (31.8% without Afghanistan) find that dispute and appeal mechanisms within the government are ineffective and often

inaccessible. Permission to assemble, even for peaceful public demonstrations, is increasingly denied for 54.6% of CSOs.

Unique Experiences of WROs & WLOs: How have changes affected women’s rights organizations and women-led organizations? Are organizations led by women affected differently than organizations led by men? Do women’s rights organizations, women-led organizations, and other types of CSOs use different strategies to adjust to or cope with the changes, and how relevant and efficient are these strategies?

Women in civic spaces are often harassed and targeted by men in positions of authority, armed soldiers, and leaders of other CSOs. This contributes to a sense of fear and vulnerability. At the same time, women-led organizations are viewed with greater credibility as trusted allies assumed to seek social, rather than political or financial, benefits. Women-led organizations are important agents of change at the level of social relationships and as partners when negotiating with local governments.

Women-led organizations and women’s rights organizations both face challenges, but women-led organizations appear to struggle more and more consistently. This is true for inaccessible registration process, obstacles to legal assembly, and lower protections for speech and press freedoms. Challenges around unequal access to material and financial resources and persistent capacity gaps weaken WLOs. Coping strategies to navigate these challenges include collaboration and compromise through networks with inclusive spaces where multiple civic organizations can build their capacity, expand their visibility, and providing mutual assistance.

Recommendation: Offer training and initial core funding for women-led organizations to produce sustainable income-generating activities. Provide aid and technical expertise in the development of these alternative funding lines. This funding might also be used to support formal registration of WLOs and WROs. Organizations should prioritize their core activities, but income generation can be necessary as supplemental funding streams. WLOs and WROs struggle with the costs of formal registration, creating financial and legal barriers for existing organizations. Therefore, generating income can be a helpful way to support these organizations.

Recommendation: Foster the continued creation of inclusive spaces (like consortiums, networks, and clusters) where women-led civil society organizations can share best practices, engage in joint programs, and learn from each other. These multi-actor partnerships have proven useful to more effectively adapt to changing circumstances and develop responses.

Recommendation: Explore online campaigning and organizing with WLOs, WROs, and CSOs unable to gather in person. For security reasons, these efforts may need to be initiated out of country, but can be developed in collaboration prior to that point.

GEWEP's Role: How does the GEWEP play a role in increasing the civic space, especially for women's rights and women-led organizations/networks/movement/alliances? What do these actors think of the current and potential roles played by GEWEP?

GEWEP has worked to expand civic space, especially for WROs and WLOs, through (1) improving cooperation and communication between CSOs, (2) facilitating capacity building for local groups, (3) providing funding to enable CSOs to carry out their activities, (4) establishing connections with microfinance institutions, (5) co-creating coordination and decision-making spaces, including an innovation hub to address common problems, and (6) organizing public events for collective awareness raising.

Alternative Methodologies: Are there methodologies used in other programs/organizations with similar goals that GEWEP should learn from?

Alternative methodologies used by WROs, WLOs, and CSOs reflect diverse approaches, with some overlap, to implementing programs similar to GEWEP. This includes building partnerships between organizations led by men and women, signing framework agreements with the government, capacity building of CSO staff, decentralization of activities, establishment of networks, adoption of digital solutions, implementation of income-generating activities, and the integration of positive masculinities into programs. Some have found success through the engagement of all stakeholders in program development, technical and material support for income-generating activities, strengthening local partners' capacities, and collaborative planning with beneficiaries. Finally, WLOs have used networks with inclusive spaces where multiple civic organizations can build their capacity, expand their visibility, and providing mutual assistance.

2. Literature review

Contemporary studies on masculinities recognize that the practice of ensuring and working towards gender equality is incomplete without whole-of-society interventions. As Myrntinen (2021) writes, “gendered expectations and gendered power dynamics are closely tied to other socio-cultural norms and identity markers.”³ Because gender operates as a system of power embedded not only at the individual level—through ideas, beliefs, values, and behaviors—but also at a community level—through the institutions, norms, and structures that uphold those values—true change necessitates the transformation of both the individual and the community.⁴

Gender Transformative Approaches

Scholarship and interventions seeking to holistically challenge these mindsets have adopted a “gender transformative” approach, which prioritizes the critical questioning of norms and eventual adjustment to behaviors, institutions, and structures. Traditionally, existing gender norms have reflected the historically unequal power relations between men and women that exist across both the public and private spheres. While gendered inequities disproportionately harm women and girls, they have also yielded unwanted, unattainable, and detrimental expectations on men and boys.⁵ As Kulkarni (2018) states, “While patriarchy blatantly oppresses girls and women, what often goes unnoticed is that it also locks boys and men into a vicious circle of coercion.”⁶ For these reasons, gender stereotypes generate internal conflict, exacerbate interpersonal harm, and constrain the individual needs, abilities, and expectations of all members of society—even those with power and privilege.⁷

Some examples of the harm created by these expectations are found in patterns of childcare and reproductive health. Empirical studies have found that fathers contribute between 25.0% and 33.3% of the time mothers provide for direct childcare, generating a notably unequal burden.⁸ In terms of reproductive health, some conceptions of masculinity valorize sexual initiation and regular sexual encounters as positive affirmations of manhood, while ignoring health risks. Early sexual initiation and the maintenance of multiple sexual partnerships, which are considered potential high-risk behaviors, become normatively encouraged. In contrast, these same gender norms lead women to feel that they cannot buy, carry, or demand the use of condoms for fear of being labeled promiscuous.⁹

³ Myrntinen, H. (2018). *Navigating norms and insecurity: Men, masculinities, conflict and peacebuilding in Afghanistan*. International Alert Working Paper, November.

⁴ Dolan, C. (2011). Militarized, religious and neo-colonial: The triple bind confronting men in contemporary Uganda. *Men and development: Politicizing masculinities*, 126-138.

⁵ Equimundo.(2017). *The Cost of the Man Box: A study on the economic impacts of harmful masculine stereotypes*. Equimundo.

⁶ Kulkarni, M., & Jain, R. (Eds.). (2018). *Global masculinities: Interrogations and reconstructions*. Taylor & Francis.

⁷ Edström, J., Hassink, A., Shahrokh, T., & Stern, E. (2015). Engendering Men: A Collaborative Review of Evidence on Men and Boys in Social Change and Gender Equality, EMERGE Evidence Review. *Washington, DC: Promundo-US, Sonke Gender Justice and the Institute of Development Studies*. ; MenEngage-UNFPA. (2012). *Engaging Men, Changing Gender Norms: Directions for Gender-Transformative Action*. *New York: United Nations Population Fund*.

⁸ Pulerwitz, J., & Barker, G. (2008). Measuring attitudes toward gender norms among young men in Brazil: development and psychometric evaluation of the GEM scale. *Men and masculinities*, 10(3), 322-338.

⁹ Pulerwitz, J., & Barker, G. (2008). Measuring attitudes toward gender norms among young men in Brazil: development and psychometric evaluation of the GEM scale. *Men and masculinities*, 10(3), 322-338.

Policymakers, practitioners, and researchers have increasingly sought to engage a multiplicity of local stakeholders, particularly men and boys, in work that seeks to advance gender equality. While there is a growing body of literature on masculinities, there remains a considerable gap in knowledge around men's and boys' gendered needs and unique development.¹⁰ And yet, research led by the International Center for Research on Women highlights that it is increasingly critical to engage men and boys in the pursuit of gender equality.¹¹ Data suggests men's conception of their own masculinity and associated values and behaviors are subject to change.¹² Such interventions could help configure new social identities around masculinity that advance equity and help reduce instances of violence and discrimination in local communities. Flagship programs implemented by several aid organizations, including CARE International, have served to evidence the profound impact this approach can have on gender dynamics globally.¹³ Locally, some examples of programs that have yielded positive outcomes are the Centre for Popular Education and Communications (CANTERA) initiative in Nicaragua—which used workshops to challenge unequal gender norms¹⁴—and the Man's Action to Stop Violence against Women (MASVAW) network in India—which engages in both sensitization efforts and works with local stakeholders, boys, and men to form groups and intervene in communal instances of violence, offering support to survivors while doing so.¹⁵ More recently, several systematic reviews of this program area document further insights and best practices.¹⁶

What follows is an empirical 6-country study measuring the magnitude, significance, and potential sustainability of change in men's and boys' beliefs, attitudes, and behaviors as the result of a men's and boys' engagement program—a study which we believe contributes to filling a persistent gap in the literature. Additionally, by examining the state of civic space in the countries analyzed, this research also contributes to the identification and evaluation of challenges future program implementation may face when working with civil society organizations dedicated to advancing gender equality.

¹⁰ Edström, J., Hassink, A., Shahrokh, T., & Stern, E. (2015). *Engendering Men: A Collaborative Review of Evidence on Men and Boys in Social Change and Gender Equality*, EMERGE Evidence Review. *Washington, DC: Promundo-US, Sonke Gender Justice and the Institute of Development Studies.*

¹¹ Gliniski, A., Schwenke, C., O'Brien-Milne, L., & Farley, K. (2018). *Gender equity and male engagement: It only works when everyone plays*. *Washington, DC, ICRW.*

¹² MenEngage-UNFPA. (2012). *Engaging Men, Changing Gender Norms: Directions for Gender-Transformative Action*. *New York: United Nations Population Fund.*

¹³ For variety of scopes and program approaches, see [Equimundo's initiatives](#).

¹⁴ Welsh, P. (2001). *Men aren't from Mars: Unlearning machismo in Nicaragua*. Catholic Institute for International Relations.

¹⁵ Bhandari, Neha. (2008). *Men's action for stopping violence against women: MASVAW*. Save the Children Sweden and MASVAW.

¹⁶ Regional Pacific Women's Network Against Violence Against Women and UN Women (2020). *The Warwick Principles: Best Practices for Engaging Men and Boys in Preventing Violence Against Women and Girls in the Pacific*. *UN Women; Public Health Foundation of India, Health Policy Project, MEASURE Evaluation, and International Center for Research on Women.* (2014). *Evidence-based Strategies to Engage Men and Boys in Gender-integrated Health Interventions*. *Washington, DC: Futures Group, Health Policy Project; Barker, G., Ricardo, C., Nascimento, M., & World Health Organization.* (2007). *Engaging men and boys in changing gender-based inequity in health: Evidence from programme interventions*. World Health Organization.

Intervention Strategies

Over the last two decades, there has been a proliferation of interventions and strategies seeking to explicitly engage men as key stakeholders in gender equality programming.¹⁷ Systematic reviews like those conducted by Guthridge et al. (2022)¹⁸ and Ruane-McAteer et al. (2019)¹⁹ reinforced the effectiveness of well-designed programs engaging men in reducing gender inequality, bias, and discrimination.²⁰ Further work and evaluations of large-scale programming have confirmed the sustained impact of these initiatives,²¹ particularly in the promotion of equitable and nonviolent behaviors and attitudes in areas as varied as care work, sexual and reproductive health, sexual violence, and intimate partner violence.²² An example can be found in the program by the Center of Excellence for Women, which supported boys and men in taking steps to end sexual and domestic violence to encourage healthy, equitable relationships.²³

Efforts to mobilize men and boys have taken many forms, with the most common intervention design being small group discussions and learning. Specifically, “face-to-face community education programs among groups of boys and young men, or mixed-sex groups, of relatively short duration, and in schools, have been one of the most widely used strategies.”²⁴ Some programs have also incorporated counseling, cash assistance, and other social services in both conditional and unconditional ways.²⁵ While the long-term effects of these initiatives are difficult to trace, and there is variation across programmatic approaches and country of operation, these interventions do evidence attitude and behavior improvements, favoring more gender-equal practices, among participants.²⁶

¹⁷ Casey, E., Carlson, J., Two Bulls, S., & Yager, A. (2018). Gender transformative approaches to engaging men in gender-based violence prevention: A review and conceptual model. *Trauma, Violence, & Abuse, 19*(2), 231-246.

¹⁸ Guthridge, M., Kirkman, M., Penovic, T., & Giummarra, M. J. (2022). Promoting Gender Equality: A Systematic Review of Interventions. *Social Justice Research, 35*(3), 318-343.

¹⁹ Ruane-McAteer, E., Amin, A., Hanratty, J., Lynn, F., van Willenswaard, K. C., Reid, E., ... & Lohan, M. (2019). Interventions addressing men, masculinities and gender equality in sexual and reproductive health and rights: an evidence and gap map and systematic review of reviews. *BMJ Global Health, 4*(5), e001634.

²⁰ Peacock, D., & Barker, G. (2014). Working with men and boys to prevent gender-based violence: Principles, lessons learned, and ways forward. *Men and masculinities, 17*(5), 578-599.

²¹ Dworkin, S. L., Treves-Kagan, & S., Lippman, S.A. (2013). Gender-transformative interventions to reduce HIV risks and violence with heterosexually-active men: A review of the global evidence. *AIDS and Behavior, 17*, 2845-2863. ; UNFPA & Promundo. (2010). Engaging men and boys in gender equality and health: A global toolkit for action. *UNFPA*. ; Barker, G., Ricardo, C. & Nascimento, M. (2007). Engaging men and boys in changing gender-based inequity in health: Evidence from programme interventions. *World Health Organization*. Geneva.

²² Greig, A., & Flood, M. (2020). Work with men and boys for gender equality: A review of field formation, the evidence base and future directions. *New York: UN Women*.; Crooks, C. V., Goodall, G. R., Hughes, R., Jaffe, P. G., & Baker, L. L. (2007). Engaging men and boys in preventing violence against women: Applying a cognitive-behavioral model. *Violence Against Women, 13*(3), 217-239.

²³ Center of Excellence for Women. (2014). Engage Men. *Center of Excellence for Women*.

²⁴ Flood, M. (2015). Men and gender equality. *Engaging men in building gender equality*, 1-33.

²⁵ Fleming, et al. (2018). Can a gender equity and family planning intervention for men change their gender ideology? Results from the CHARM intervention in rural India. *Studies in Family Planning, 49*(1), 41-56.

²⁶ Greig, A., & Flood, M. (2020). Work with men and boys for gender equality: A review of field formation, the evidence base and future directions. *New York: UN Women*.

Civic Space & the Experiences of Women’s Rights & Women-led Organizations

Women-led and women’s rights civil society organizations (WLOs and WROs) “inform, educate and mobilize their primary constituencies, enabling them to formulate and rally around common rights-based claims, to participate efficiently in political processes and to influence and hold decision-makers and powerholders accountable, hence enacting a desired democratic practice.”²⁷ Beyond this, these organizations can also help strengthen government capacities to deliver inclusive and efficient services—either by providing technical support or by voicing the interests of marginalized groups.²⁸ Ultimately, WLOs and WROs have a fundamental role in driving changes in social norms and institutions through influencing local leaders, shifting public debate, and transforming social narratives. Backlash from conservative forces often serves as a testament to the “proven ability of these actors to deliver social and gender transformation at deeper levels and larger scale than even progressive political parties, women in government or national wealth growth do.”²⁹

Conflict-affected Contexts

The potential influence of both WLOs and WROs and those mobilizing men and boys is especially critical in contexts experiencing social and political conflict or those in the process of institutional reconstruction. As Wilén (2019) notes “research has shown that for women, the post-conflict period may pose as much, if not more of a threat than the ‘formal’ conflict.”³⁰ As such, there is a need both for social interventions that focus on engagement with gender-sensitive security reform efforts—which both challenge traditional gender roles and acknowledge different security concerns and experiences within and across identity categories—and those that ensure and support women-led and women’s rights civil society efforts so as to address the specific gendered challenges of post-conflict contexts and avoid the regression of women’s social protections.

Even though international agreements mandate the inclusion of gender-sensitive perspectives in security response and the Women, Peace, and Security Agenda³¹ has been institutionalized, violence- and security-related programs still do not adequately emphasize the importance of gender mainstreaming. Attempts to adopt mainstreaming also struggle to avoid reductive approaches to gender-sensitive measures, which often conflate “gender” with “women” and leave out men and

²⁷ CARE Norway. Strategy on Strengthening Civil Society – DRAFT form – February 2023. *CSA, CARE Norway means Civil Society Actors*.

²⁸ Ibid.

²⁹ Literature drawn from Htun, M. and Weldon, S.L. (2012). The Civic Origins of Progressive Policy Change: Combating Violence Against Women in Global Perspective, 1975-2005. *American Political Science Review*. Vol. 106, No. 3. More recently, ALIGN published a report collating a broad range of available research across the world. See Jiménez Thomas Rodríguez, D., Harper, C. and George, R. (2021) Mobilising for change: how women’s social movements are transforming gender norms. *ALIGN Report*. London: ODI (<https://www.alignplatform.org/resources/reportmobilising-for-change>).

³⁰ Wilén, N. (2019). Romanticising the locals and the externals? Identifying challenges to a gendered SSR. In *Handbook on Intervention and Statebuilding* (pp. 314-322). Edward Elgar Publishing.

³¹ Bendix, D. (2008). A Review of Gender in Security Sector Reform: Bringing Post-Colonial and Gender Theory into the Debate. In M. Jacob, D. Bendix, & R. Stanley, *Engendering Security Sector Reform-A Workshop Report* (pp. 9-31).

boys.³² This has consequently hindered the effective integration of gender into conflict-response practice. As such, there remains a need to advance gender-sensitive security reform programs in tandem with social efforts, many of which focus on violence against women. Both these initiatives can draw from local implementation experience to address the gendered challenges inherent to conflict-affected communities in a manner that is context-specific, community-targeted, and designed to address long-term harm reduction.

Effectively reevaluating gendered attitudes and behaviors, and critically engaging with social norms and traditions passed on by previous generations, both necessitates and is improved upon by the participation of boys and men. Lessons derived from the practical implementation of programs that engage men and boys continue to advance our understanding of best practices for incorporating men and boys as both agents and beneficiaries of change, thus helping to drive sustainable impact toward gender equality.³³ In these efforts, women-led and women's rights civil society actors ensure the continued engagement of women in post-conflict environments, as well as the recognition and response to their needs in the transition period. In all, the work of WLOs and WROs encourages the creation of a more equitable and inclusive post-war society.

3. GEWEP III Overview

Gender Equality & Women's Empowerment Program III (2020-2024) is a Norad-funded program that aims to improve gender equality among 1.2 million women and girls in 9 program countries: Afghanistan, Burundi, the DRC, Mali, Myanmar,³⁴ Niger, Rwanda, Palestine, and Jordan.³⁵ This aim is pursued through interventions in five outcome areas: women's economic empowerment, norm change/engaging men and boys (EMB), strengthening civil society, sexual reproductive health and rights, and improving resilience. Results monitoring from the first two years of the program led to the need to better understand the effectiveness of various approaches used in the program countries and to examine the existence and characteristics of common factors influencing the results, positively or negatively, across geographic areas. Of note, the program was negatively affected by security issues in several countries. This was the case in program locations in Myanmar, the entire country of Afghanistan, North Kivu, Rutshuru, Masisi and Nyiragongo in the DRC, Tillaberry, Dosso, Tahoua, and Maradi in Niger, and Bandiagara, Djenné, and Mopti in Mali.

The GEWEP supports and advocates for improving legal frameworks that promote a positive financial environment for women. The Program engages with the respective ministries responsible for financial inclusion and/or gender equality, as well as with the banking and microfinance sector to encourage adaptation in products targeted to the GEWEP participant group. CARE has in several instances joined technical practitioners' platforms or alliances to pursue these objectives. Village

³² Bastick, M. (2018). Gender and security sector reform. In *The Routledge handbook of gender and security* (pp. 359-372). Routledge.

³³ MenEngage Alliance. (2016). Critical dialogue on engaging men and boys in gender justice: summary report. *MenEngage Alliance*.

³⁴ The volatile security situation in Myanmar raised significant concerns around the feasibility of some of the data collection necessary for the MTR to be conducted. Based on this, Myanmar was not included in this mid-term study.

³⁵ Jordan and Palestine are part of the GEWEP, funded by the telethon TV fundraiser. Since the program scope were slightly different and length of program was shorter (2020-2023) they were not included in the mid-term review.

Savings and Loans Associations (VSLA) are the main approach used to increase marginalized women's access to and control over resources. GEWEP also seeks to strengthen civil society in several other dimensions: safeguarding civic space, improving coordination, increasing CSO accountability, and strengthening CSO capacities are some of the main dimensions. The latest CARE strategy for strengthening civil society identified three key and worrying global trends for civil society: (1) only 3.1% of the world population lived in countries with open civic space (2022 figure); (2) the environment for civil society has shrunk continuously since 2010, after 20-30 years of post-cold war growth; and (3) formal "professional" CSOs, more so than informal CSOs which formed during the previously more enabling environment, are now vulnerable to legal and financial repressive measures.

4. Methodology

The Research Team followed a rigorous mixed-methods approach that combined primary quantitative data and qualitative data gathered in all six target countries: Afghanistan, Burundi, the DRC, Mali, Niger, and Rwanda. The study is best understood as two chapters of the same book, with the first half focusing on the engaging men and boys (EMB) interventions and the second half on the changing CSO landscape. Note, the second half of this report does not include an analysis of Rwanda, as a similar study on CSOs in Rwanda was recently completed.

Research Questions

Guiding this research are the following research questions. The Research Team worked to answer all research questions where data allowed however, gaps remain for future study.

Part 1: EMB-Focused Research

Central Research Questions

1. Does exposure to EMB activities make a difference in men's and boys' attitudes towards gender norms compared to control groups not exposed to EMB activities?
2. What are the main factors that affect men's uptake of gender equality or positive masculinity attitudes?

Program Mapping

3. What are the main interventions used in EMB in a specific country?
4. Does the EMB intervention in a specific country prioritize specific areas of results, what are they? (for example, intimate partner violence, women's ability to earn their own income, men helping with housework and childcare, women's sexual and reproductive health decisions, child marriage, etc.).
5. Does the program use different methods to address different areas of result? What are the different methods?
6. Is there a mechanism in the program to capture and record the negative unintended impacts connected to EMB interventions? How does the program address negative unintended impacts?
7. Are there other methodologies used in other programs/organizations with similar goals (Changing Norms/men's attitudes) that GEWEP should learn from?

Part 2: Women's Rights & Women-Led CSOs-focused Research

1. In which way has the civic space improved or deteriorated since 2020 in the country? Especially in terms of the following:
 - a. Ability of CSOs to access information
 - b. Ability of CSOs to engage in dialogs with the authorities
 - c. Ability of CSOs to express disagreements
 - d. Ability of CSOs to join together to express views
 - e. Ability to register and work
2. How have changes affected women's rights organizations and women-led organizations?
3. Are organizations led by women affected differently than organizations led by men?

4. Do women's rights organizations, women-led organizations, and other types of CSOs use different strategies to adjust to or cope with the changes, and how relevant and efficient are these strategies?
5. How does the GEWEP play a role in increasing the civic space, especially for women's rights and women-led organizations/networks/movement/alliances? What do these actors think of the current and potential roles played by GEWEP?
6. Are there methodologies used in other programs/organizations with similar goals that GEWEP should learn from?

Key Terms & Definitions

Women-Led Organization (WLO): Any non-governmental, not-for-profit and non-political (party) organization where two-thirds of its board (including the Chair) and management staff/volunteers (including the Executive Director) are women, and which focuses on women and girls as a primary target of programming.³⁶

Women's Rights Organization (WRO): Any non-governmental, not-for profit and non-political (party) which also fits one of the following criteria: (1) an organization that self-identifies as a women's right organizations with the primary focus of advancing gender equality, women's empowerment and human rights, or (2) an organization that has, as part of its mission statement, the advancement of women's and girls' interests and rights (or where "women", "girls", "gender" or local language equivalents are prominent in their mission statement), or (3) an organization that has, as part of its mission statement or objectives, to challenge and transform gender inequalities (unjust rules), unequal power relations and promoting positive social norms.³⁷

Other CSOs (CSOs forthwith): Any non-governmental, not-for profit and non-political (party) which do not meet the WLO and WRO criteria outlined above.³⁸

Social movements: An organized set of people and their groups, networks, and organizations—vested in making a change in a situation by pursuing a common political agenda through collective action.³⁹

Informal/Unregistered CSOs: Civil society groups that overlap with the community but not the state⁴⁰—or formally registered with state authorities.

³⁶ CARE International PIIRS definition (2022), based on [Time for a better Bargain: How the Aid System Shortchanges Women and Girls in Crisis](#). PIIRS is an internal data management tool utilized by CARE International in its operations.

³⁷ Ibid.

³⁸ While CARE's typical definition for CSOs may include a more expansive collection of entities, including some private sector actors, like small enterprise cooperatives, this study keeps the definition of other CSOs more closely aligned to the definitions for WLOs and WROs. This enabled a higher level of comparability between all organizations involved in the study.

³⁹ See [Supporting Women's Social Movements and Collective Action: A CARE Position Paper and Guidance Note](#), 2019.

⁴⁰ Davies, S., & Hossain, N. (1997). *Livelihood adaptation, public action and civil society: A review of the literature* (IDS Working Paper No. 57). Brighton: Institute of Development Studies.

Engaged Men and Boys: Men and boys engaged in program activities as participants, supporters, allies, and champions. Qualifying program activities involve men and boys “coming together to reflect on gender relations and expectations men/boys face [masculinities] and taking action for transforming oppressive gender norms and promoting gender equality.”⁴¹

Gender Equitable Men (GEM) Scale: A scale to directly measure attitudes toward “gender-equitable” norms. The scale was designed to provide information about the prevailing norms in a community, especially amongst men in a community, as well as the effectiveness of any program that hopes to influence them. The GEM scale consists of statements across various domains, including overall gender equality and norms, gender roles in the home, positive and negative masculinities, sexual relationships, violence against women, women’s roles in the workforce, and positions of political power.⁴²

Authoritarian Regimes: Most often, systems of government without established mechanisms for the transfer of executive power and which do not afford citizens civil liberties or political rights. Formal definitions define an authoritarian regime as a “government centered on the strict subjection of citizens to the authority of the state.”⁴³ These structures have a “heavy reliance on oppressive measures, and on the military and police for their enforcement.”⁴⁴

Sampling

Sampling Frames

Men directly reached by GEWEP III in Afghanistan, Burundi, the DRC, Mali, Niger, and Rwanda constitute the treatment sampling frame for the quantitative survey and qualitative in-depth interviews from which data was collected on the engaging men and boys component of GEWEP III. Men in villages (at least 10-15 kilometers from treatment groups) with similar characteristics to those in the EMB program, but who had never been reached or involved in EMB activities, constitute the sampling frame for the control group.

Additionally, all WROs, WLOs, and other CSOs form the sampling frame for the data collection efforts on changes in civic space and the role GEWEP has had in affecting these changes.

Sampling Strategy

Sampling took into consideration (1) security concerns and related access constraints, which led to the selection of some locations over others and to the use of phone surveys in some locations, and (2) resource constraints. Taking these two points into consideration, the Research Team followed the sampling strategy outlined below.

⁴¹ See *Engaging Men and Boys for Gender Equality Series: Stories of Engagement*

⁴² Pulerwitz, J., & Barker, G. (2008). Measuring Attitudes toward Gender Norms among Young Men in Brazil: Development and Psychometric Evaluation of the GEM Scale. *Men and Masculinities*. 10(3), April 2008 322-338.

⁴³ Stearns, P. N. (2008). *The Oxford Encyclopedia of the Modern World*. Oxford: Oxford University Press.

⁴⁴ Stearns, P. N. (2008). *The Oxford Encyclopedia of the Modern World*. Oxford: Oxford University Press.

Part 1: EMB-Focused Research

Quantitative survey with men. For the treatment group, the Research Team randomly selected villages within regions where the EMB activities took place. The number of villages selected within each region was roughly proportional to the number of villages with EMB program activities in that region. Enumerators were then instructed to survey all men directly engaged by the program within selected villages. For the control group, the Research Team selected a comparable number of demographically similar villages where the EMB program did not operate from within the sub-regions where the program did operate. The suitability of selected treatment and control communities was subject to confirmation by the Research Team's local lead researchers and CARE country office teams. Based on the estimated size of each control community, enumerators were instructed to sample men from every *n*th household (so, if there are 100 men in a village and we want to speak with 10 of them to match the sample size of the comparable treatment community, every *n*th household equals every 10th household, or 100/10). Where data collection was only possible by phone, enumerators or local community representatives entered communities and gathered a list of phone numbers from consenting men, from which a sample of respondents was then selected at random.

Qualitative In-Depth Interviews with Men. For the treatment group, the Research Team used purposive sampling to target men who appeared to have very strong positive reactions to the program and men who appeared to have weak reactions to the program. To achieve this, during the survey data collection the Research Team identified men in the quantitative data who met the following criteria: (1) above average (usually in the top 75th percentile or above) program participation and either (2a) above average GEM Index scores (where possible, prioritizing selection of those with scores in the top 75th percentile or above) OR (2b) below average GEM Index scores (where possible, prioritizing selection of those with scores in the bottom 25th percentile or below). The qualitative interview sample included all or a random selection of men who both consented to an in-depth interview when taking the quantitative survey and met these selection criteria in the qualitative data collection locations (all treatment and control group men were asked for their consent for a follow-up interview and phone number for such an interview). Roughly equal numbers of high participating men with high or low GEM Index scores were selected. For the control group, participants who consented to the follow-up interview and provided a phone number were randomly selected for participation.

Part 2: Women's Rights & Women-Led CSOs-focused Research

Quantitative Surveys and Interviews with Representatives from WROs, WLOs, and CSOs. The Research Team surveyed and interviewed a sample of organizations which included both organizations CARE partnered with in some capacity related to GEWEP and organizations that have not partnered with CARE. Meetings with these organizations typically started with the quantitative CSOs survey and then flowed into the qualitative questionnaire. Interviews were done in all countries except Rwanda and covered changes in civic space, adaptations to those changes, and GEWEP's role in those adaptations. These organizations were selected using a combination of purposive and snowball sampling. The Research Team started with lists of organizations provided by CARE Norway (CN) and CARE country offices and then asked for recommendations from those contacts and other organizations. We prioritized interviews with WLOs, aiming for 8 such organizations per country. The next highest

priority was WROs (targeting at least 4 organizations/country), with 2 slots that could be filled by CSOs that do not meet CARE's criteria for WLO/WRO.⁴⁵

Staff & Stakeholder Interviews. Where possible, staff interviews included the country office lead and program manager/specialist(s) most directly involved in the EMB and strengthening civil society components of the GEWEP. Additionally, the Research Team attempted to interview representatives from 2-3 organizations identified by each CARE country office as having also engaged in either norms change work with men and boys and/or work to strengthen civil society. These interviews were not possible in every country, as many organizations engaged in this work could not make time for these interviews.

⁴⁵ Sampled CSOs self-identified as WROs, WLOs, and CSOs during initial recruitment into this study. Then, CSO representatives answered survey questions which classified them based on CARE's definitions of each type of entity. The country reports include in their sampling sections the organization's self-reported categorization. However, as the analysis section here disaggregates the data by CARE's definitions when reporting on the different experiences of WROs versus WLOs, we report the sample size based on the survey questions which categorize organizations based on CARE's definitions.

Sample

Table 1 below shows the sampled number of individuals and organization representatives included in this study.

Table 1. Sample of Individuals and Organizational Representatives

	Afghanistan	Burundi	DRC	Mali	Niger	Rwanda
EMB Participants in Sampling Frame*	648	938	498	801	146	563
Quantitative Survey Sample - EMB						
EMB Participants	90	471	251	396	125	281
EMB Control	90	467	247	405	121	282
EMB TOTAL (quantitative)	180	938	498	801	246	563
Quantitative Survey Sample – CSO*						
No. of WLOs	6	3	8	4	8	--
No. of WROs (which are not WLOs)	10	6	6	9	6	--
No. of other (not WLOs/WROs) CSOs with focus on gendered issues	0	0	0	4	0	--
CSO TOTAL (quantitative)	16	9	14	17	14	--
Qualitative In-Depth Interview Sample						
EMB Participants	14	28	13	14	14	28
EMB Control	14	28	15	12	14	28
Key Informant Interview Sample						
WROs, WLOs, CSOs	17	10	14	13	14	0
CARE Staff	3	3	2	3	3	0
Organizations with Similar Interventions	0	0	2	0	1	0
TOTAL (qualitative)	48	69	46	42	46	56

* Note: Criteria are based on the answers to survey questions, not how organizations self-identified during interview recruitment, leading to a smaller sample of non-WLOs/WROs for comparison. Additionally, some organizations completed the interview (see key informant interview sample below) without completing the survey or vice versa.

Detailed Methodology

The study methodology is best understood in the four phases outlined below. Data collection took place both consecutively and simultaneously across target countries, with some adjustments made as needed.

Phase I: Desk Review

Phase 1 began with a detailed review of all background documents and data, including reports and previously collected program data, and related academic and practitioner literature. The literature and data review (1) familiarized the Research Team with program rationale across contexts, relevant academic and practitioner literature, databases, staff, implementers, stakeholders, target groups, activities, and geographic target areas; (2) helped frame the study and finalize research questions; and (3) informed the field data collection plan and data collection tools.

Phase II: Tool Development

Data collection tools were developed to address the research questions using the most rigorous and logical approach and questions, finalized in partnership with CARE teams. Data collection tools included:

Part 1: EMB-Focused Research

- Survey Guide (20-minute delivery)—Male respondents, both program participants (treatment group) and non-participants (control)
- In-depth interview guide (45-60 minute delivery)—Male respondents, both program participants (treatment group) and non-participants (control)

Part 2: Women’s Rights & Women-Led CSOs-focused Research

- Survey guide (10-20 minute completion)—representatives from WROs, WLOs, and CSOs working with gender equality and women’s rights
- KII guide (45-60 minute delivery)—representatives from WROs, WLOs, and CSOs working with gender equality and women’s rights
- KII guide (30-45 minute delivery)—CARE staff
- KII guide (30-45 minute delivery)—stakeholders operating similar types of programs

Final study tools were piloted during enumerator training. While largely maintaining consistency across countries, due to country-specific social and normative framings, some response options and questions varied slightly from country to country.

Phase III: Data Collection

Data collection began with enumerator training delivered by the Research Team. The training covered the study topic, consent, safeguarding, and confidentiality. Piloting of tools also took place at that time. Following training, data collection with men proceeded using the quantitative survey, collected digitally through tablets and/or phones, and followed by in-depth interviews. Simultaneously, country lead researchers conducted interviews with WROs, WLOs, and CSOs (collectively “CSOs”), stakeholders, and CARE/implementing partner staff. Translation and transcription of data took place immediately after data collection.

Phase IV: Data Analysis

The data analysis for this global report offers an entirely fresh analysis of results at the global level, pooling data from all six countries, while also drawing on important observations from country reports where relevant at a global level. Cross-national and comparative research must always consider common patterns across countries, differences between countries, and the role of specific countries

in unduly influencing global means or percentages. To achieve this, we used analytical techniques to generate statistics we could reliably report as global means or percentages, net of the influence of cross-national variation and the influence of outlying countries. The large sample size for the men's survey allowed us to do this using inferential statistics and standardized approaches from cross-national research. For the CSO survey, with a much smaller number of observations, we tested the inclusion and removal of different countries from global percentages to identify the influence of each and arrive at figures that represented common experiences across countries. To further strike this balance between common trends across countries, and differences between countries, we report important country-specific results alongside global findings, especially where we identified countries as particularly unique or outlying. The section below provides more details about the analytical approach for each data source and how the Research Team integrated qualitative and quantitative sources to triangulate findings in response to core research questions.

Step 1: Desk Review

Analysis began with revisiting background documents and data, including reports and previously collected program data.

Step 2: Qualitative & Quantitative Data Analysis

Part 1: EMB-Focused Research

Analysis Strategy (quantitative data): Following a basic descriptive and diagnostic analysis of key variables, the Research Team used multivariate regression approaches to compare treatment and control group outcomes. Analysis of survey data from treatment and control group respondents sought to determine if exposure to EMB activities made a difference in men's attitudes towards gender norms (compared to control groups not exposed to EMB activities). This analysis compared scores on a series of questions measuring attitudes towards positive and negative ideas of masculinity, as well as gender equality and women's rights. These questions, based on survey questions from various iterations of the Gender Equitable Men (GEM) tool and other standard survey instruments, covered themes related to gender roles in the home, positive and negative masculinities, sexual relationships, violence against women, and women's roles in the workforce and positions of political power. When comparing control and treatment group responses to these questions, regression analysis also included variables capturing other experiences and characteristics likely to affect men's attitudes on these topics. The inclusion of these variables, tailored to each country's context for within-country analyses, helped the Research Team assess the extent to which any differences between the treatment and control group resulted from differences in men's characteristics within those groups, rather than their experiences with the program. Similarly, the treatment group survey included a series of questions designed to ascertain the level of exposure of each man to program activities (as well as exposure to similar programs, which, if unmeasured, might confound isolation of the effect of this program). This level of exposure to program activities is called "treatment saturation." The control group was also asked about exposure to similar programs. Among treatment men, responses to questions about program activities formed an exposure or saturation score, which enabled the Research Team to assess the extent to which greater involvement in the program is associated with attitudes more supportive of GEWE and/or more aligned with positive masculinities. The inclusion of exposure to similar programs in multivariate analyses also increases confidence that any treatment effect (difference between treatment and control group scores) is a result of this program and not others.

Qualitative data analysis: Qualitative data analysis of in-depth interviews with men (treatment and control groups) identified key factors which encourage or discourage men from endorsing gender equality or positive masculinity. For program participants, analyses assessed why men hold certain attitudes,

whether men believe their attitudes have changed, and if they attribute those changes to program participation. Control group interviews similarly explored why men hold certain attitudes, any changes they have experienced in those attitudes, and what they believe may be necessary to change attitudes in the future. Analyses of both treatment and control interviews also explored the kinds of actions men have taken to reduce gender inequality and what motivated those actions. To analyze the data generated from these interviews, each interview was coded in Atlas.ti, a qualitative data analysis software. These codes aligned with key themes, especially around how men explained their current and/or changed attitudes and behaviors. We then compared the explanations given by treatment and control group men, as well as treatment men with high and low scores, to ascertain if men in the treatment group, especially high GEM Index scoring men, had different rationales for their attitudes and behaviors and the extent to which those rationales seemed to have been affected by the program.

Additionally, qualitative analysis of interviews with GEWEP country office staff documented the main gender equality and women's rights issues motivating EMB program components and other interventions used to address these issues. Analysis of these interviews revealed the strengths and weaknesses of these interventions, challenges, and lessons learned. Finally, qualitative analysis of interviews with stakeholders operating similar types of programs, where possible, assessed the strengths and weaknesses of methodologies used by those organizations to both engage men and boys in changing norms and also strengthen civil society.

Part 2: Women's Rights & Women-Led CSOs-focused Research

Quantitative data analysis of survey data from WROs, WLOs, and CSOs revealed the types and extent of changes in civic space. The assessment of these changes was based on responses to a series of questions that measure CSOs' ability to register and operate, access information, engage in dialogue with authorities, express disagreements with authorities, and join together to express views.⁴⁶

Qualitative data analysis of interview questions with WROs, WLOs, and CSOs provided details about how these changes affected these organizations, key adaptation strategies used to cope with changes in civic space, as well as GEWEP's role in addressing challenges to the civic space and improving that space.

Ethical Considerations

The Research Team upholds the highest ethical standards in all our work. Because our research examines sensitive questions in fragile environments, upholding the highest ethical standards goes hand-in-hand with our dedication to rigorous scientific inquiry. Not only is the safety, security, and dignity of research participants central to our work, but we also feel that each study must be justified as both relevant and of practical value for partners and participants. This is perhaps especially so given the vulnerabilities and protection issues faced by women and children, but also given the dangers of carrying out research in conflict-affected areas.

In undertaking this assignment, we worked to ensure, respect, and protect the rights of research participants in accordance with known standards, such as those outlined in the UNEG Code of Conduct for Evaluation, as well as CARE's safeguarding policies. Moreover, Global Insight has

⁴⁶ Measures generated from Open Society Foundations' Transparency and Accountability Initiative, compiled in "Improving the Measurement of Civic Space" by Carmen Malena.

established a set of ethical protocols and data protection safeguards that our team follows for all programs. This includes protocols to ensure the security of data and anonymity of participants (see Annex I for more details).

Limitations

As with any study, there are limitations. We worked to anticipate and address these limitations throughout the study. For transparency, each limitation is described below.

- *Security constraints.* The sensitive nature of this study and the changing nature of security in many of the countries involved—especially Mali, Niger, the DRC, and Afghanistan, along with the presence of authoritarian regimes in most of these contexts, namely Mali, the DRC, Burundi, and Afghanistan—required careful thought, planning, and real-time adjustment during data collection. This included moving from in-person to virtual or phone-based data collection in Afghanistan and some communities in Mali, for example.
- *Time and travel restrictions.* Our team took all necessary steps to speak with respondents and stakeholders across all locations, but security constraints and transportation issues limited our ability to physically travel. Phone-based and virtual data collection was undertaken where necessary per security restrictions suggested by Global Insight Sr. Researchers and CARE country offices.
- *Sample bias.* While our sampling methodology and analysis plan aims to minimize bias and provide a representative sample of respondents, some bias may still appear.
- *Social desirability bias.* While the Research Team is trained on and aware of ethics and the importance of reducing bias, researchers are never able to eliminate all influence on interview participants. Our team worked to mitigate bias by ensuring participants' confidentiality and the desire of our team for open, honest answers to all questions.
- *Collaboration resistance.* Due to the sensitivity of this topic and the current security environment in most of the target countries, there was some resistance to sharing details or participating in the study. Every effort was made to meet participants where and when they felt most comfortable and able to participate. Consent is the foundation of our work. Where consent was not given, no data was collected.
- *Subjectivity bias.* Data collected represents respondents' perspectives, which in some cases (survey) is standardized, and in others (interviews) cannot be standardized. Rigorous coding methodologies were used to analyze all data, though this does still leave room for some subjectivity in both the responses given and the analysis and interpretation of patterns in the data.
- *Rwanda sampling for EMB outcome area.* In Rwanda, the program primarily targeted men with a history of intimate partner violence. Additionally, the control population differed from the treatment group in important ways, most especially, the control group was significantly younger than the treatment group and had unusually high GEM scores when comparing across countries. This demographic difference between the control group and treatment group made assessing the influence of the project by comparing the treatment group's attitudes to the control group challenging. Age is an important factor to consider in Rwanda, as reaching adulthood before or after the civil war and genocide has an impact on attitudes towards gender

equality. Rwanda has made impressive strides in advancing toward gender equality in the post-genocide period, further cementing this experiential difference between generations.⁴⁷

- *Contextual changes.* Some country contexts have experienced significant shocks from the time of data collection to that of report writing, possibly changing the relevance or applicability of report findings and recommendations. This was most clearly the case in Niger as the analysis related to civil society predates the military coup of July 2023. While there is currently scarce research on how this power transition is affecting the operations, freedoms, and protections of civil society groups, the progressive militarization of the state is likely to engender added restrictions for these organizations. As such, the findings and recommendations presented here may have lost some relevance in the context of Niger’s evolving political and security situation.

⁴⁷ For an outline of the progress and limitations of women’s incorporation into social and political leadership, see Burnet, J. E. (2008). Gender balance and the meanings of women in governance in post-genocide Rwanda. *African Affairs*, 107(428), 361-386.; Brown, S. E. (2016). Reshaping Gender Norms in Post-Genocide Rwanda. *Genocide Studies International*, 10(2), 230-250.; and Mbangukira, A. B., Akumuntu, C., & Nyakundi, N.P. (2020). Promoting gender equality in Rwanda: Challenges and prospects. *Journal of Research Innovation and Implications in Education*, 4(4), 79 – 83.

5. Findings

Findings are organized into two main sections: first, EMB-focused findings, and second, CSO-focused findings. Within those sections, there are several sub-sections each centering on a thematic area of importance. We begin each main section with demographics to present a clear picture of those involved in the study. Following demographics, the EMB-focused section explores the treatment effect of EMB activities (1) on a global scale relative to control group members, (2) within each country relative to control group members, and (3) within the treatment group using treatment saturation.⁴⁸ Each section first covers the treatment effect on attitudes and then on behaviors. The second main section of findings, which focuses on CSOs, begins with demographics, and then dives into the current environment for CSOs, followed by changes in the civic space since 2020.

Part 1: Engaging Men & Boys

Demographics

The Research Team collected survey data from 3,226 adult male participants across 6 countries—including 1,614 treatment group respondents and 1,612 control group respondents. At the time of data collection in April-June 2023, the mean age of control group respondents was 42.9 years old and 44.3 years for treatment group men. The majority of survey respondents are married to one wife (81.2% treatment; 74.6% control). Treatment respondents have a slightly higher number of children (mean: 4.6 children, treatment group; 4.1 children, control).

Educational attainment remained consistently low across both groups. Most respondents have not completed primary education—58.1% of control group men and 55.7% of treatment group men have not completed primary school (i.e., had no education or only some primary school education). Only 15.0% of control group men and 17.5% of treatment men have fully completed their primary education. Completion of secondary education or beyond is rare among all study participants, with 13.1% of control and 14.6% of treatment men having finished secondary school or engaged in post-secondary education. Both treatment and control study participants reside mostly in rural areas (72.6% control; 82.2% treatment) and own their homes (80.3% control; 84.4% treatment). The respondents also present similar patterns with regard to employment. The majority of men who work do so in the informal sector (78.7% control; 71.9% treatment), primarily in agriculture and animal husbandry (69.2% control; 70.4% treatment).

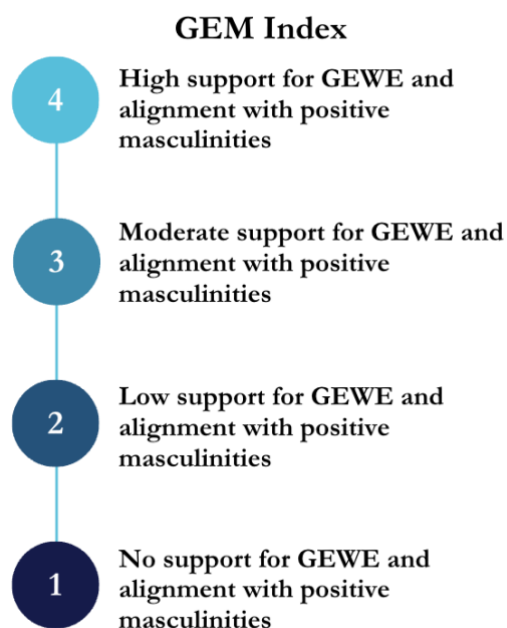
⁴⁸ Several limitations emerged when collecting data to address the research questions posited in this report. We extensively review the patterns and mechanisms through which EMB activities make a difference in men's and boys' attitudes toward gender norms, providing comparative and country-specific data. To address the factors that affect men's uptake of gender equality or positive masculinity attitudes, we incorporate qualitative data from interviews and dedicate a sub-section of the report to explore the factors affecting the "stickiness" and mediating factors of behaviors and perceptions of gender equality. In mapping program activities, we outline the main interventions used in EMB in each specific country, as well as their effectiveness in driving attitudinal change. During the data-collection processes, the Research Team found varied focus areas across target countries, with most interventions organically addressing areas that presented greater need for local participants. Because of this diversity of GEWEP intervention activities and adaptability at the country level, specific research methods were not assigned to each issue area, rather we operated in open dialogue with participants. Finally, country-level programs did not provide information on their practices to handle unintended impacts.

Variation in the data is more visible in the area of income generation. More control group men are the primary income earners in their families (63.4%), as compared to 58.3% of treatment group men. This can influence decision-making processes in the home, as men are more often earning and thus controlling financial decision-making. There is a notable and expected difference (19.5 percentage points) in village savings group or loan association participation, with 67.4% of treatment men reporting their wives were or are part of a village savings group or loan association, compared to only 47.9% of control group men. Finally, points of diversion also emerged with regard to men's leadership in local communities—34.3% of treatment men and 20.4% of control men report holding leadership positions in their community. For more detail, we provide a summary of key descriptive statistics of demographic data in Table 2 below.

Table 2: Demographic data from the descriptive analysis of survey responses

Description		Treatment	Control
Number	Number of respondents	1,614	1,612
Age	Mean age (years)	44.3	42.8
Children	Mean number of children	4.6	4.1
Relationship status	Married to 1 wife (%)	81.2	74.6
	Married to 2 wives (%)	11.1	10.3
	Other relationship status (%)	2.4	6.4
	No relationship (%)	5.3	8.7
Professional status	Does not work (%)	10.4	12.5
	Works in the informal sector (%)	71.9	78.7
	Works in the formal sector (%)	17.6	8.8
Housing	Own their Own Home (%)	84.4	80.3
Location	Rural (%)	82.2	72.6
	Semi-rural (%)	8.9	18.2
	Urban (%)	8.9	9.2
Level of education	No Formal Education (%)	26.8	26.7
	Catechism (%)	6.1	5.6
	Some Primary School (%)	22.8	25.8
	Primary School Complete (%)	17.5	15.0
	Some Secondary School (%)	12.2	13.8
	Secondary School Complete (%)	9.1	8.8
	Some Post-Secondary School (%)	1.7	1.4
	Post-Secondary School Complete (%)	3.8	2.9
Income	Respondent is Primary Income Earner (%)	58.3	63.4
	Respondent's Wife is Primary Income Earner (%)	2.3	2.2
	Respondent and His Wife are Primary Income Earners (%)	27.4	22.9
Leadership Role	Community Leader, of any sort (%)	34.3	20.4
	Village Savings or Loan Association Member (%)	59.8	44.3
	Married to Village Savings or Loan Association Member (%)	67.4	47.9

Attitudinal Changes & Program Participation



Survey participants were asked a series of questions that were used to create a simple index, called the GEM Index throughout this report. The GEM Index runs from 1 (meaning attitudes least supportive of GEWE and least aligned with positive masculinities) to 4 (attitudes most supportive of GEWE and aligned with positive masculinities). A score of 1 represents no support for GEWE and no alignment with positive masculinities, a score of 2 represents low support and alignment, a score of 3 represents moderate support and alignment, and a score of 4 indicates high (or perfect) support for GEWE and alignment with positive masculinities. As one's score increases, so does their support for GEWE and aligned attitudes with positive masculinities.

We find participation in GEWEP, or being exposed to the “treatment,” is associated with higher GEM Index scores at a global level. The mean index score for control group men is 2.7, while that for treatment men is 2.9 (a difference of 0.2). Thus, engagement in GEWEP is associated with a statistically significant difference in support for GEWE and positive masculinities, placing treatment 5.0% higher on the GEM Index scale than the control group men. This means treatment men have nearly moderate support of GEWE and alignment with positive masculinities, while the control group sits at low-moderate support/alignment. When we control for country context and important individual characteristics, the difference between treatment and control groups remains statistically significant, but smaller in magnitude (0.1 rather than 0.2 difference). This is to be expected, as controlling for these variables removes factors that may make treatment group men different from control group men. Accounting for these individual characteristics results in more similar respondent profiles and thus more proximate GEM Index scores.

Looking more closely at between-country differences, treatment effects vary markedly. Figure 1 compares the mean and range of GEM Index scores for each country—the higher vertically the blue box, the higher the mean and range of GEM Index scores. Treatment men in Burundi and DRC show the largest differences from control group men in their same context. Mean treatment group scores in Burundi are in the moderate, approaching high range, while control group scores are low, approaching moderate. From interview data, we find that, when asked about women's household roles, treatment men in Burundi more often (78.6% of the time) spoke positively of women's household roles, compared to only 71.4% of the time for control group men. Illustrating this point further, a control group participant from Burundi stated, “A woman should take care of her husband and children, respect her husband, wash his clothes, and give him well-cooked food...I don't understand men who cook when they're married. It's unacceptable, and I also believe that their wives don't see them as heads of households. The husband must be respected and be superior to his wife.”⁴⁹

⁴⁹ Interviews conducted April-June 2023, Burundi.

In contrast, a treatment group participant from Burundi, when asked the same question, stated, “The family cannot progress without mutual aid in the home...when a man decides to work together with his wife, their children lead a good life...the man must participate in the housework so that the woman also has time to do other things. She’s not meant to stay at home.” This participant attributes his attitudinal changes directly to the program: “Before participating in the [GEWEP EMB] activities of this program, I had no intention of helping my wife. I couldn't even accompany her to the fields to cultivate or harvest. But now I do it easily and I have noticed that there has been progress in home economics.”⁵⁰

For DRC, treatment group scores are moderate, while control group scores are low, approaching moderate. Again, from qualitative data, we find similar trends. When asked the same question about women’s political participation, 68.0% of treatment responses and 45.0% of control group responses in the DRC expressed positive attitudes toward women’s active political participation. When asked if there should be more women in positions of political authority, a treatment group participant explained, “I agree that we need to have more women in positions of political responsibility because women too have the same capacity as men to exercise these responsibilities.”⁵¹ In contrast, a control group participant stated, “I do not agree with this statement because the management of women is not dynamic like that of men. Women can provide support. There are some factors that can limit women to positions of political responsibility, including slowness. Women are not flexible like men. There may be an emergency, but the woman will not be available because she is busy breastfeeding her child...we often notice these are the women who arrive late to the office. Only 30% of women are required to hold leadership positions.”⁵²

Treatment men also have noticeably higher scores in Niger (near moderate, while control group scores are halfway between low and moderate). The GEM Index score difference between treatment and control groups in Burundi, DRC, and Niger is statistically significant and remains so after the inclusion of control variables. For the remaining three countries (Afghanistan, Mali, and Rwanda) the difference between treatment and control groups is not statistically significant. For Mali and Rwanda, some of this relates to the sample of treatment men and control group men. In Mali, this included treatment men in communities where GEWEP had just started. For Rwanda, this included control group men whose characteristics differed from the treatment group in ways that made comparisons challenging. For both Mali and Rwanda, there is some evidence of GEWEP impact when adjusting for these survey sample challenges (discussed more below).

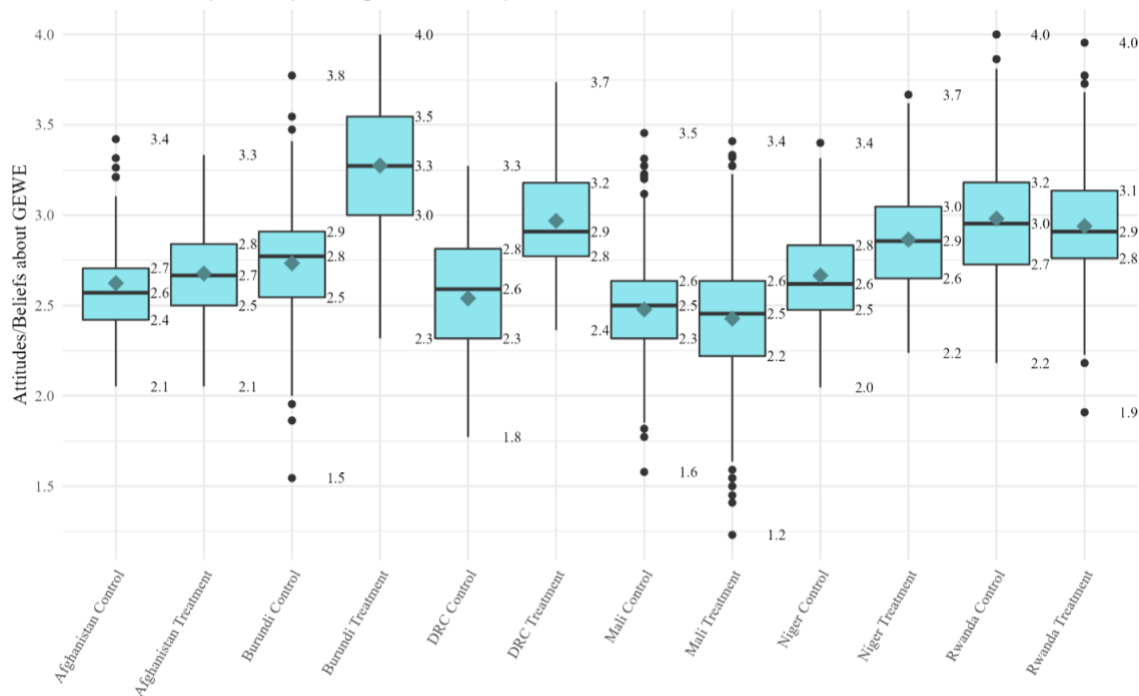
Of note from a country-comparison perspective, if we think of the control group as the “starting point,” or baseline, Rwanda also had the highest control group value on the GEM Index. This suggests generally higher levels of support for GEWE and alignment with positive masculinities in Rwanda compared to other contexts. Burundi similarly had a higher starting point, followed by Niger. The control group means on the GEM Index are at a comparable level in Afghanistan, DRC, and Mali, suggesting low-moderate starting levels of support for GEWE and positive masculinities.

⁵⁰ Interviews conducted April-June 2023, Burundi.

⁵¹ Interviews conducted April-June 2023, DRC.

⁵² Interviews conducted April-June 2023, DRC.

Figure 1. Box Plot of GEM Index Score by Country & Treatment Group⁵³



Each survey respondent was asked about GEWEP participation. Survey data was gathered in a way that allowed the Research Team to calculate both binary program participation (0-1, no program participation (control) vs. program participation (treatment)) and levels of program participation or what we might call “treatment saturation.” Specifically, using a series of participation questions, we calculated a participation index that captures how many GEWEP activities a respondent participated in and how often. The highest participation index scores go to those who both participated in a wide variety of program activities and participated often. Looking within the treatment group at level of participation (or “treatment saturation”), greater GEWEP participation is statistically significantly associated with higher GEM Index scores at the global level. The association between higher program participation and higher GEM Index scores suggests that men who participate more, hold attitudes more supportive of GEWE and aligned with positive masculinities.

To illustrate how treatment saturation is associated with the GEM Index score differences, we set treatment men’s key demographic characteristics to the group mean,⁵⁴ and looked at GEM Index score differences among men with low participation (participated less than the other 75% of treatment men) and high participation (participated more than 75% of other men). Those with low participation have a GEM score of 2.65. Those with high participation have a GEM score of 2.71. This is a fairly small

⁵³ Figure Notes: Box outline is the range from 1st quartile (25th percentile) to 3rd quartile (75th percentile) of GEM Index scores. The horizontal line is the median, diamond is the mean, vertical line is the full range with the exception of the dots, which represent outliers. The value labels correspond to the 1st quartile, median, and 3rd quartile.

⁵⁴ This includes the following parameters: Participated in an average of 5 types of engaging men and boys activities *outside* of the Program, have a primary education, are not community leaders, are in rural locations, are the primary income earners, are married to one wife, are employed in the informal sector, hardly ever saw their father or another man do household chores, but were taught to do four chores themselves, and both them and their wives are not in VSLAs.

difference in GEM Index scores (.06), which suggests GEWEP may be creating change best characterized as incremental. Though small, this incremental change aligns with similar research which notes that changes in core value systems, especially those related to identity, require time and consistency in messaging to slowly move study participants toward more support for GEWE and more positive masculinities.

Notably, when program participation is measured in this way to understand how GEWEP activities affect men's attitudes (i.e. using treatment men as a reference group for one another), program participation is significantly associated with higher GEM Index scores in Mali and Rwanda (not in Afghanistan, though). Thus, based on either the difference between treatment and control group men or comparing treatment men based on their level of program participation, there is evidence that program participation is associated with higher GEM Index scores in Burundi, DRC, Mali, Niger, and Rwanda, but not Afghanistan.

Attitude Changes between Treatment & Control Groups

Looking more closely at the relationship between treatment and individual attitudes, program participation (treatment) is associated with higher scores for most individual GEWE and masculinities attitude questions⁵⁵ on a global level (e.g., ignoring country-specific differences). GEWE and masculinities survey questions take the form of a series of statements which prompted men to indicate their level of agreement. That level of agreement was then scored on a numeric scale. Higher scores indicate attitudes more supportive of GEWE and more consistent with positive masculinities. Together these survey questions were used to create the GEM Index.

Several of these individual attitudinal survey questions (statement prompts) stand out because they reveal a positive association between program participation and positive attitudes in more than half of the country contexts. These include the following statement prompts:

- A man and a woman should decide together what type of contraceptive to use (program participation, or treatment, is associated with greater agreement in all countries where the question was asked).⁵⁶
- A woman should tolerate violence in order to keep her family together (treatment is associated with greater disagreement in Burundi, DRC, Mali, Niger, and Rwanda).
- There are times when a woman deserves to be beaten (treatment is associated with greater disagreement in Afghanistan, Burundi, DRC, and Rwanda).
- To be a man, you need to be tough (treatment is associated with greater disagreement in Burundi, DRC, Mali, and Niger).

Treatment men are more receptive to the use of contraceptives across all studied countries (except Afghanistan, where the question was not asked due to cultural sensitivities). In contrast, control group men more often rejected the idea that women would, could, or should suggest using contraceptives to their husbands. Specifically, only 9.3% of treatment group men believe that men and women should *not* make joint decisions about contraceptive use, while 13.6% of control group men hold this belief. In explaining their reasoning during interviews, respondents referenced power dynamics in the household. A control group man from Niger explained, "I am the one who takes care of the needs of

⁵⁵ These questions were used together to construct the GEM Index.

⁵⁶ The question was asked in all countries except for Afghanistan

the house. I am the one who provides for my children’s expectations and needs. So she has no say when it comes to producing the children.”⁵⁷ This same respondent and others raised concerns about women’s desire to use contraception because this desire amounts to an accusation of infidelity—“such a suggestion in the couple or home will mean to insinuate that I am unfaithful.”⁵⁸ There were several references to the belief that contraceptive use may create health hazards, noting that “contraception even has negative consequences on women’s health...they become infertile and develop bizarre diseases.”⁵⁹ Nevertheless, control respondents also affirmed an openness to learn about the potential benefits of contraceptives, suggesting that if programs can “[prove] the benefits of contraceptive methods” some men may adjust their attitudes and behaviors as they come to understand their “conception of things is wrong.”⁶⁰

Treatment group members are notably more receptive to joint decision-making in this area and often referenced the benefits of family planning in interviews. Here, program participation was continuously referenced as a catalyst for change in qualitative interviews. As a member of the treatment group in Mali stated, “CARE’s activities have given me more insight and I have understood family planning even better.”⁶¹ Another Mali treatment group member credited GEWEP with framing contraceptives and family planning in a new light, stating that “people now better understand the importance for the family, especially for the health of the mother and her children.”⁶² Shared decision-making and discussion of these topics was a primary emphasis of GEWEP activities. One Niger treatment member made a joint decision with his wife to adopt these methods, a change derived from program participation, explaining:

Contraceptives allow women’s bodies to rest after childbirth and also help with birth spacing. The stigma around the use of contraceptive methods was so huge that when people talked about it around me, I repressed it. I didn’t even like to hear about it. But with the different demonstrations, I made the choice to adopt contraceptive methods for my own health and that of my family.

— Man, Treatment Group Member, Niger

Attitudes regarding intimate partner violence were also challenged through program activities. Respondents from treatment groups across most countries (all but Afghanistan) display less tolerant attitudes towards violence against women in the home—68.0% of treatment men reject the idea that a woman should tolerate violence to keep her family together, while only 51.9% of control group men disagree with this sentiment. In interviews, multiple treatment men reported previously not recognizing their partner’s agency and considering violence a legitimate means to exercise authority in the home and to reaffirm their own masculinity. One treatment group member from DRC reflected upon his prior behavior, stating, “Before the use of force was very important to affirm masculinity and to correct a woman. Before, only strength was the way to correct the fault of a woman.”⁶³

⁵⁷ Interviews conducted April-June 2023, Niger.

⁵⁸ Interviews conducted April-June 2023, Niger.

⁵⁹ Interviews conducted April-June 2023, Niger.

⁶⁰ Interviews conducted April-June 2023, Niger.

⁶¹ Interviews conducted April-June 2023, Mali.

⁶² Interviews conducted April-June 2023, Mali.

⁶³ Interviews conducted April-June 2023, DRC.

The Program countered some of the underlying framings enabling this violence, with a Rwandan man from the treatment group explaining that “before the [GEWEP] training, I used to slap my wife. But after the training, I cannot appreciate hitting a woman.”⁶⁴ GEWEP activities challenged the belief that abuse changes women for the better. One treatment group member explained, “beatings cannot transform a woman. This change comes from trainings and teachings that show us that women are beings who have rights and force or violence will not change them.”⁶⁵

Stepping back from GEWEP specifically, EMB interventions foster a reduction in household violence. We see this with control group men exposed to EMB programs implemented by other organizations. These men report similarly positive attitudinal changes. For example, a control group member from DRC who was previously exposed to EMB activities stated, “My attitudes changed because I participated in the different trainings...But before when I beat my wife there was no happiness in our home. We lived as enemies. When I made the decision to change, everything became normal. There is peace, joy in our home.”⁶⁶

Relationships between masculinity and violence were also challenged by GEWEP in efforts to separate manhood from violent responses to disrespect or insults. Traditional gender roles dictate the need for men to respond decisively when they are insulted. This escalates tensions and increases the potential for violence. When presented with the statement: “If someone insults me, I will defend my reputation, with force if I have to”, 72.3% of treatment men expressed disagreement (versus 66.5% of control group men). In interviews, men detailed how GEWEP positively impacted their behavior in this area. A treatment member from DRC stated, “Before this project, to resolve a conflict, I resorted to the use of force. Unfortunately, the consequences were...causing costs and injuries.”⁶⁷ Similarly, another treatment group man from Rwanda noted, “Before participating in the activities of the project, I would have done everything in my power to save my honor.”⁶⁸ Both participants credited the trainings with redirecting them away from violent approaches. GEWEP trainings offered alternative resolution mechanics, adapted to the social structures and institutions of each context. For example, treatment participants from Afghanistan redirected conflict resolution efforts to local elders and councils, noting that these are avenues that would help ensure the resolution of conflict with mutual respect for all sides.⁶⁹

For the following survey questions (statement prompts), treatment men’s attitudes are not significantly different from those of control group men at the global level, indicating little treatment effect:

- When women work, they are taking jobs away from men.
- Rights for women mean that men’s lives will not be as good.
- A husband should ultimately decide whether or not his wife works for pay.

When looking at the normative meaning of the above GEM Index statement prompts, treatment group status appears to have no effect (meaning individual question scores for treatment men and control men do not differ) on attitudes that place men and women in contrasting, rather than

⁶⁴ Interviews conducted April-June 2023, Rwanda.

⁶⁵ Interviews conducted April-June 2023, DRC.

⁶⁶ Interviews conducted April-June 2023, DRC.

⁶⁷ Interviews conducted April-June 2023, DRC.

⁶⁸ Interviews conducted April-June 2023, Rwanda.

⁶⁹ Interviews conducted April-June 2023, Afghanistan.

collaborative, positions. For example, the statement “rights for women mean that men’s lives will not be as good” offers a zero-sum contrast between women’s or men’s rights rather than a collaborative “our rights” or additive “women’s and men’s rights.” Responses to this contrasting statement, and others, illustrate no effect of treatment. This may indicate that even treatment group men have trouble expressing noticeably more supportive attitudes towards GEWE when they consider men and women in direct comparison to one another. In other words, the improvements treatment men experience may not fully extend to considering women directly equal *relative to men*. Believing in women’s direct equality relative to men would indicate that men believe women’s equality poses no threat to their own authority or well-being. Even treatment group men may not have reached that point, as one treatment group man revealed when directly considering his wife’s authority relative to his own,

Even though gender equality is important, there are times when a man should have something special...because when people make decisions, there must be one who has the last word and for me I think it has to be the man. For example, when you want to sell a cow, after a discussion I think that it is the man who must proclaim the decision even if it is the discussion that led to the decision.

— Man, Treatment Group Member, Rwanda

Indeed, when discussing women’s rights, men referenced the belief that, if women were to obtain more rights, it would lead them to dislike, compete with, or even mimic men.⁷⁰ For example, a treatment group member from Rwanda noted that equality leads women to compete with their husbands, potentially adopting masculine behaviors (which the respondent disliked) and justifying these behaviors through claims to equality.⁷¹ Men suggested that discussions about gender equality, women’s rights, and women’s empowerment had a negative impact on them personally, and made them uncomfortable.⁷² This reveals men’s concerns that changes in gendered power dynamics can lead to situations where women in their lives force men to contend with their own difficult or negative behaviors and beliefs; thus, leading men to favor the maintenance of status quo power dynamics.

Similarly, when speaking about women’s participation in the workforce, both in terms of women accessing employment without their husband’s permission and the competition that can arise from their incorporation into the workforce, interview respondents tended to reference traditional framings of family life to push back against labor equality.⁷³ Where there was some flexibility around this attitude, resistant interviewees conceded only to women’s participation in the workforce under extreme circumstances; such as when her husband dies and she must care for the family.⁷⁴ One control respondent from Afghanistan summarized his position, again comparing his wife to himself:

I disagree and am against the political presence and work of women, which means that women should be at home, moving forward with housework, raising children. Her husband has to work outside. It is the ultimate disgrace for the man to stay at home and the woman to work outside. Women should sit at home with dignity and respect. We men should work outside and bring them bread.

— Man, Control Group Member, Afghanistan

⁷⁰ Interviews conducted April-June 2023, Rwanda.

⁷¹ Interviews conducted April-June 2023, Rwanda.

⁷² Interviews conducted April-June 2023, Afghanistan.

⁷³ Interviews conducted April-June 2023, Afghanistan.

⁷⁴ Interviews conducted April-June 2023, Afghanistan.

As with comparisons between the treatment and control group, the saturation score also suggests little program impact on attitudes which directly place men in contrast with women. Specifically, higher saturation scores are associated with more positive attitudes in only one or two countries in the following questions which place men and women in contrast or conflict with each other:

- A woman with the same education or training can do as good a job as a man. (Burundi)
- Men need sex more than women do. (Rwanda and DRC)
- When women work, they are taking jobs away from men. (Burundi and Rwanda)
- Rights for women mean that men’s lives will not be as good. (DRC and Mali)
- A husband should ultimately decide whether or not his wife works for pay; When women get rights, they are taking rights away from men. (Burundi and DRC)

As with all findings for this study, it should be noted that attitudes are complex, often so much so that individuals struggle to understand the foundations and elements of their own attitudes. This study works to unpack these complexities. Overall, program participation (based on either treatment versus control group status or treatment saturation) is fairly consistently associated with attitudes less permissive of violence towards women. While participation is associated with positive attitudes around joint responsibility for contraceptive use, participation is not associated with more favorable attitudes towards married women using condoms or men taking responsibility for pregnancies. Program participation is associated with attitudes less consistent with toxic masculinity, for example, rejecting the notion that men must be tough, but not to the extent that men see women as directly equal. These observations suggest areas where greater focus may be required to address “sticky” core beliefs among men.

GEWEP Interventions & Differences in GEM Index Scores

Program activities—what we might think of as unique interventions or elements of GEWEP—varied from country to country. As Table 3 shows, GEWE trainings sessions with male leaders and male community members, reflection sessions with community members, and men’s groups were implemented in all study countries. Male champion groups were the least common intervention, only delivered in Afghanistan, Burundi, and Rwanda.

Table 3. GEWEP Interventions (program activities)

Afghanistan	Burundi	DRC
– Trainings sessions for male leaders on masculinities or gender equality/women’s rights	– Trainings sessions for male leaders on masculinities or gender equality/women’s rights	– Trainings sessions for male leaders on masculinities or gender equality/women’s rights
– Reflection sessions with leaders or community members	– Reflection sessions with leaders or community members	– Reflection sessions with leaders or community members
– Men’s groups, including male supportive groups	– Acting as a role model couple	– Acting as a role model couple
– Acting as a male role model	– Couples counselling	– Couples counselling
– Trainings sessions for men on masculinities or gender equality/women’s rights	– Family talks	– Family talks
	– Men’s groups, including male supportive groups	– Men’s groups, including male supportive groups
	– Acting as a male role model	– Acting as a male role model

<ul style="list-style-type: none"> - Community sensitization/awareness raising activities led by men - Community sensitization/awareness raising activities - Male champion groups 	<ul style="list-style-type: none"> - Trainings sessions for men on masculinities or gender equality/women’s rights - Community sensitization/awareness raising activities led by men - Boy’s group or youth club - Community sensitization/awareness raising activities - Safe spaces for men and/or boys - Male champion groups 	<ul style="list-style-type: none"> - Trainings sessions for men on masculinities or gender equality/women’s rights - Community sensitization/awareness raising activities led by men - Boy’s group or youth club - Community gender platforms - Community sensitization/awareness raising activities
Mali	Niger	Rwanda
<ul style="list-style-type: none"> - Trainings sessions for male leaders on masculinities or gender equality/women’s rights - Reflection sessions with leaders or community members - Acting as a role model couple - Couples counselling - Family talks - Men’s groups, including male supportive groups - Acting as a male role model - Trainings sessions for men on masculinities or gender equality/women’s rights - Community sensitization/awareness raising activities led by men - Boy’s group or youth club - Community gender platforms - Community sensitization/awareness raising activities - Safe spaces for men and/or boys 	<ul style="list-style-type: none"> - Trainings sessions for male leaders on masculinities or gender equality/women’s rights - Reflection sessions with leaders or community members - Acting as a role model couple - Couples counselling - Family talks - Men’s groups, including male supportive groups - Acting as a male role model - Trainings sessions for men on masculinities or gender equality/women’s rights - Community sensitization/awareness raising activities led by men - Boy’s group or youth club - Community gender platforms - Community sensitization/awareness raising activities - Safe spaces for men and/or boys 	<ul style="list-style-type: none"> - Trainings sessions for male leaders on masculinities or gender equality/women’s rights - Reflection sessions with leaders or community members - Acting as a role model couple - Couples counselling - Family talks - Men’s groups, including male supportive groups - Acting as a male role model - Trainings sessions for men on masculinities or gender equality/women’s rights - Boy’s group or youth club - Community gender platforms - Safe spaces for men and/or boys - Male champion groups

The data does suggest that different program activities are more or less effective in different countries. In other words, exactly which activities are associated with greater differences in GEM Index scores among treatment men who did versus did not participate in those activities varied from country to country. However, there were some common themes. These common themes suggest interventions that are more consistently effective in different country contexts.

When identifying particularly effective interventions, we considered both (a) which activities worked in a larger number of countries and (b) which activities are associated with larger GEM Index scores differences between those who did and did not participate in each activity. These findings are summarized in Table 4, with turquoise cells indicating the top five GEWEP interventions and dark navy cells indicating other statistically significant interventions. Yellow-green cells show program activities that were implemented but that did not have a meaningful impact on attitudes; white cells with “-” inside indicate activities not implemented in that country.

Table 4. GEWEP Activities Associated with Higher GEM Index Scores⁷⁵

Program Activity	Country					
	AFG	BDI	DRC	MLI	NER	RWA
Trainings sessions for male leaders on masculinities or gender equality/women’s rights						
Reflection sessions with leaders or community members						
Acting as a role model couple	-					
Couples counselling	-					
Family talks	-					
Men’s groups, including male supportive groups						
Acting as a male role model					-	
Trainings sessions for men on masculinities or gender equality/women’s rights						
Community sensitization/awareness raising activities led by men						-
Boy’s group or youth club	-					
Community gender platforms	-	-				
Community sensitization/awareness raising activities <u>not</u> led by men						-
Safe spaces for men and/or boys	-		-			
Male champion groups			-	-	-	

Particularly effective program activities fall into two categories: (1) interactive, collective sessions with a focus on male leaders and (2) couple or family-centric activities. These interventions tend to be both associated with the strongest support for GEWE and positive masculinities and the most effective across the largest number of countries. Evidence of effectiveness for these types of activities across the majority of study countries indicates that these two modalities could offer benefits in a wider range of country contexts.

Specifically, training sessions on masculinities or gender equality/women’s rights targeting male leaders are associated with higher GEM Index scores in five of the six study countries (all but Niger), as are reflection sessions with leaders or community members. These activities are also among the top

⁷⁵ Key:

Top five activity – largest GEM index score differences between those who did/did not participate	
Other activity – statistically significant differences between those who did/did not participate, but not top five	
Activity implemented but did not have a meaningful impact on attitudes	
Activity not implemented in the corresponding country	-

five activities in DRC (training sessions) and Burundi (reflection sessions). Acting as a role model couple and participating in couples counseling and family talks are associated with higher GEM Index scores in four of five countries, where these program activities were implemented (all but Burundi). Acting as a role model couple and couples counseling are also amongst the top five most effective activities in Mali and Rwanda, while family talks are in the top five interventions in DRC.

One participant described the influence of advice and participation in training this way:

This change is the result of advice and lessons learned from this project. Before, it was thought that the woman was limited and could no longer do certain things. But today I have changed. This attitude has not allowed women to move forward on the same footing as men. This change that I am experiencing today is explained by advice, teachings during trainings and it has been shown to us that the woman is also a human being capable of performing the same roles as the man. Often its activities can be profitable and contribute to the household economy.

— Man, Treatment Group Member, DRC

Activities featuring men as leaders or in role model couples help address pressure from other men to uphold gender norms that discourage or reverse gains in gender equality in an effort to bolster one's own superiority relative to (1) women and (2) other men. The opposite can also prove true if negative attitudes from peers are not addressed during program activities. A male interviewee from Niger recalls an element of negative reinforcement at times during their participation:

The only thing that seemed to challenge me and especially make me uncomfortable in this story was that it was said that everything a man can do, a woman can also do. I asked one of the participants nearby with a mocking look if these people know what they are saying. I was wondering if really, with these kind people, the project would last a long time and would even be able to change our mentalities here where men already have this superiority complex over women and women are also aware of their inferiority to men. But I understood with the evolution of activities that I was wrong.

—Man, Treatment Group Member, Niger

Well-managed peer support interventions offer much needed enabling environments for attitudinal change. The GEWEP communal spaces enabled men to maintain their commitment to values of gender equality, despite outside pressure from peers. This made space for acceptance and valorization, by other men and the community more broadly, of men's attitudinal and behavior change toward greater equality. While on occasion participants reported pushback on specific topics by some group members, collective sessions and couple/family-centric activities ultimately proved to be beneficial as spaces where men and women could discuss their concerns and grievances, working towards better household and community relationships.

The data suggest interactive, collective sessions with a focus on male leaders, and couple or family-centric activities are effective. Other program activities, in contrast, are what we might think of as hit-or-miss; meaning effective in half of the study countries and either not used or not effective in the others. Men's groups/support groups and community sensitization sessions led by men are associated with higher GEM Index scores in Burundi, DRC, and Mali. In each case, these activities are also among the top 5 most effective in these countries. Acting as a male role model (a top five intervention in Mali and Rwanda) and training sessions for men on masculinities and GEWE (a top five intervention in Rwanda) are associated with higher GEM Index scores in DRC, Mali, and Rwanda. Boys/youth groups are associated with higher GEM Index scores in Burundi, DRC, and Mali (and a

top five intervention in Burundi), while community gender platforms are associated with higher scores in Burundi, Mali, and Rwanda (and a top five intervention in Rwanda).

The last set of interventions includes those which are only occasionally effective—i.e. associated with higher GEM scores in the least number of countries. Community sensitization activities not led by men and safe spaces for men and/or boys are among these interventions. Community sensitization activities (not led by men) and safe spaces are associated with higher GEM Index scores in only two countries each: DRC and Mali, and Burundi and Mali, respectively. Male champion groups are associated with higher GEM Index scores in Burundi alone.

Hit-or-miss and only occasionally effective program activities reveal the strengths and weaknesses of different intervention strategies. Training sessions not for male leaders and community sensitization activities not led by men, for example, are less consistently effective, suggesting programming that reinforces or centers men's leadership is important to create change around men's support for GEWE and positive masculinities. However, the lack of an association between male champion groups and higher GEM Index scores is puzzling from this perspective. Male champions are selected from the men's support groups to become advocates for social change. It may be that this advocacy is too far abstracted from the kind of day-to-day mentorship that otherwise makes role model men an effective strategy. Additionally, small group time which is less structured, like safe spaces and boys/youth clubs, may be less effective than more structured experiences (like trainings for male leaders and reflection sessions), while the same may be true for large group activities that are not as structured (community gender platforms and sensitization/awareness raising activities vs. trainings and reflection sessions).

Taking Action

Program Participation & Taking Action

Yes, the programs that took place, the friends who held the show, I begged them to invite my brother to participate in the program as well. Because my brother had a lot of problems with women, and after this program, the way he dealt with his family and wife changed. His life has changed, I saw the same changes in my brother's existence, I felt that my brother was wrong before, and after this program he knew the rights of women and understood that the woman were not only looking for beatings, housekeeping, children, but women had equal rights as men.

—Man, Treatment Group Member, Afghanistan

Program participation is associated with a higher likelihood of men self-reporting having taken concrete action to reduce gender inequality in their household, workplace, or the community. Treatment men are 2.5 times more likely to report taking action as compared to control men (taking into account other characteristics that affect men's self-reported behavior). Similarly, greater program participation (treatment saturation) is associated with a higher likelihood to act when comparing treatment men to one another. Treatment men with high levels of treatment saturation (participated more than 75% of other treatment men) are 1.28 times more likely to report taking action to reduce gender inequality than those with low levels of treatment saturation (participated less than 75% of other treatment men). Specifically, the odds of taking action to reduce gender inequality are 2.2 for highly engaged treatment men and 1.7 for men with low levels of treatment saturation.

Treatment group men—especially those with higher treatment saturation levels—referenced undertaking a variety of activities to reduce gender inequality, both within their household and their

broader community. A treatment man from Niger explained, “I aim to ensure that all my children go to school regardless of gender.”⁷⁶ Some GEWEP participants noted that behavior change in their household influenced others in their community to take steps toward greater equality. GEWEP men noted they participate and lead awareness-raising efforts, and directly mediate in household conflicts as needed.

A treatment group member from Afghanistan described his efforts to reduce violence in his community by informing others about situations of intimate partner violence and openly sharing his views and opinions against the practice.⁷⁷ Similarly, a treatment group member from Rwanda began actively advancing conflict resolution by mediating in couples’ disputes. He explains:

I was trained and after the training, gathered couples who live in conflict and mobilized them to participate in VSLs. Until today I continue to help these couples. As grassroots authorities, I pass on messages about gender equality in community meetings, and talk about equality and harmony. I have been sensitized for a long time everywhere I worked, by CARE and finally by RWAMREC.
— Man, Treatment Group Member, Rwanda

Program Activities & Differences in Taking Action

“Do something, and I’ll look at it” is better than “Talk, and I’ll listen” (actions speak louder than deeds). My contribution is to be a role model for others. It is also necessary to sensitize others about the role of gender equality in the family development. — Male respondent, Rwanda

In comparing activities most associated with attitudinal changes to those most associated with self-reported taking action to support GEWE, there are both some overlaps and some differences. The activities below emerged as effective based on either (a) differences between treatment and control men or (b) differences among treatment men (based on treatment saturation; i.e. level of engagement in program activities).

First, community reflection sessions and training sessions for male leaders are among the top five interventions associated with higher likelihood of taking action in four countries (Afghanistan, Mali, Niger, and Rwanda for both types of activities). Couples counseling is in the top five interventions for three countries (Burundi, DRC, and Mali). These three intervention strategies are also among the most effective in terms of attitude changes (see previous section). Being a role model man and community awareness raising sessions (but not those specifically led by men) are among the top five activities associated with a higher likelihood of taking action in three countries (Burundi, DRC, and Mali for being a role model and Afghanistan, Mali, and Niger for the community awareness raising sessions). Being a member of a role model couple also showed a comparatively large treatment effect at the global level, as did trainings (but not solely those for male leaders).

These patterns reinforce the importance of couples’ counseling and being in a role model couple, as well as community reflection sessions and trainings for male leaders. However, when looking at the likelihood of taking action, male leadership as a component of GEWEP is slightly less important,

⁷⁶ Interviews conducted April-June 2023, Niger.

⁷⁷ Interviews conducted April-June 2023, Afghanistan.

given that regular community awareness raising sessions and regular training sessions are also associated with men taking action in support of GEWE.

Mediating Factors Affecting Change

It is important to note that the sustainability of positive changes in men's attitudes and behavior brought about through program participation may be dependent on external factors. This was observed during qualitative interviews collected as a part of this study. One such mediating factor that could affect the stickiness of change is pressure from peers or colleagues in abiding by societal norms, even if those norms are detrimental to gender equality. For example, one participant from the DRC stated that while his personal attitudes toward women's political participation had changed for the better, he did "continue to suffer mockery from those who continue to live in ignorance and who have not yet received [GEWE] trainings." This participant urged program partners to expand GEWEP activities to the rest of the village as he feared that "some good men can be discouraged as they are laughed at."⁷⁸

The fear of societal judgment also acts as a form of peer pressure in influencing behavioral change. For example, a treatment group participant from Niger described that his problem with women going to work was not as much with the concept itself, but rather with how it would be perceived by others. He explained, "I asked myself the question of how I could be healthy, and let my wife go to work and bring the money home. What will those around you say? Just that I am incapable and dependent on my wife's property."⁷⁹

Political factors also play a large role in the longevity of change, particularly in terms of behavioral change. This was noted by several participants in Afghanistan who expressed frustration in not being able to practice their positive beliefs regarding gender equality and women's rights in society as a result of restrictions placed by the government. One man, for example, when speaking of past learnings surrounding women's experiences or women's empowerment, explained, "I learned a lot of new things. We used to gather women into groups and talk to them about their rights, but unfortunately, all these topics have disappeared and are prohibited."⁸⁰ Other participants from the region feel unable to simply express their positive beliefs towards gender equality as these views are now in such great contradiction to the government's policies. A respondent from Afghanistan explains:

Dear Brother: In the women's section of political power and political fit, I have no specific opinion, because the affairs of the country are so that women are at home, they cannot work, they cannot study. But in my opinion, women should work, study, and, according to Islamic law, should also be involved in government affairs. I don't want to talk about this anymore.

— Man, Treatment Group Member, Afghanistan

External factors can also positively impact the sustainability of attitude change occurring during program implementation. From Rwanda, participants credited community-level meetings and government efforts in helping to solidify program teachings. One man noted, "I have immediately

⁷⁸ Interviews conducted April-June 2023, DRC.

⁷⁹ Interviews conducted April-June 2023, Niger.

⁸⁰ Interviews conducted April-June 2023, Afghanistan.

understood the betterment of the program interventions. This [is] because during general meetings at our community level, the Government regularly sensitize us to mainstream gender equality.”⁸¹ Elders were especially important in Afghanistan, where one man explained that village elders help to reinforce positive behaviors gained as a result of GEWEP participation, “the program has brought a lot of changes, any kind of insult and humiliation goes back to our elders, our elders, our councils, the passing of men’s character, any kind of problem these people solve, both sides always respect each other.”⁸²

Fear of judgment from society or community members can also positively impact old negative behaviors. This was especially visible when respondents spoke of physical violence both toward their wives or other community members. A respondent in Niger explained that in his community, if a man hits his wife, people will not only find him at fault regardless of what his wife has done, but will “even go so far as to call you crazy or mentally deranged.” That same respondent went on to share, “If you are my friend or a brother and I notice that you are beating your wife, I try to make you understand once or twice, if you change, we are ok, but if you persist in this habit, I will move away from you because your wife risks lumping us together ...and it’s not good for my image too.”⁸³

Part 2: Civil Society Space

Civil Society Organizations

In assessing the operating conditions facing civil society organizations, and the evolution of civic space across the five target countries,⁸⁴ the Research Team engaged with a variety of organizations focused on gender issues, including women’s rights organizations (WROs), women-led organizations (WLOs), and other civil society organizations that focus their work on gender issues.⁸⁵ In total, 70 such organizations were engaged in data collection for this study.⁸⁶ The Research Team also conducted interviews with national CARE staff and CSOs undertaking similar work to CARE. This is a relatively small sample size for quantitative data, so all statistics reported are descriptive only, and based on a simple (unweighted) averages or percentages for ease of interpretation. The situation in Afghanistan is unique and did skew results at times. In contrast, conditions in Mali, prior to the July 2023 coup, for the CSOs interviewed often appeared better in comparison to Burundi, DRC, and Niger. Percentages are reported with and without Afghanistan where conditions in Afghanistan skewed results past the more “middle of the road” responses from Burundi, DRC, and Niger.

⁸¹ Interviews conducted April-June 2023, Rwanda.

⁸² Interviews conducted April-June 2023, Afghanistan.

⁸³ Interviews conducted April-June 2023, Niger.

⁸⁴ This section draws on primary data collected in Afghanistan, Burundi, DRC, Mali, and Niger. A recent study of CSOs was undertaken in Rwanda, thus Rwanda was not included in this section of the report.

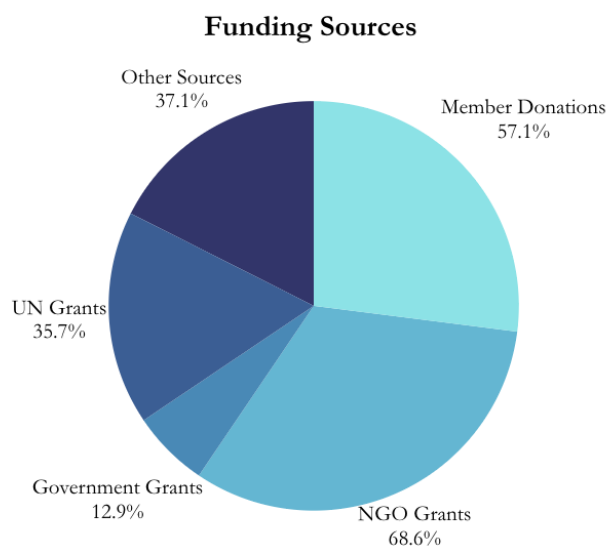
⁸⁵ From here forward we refer to WROs, WLOs, and CSOs together as “CSOs.”

⁸⁶ This section analyses improvements and deteriorations in each country since 2020 in the five issue areas outlined in this report’s guiding questions. We trace how these changes have impacted the operations of women rights organizations and women-led organizations, and which of these experiences are unique challenges not applicable to CSOs led by men. We discuss adaptation strategies shared by interviewed representatives from these organizations, and outline how GEWEP initiatives have affected civic space.

The vast majority of civil society organizations in the study sample met either the criteria for a women’s rights organization (52.9% of the sample) or a women-led organization (41.4% of the sample). Among all, the majority are formally registered with local authorities (94.3%) (Table 5).

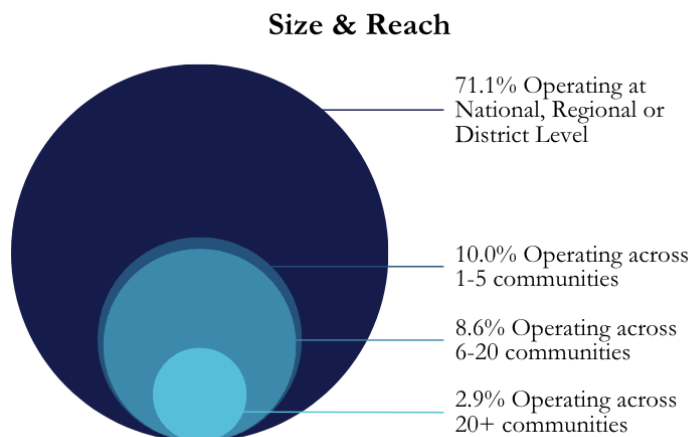
Table 5: Organizational data from CSO responses

Description		
Number	Number of WROs	37
	Number of WLOs	29
	Number of CSOs	4
	Total Number of Organizations (collectively “CSOs” throughout report)	70
Formal	Registered with government (%)	94.3
Leadership	Female CEO (%)	68.6



Funding sources vary widely. The majority of organizations secure funding through grants from non-governmental actors (68.6% reported having done so) and through small donations from community and organization members (57.1%). While a notable number are able to secure grants from larger institutions, namely UN Agencies (35.7%), and other miscellaneous sources (37.1%), organizations across all contexts noted the limitations they face due to shortcomings in funding. Reduced, restricted, or otherwise inaccessible funding has been especially severe in the case of Afghanistan, as reported during interviews where the exclusion of women from the labor force has curtailed the ability of organizations to secure financing and continue their operations.

In terms of the scope of operations, most CSOs operate at the national level (41.4%), followed by those engaging at the district or regional level (35.7%). With only 21.4% working at more local levels, a smaller proportion of the work of these organizations involves the most localized community engagement strategies. Indeed, 8.6% of CSOs operate at the community level across 6-20 communities, and 10.0% of organizations involved in this study operate in under five communities.

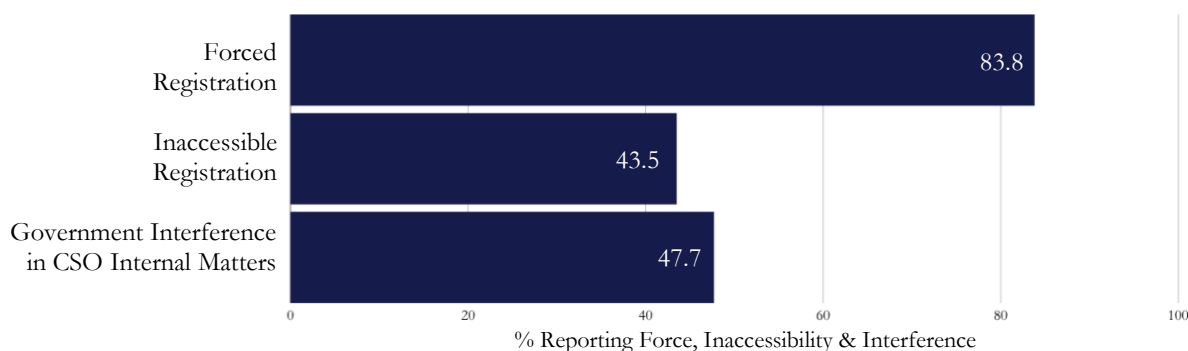


Current Conditions

Women’s rights, women-led, and similarly focused civil society organizations face a number of challenges across settings. While some of these challenges are shared, these organizations face obstacles unique to their contexts as well. The figures below offer a peek into these challenges.

An important caveat to consider with the findings in this section is the case of Afghanistan. The civil society space in Afghanistan, as reported by CSOs themselves, is markedly worse than in other contexts. Organizations there have faced new and increasingly tight restrictions since the return of the Taliban-led government. Afghanistan represents an outlier case that skews the data at times. As such, global percentages are presented with and without data on Afghanistan where global percentages are skewed.

Figure 2. CSOs Reporting Challenges with Registration & Interference (%)



The restriction CSOs involved in this study most commonly face is forced registration—(83.8% of respondents) experience forced registration by their governments. Forced registration creates financial and legal barriers to existing organizations that may not have the funding or capacity to formally register, especially at the local level. Formal registration is inaccessible for 43.5% of CSOs (35.9% without Afghanistan) and 47.7% experience unwanted government interference in their internal matters (36.7% without Afghanistan). Organizations in Mali are the least affected by forced registration, with only 60.0% of respondents facing forced registration, while those in Burundi are the most affected, with 100.0% of CSOs being forced to register. Organizations in Afghanistan (93.7%) and Niger (92.9%) are forced to register more than most, while those in the DRC (78.6%) experience this challenge slightly less often. Thus, existing as a CSO in the study countries often means facing bureaucratic obstacles and government interference. These limitations may curtail the activities of CSOs.

Perhaps unsurprisingly given current attacks on freedom of speech, freedom of press, and free and safe demonstrations throughout the world, CSOs commonly reported restrictions in these areas. Specifically, 79.3% of CSOs report encroachment on the right to freedom of expression (with a high of 100.0% in Burundi and DRC to a low of 22.2% in Mali). Additionally, 45.9% reported restrictions on the right of CSOs to speak about human rights, fundamental freedoms, and critically about the government (ranging from 93.8% reporting such restrictions in Afghanistan to all CSOs in Mali feeling free to speak about these rights and freedoms and to criticize the government). Further, 61.5% report violations to freedom of press and intimidation and harassment of journalists (ranging from 93.3% in Afghanistan to 37.5% in Mali). Regarding freedom of assembly, 54.0% of CSOs report being denied

the right to assemble, including for peaceful public demonstrations (ranging from all CSOs reporting this issue in Afghanistan to 15.4% in Mali). In 57.4% of these cases, denials of assembly are not accompanied by any reasonable legal justification. Restrictions on freedom of expression and denial of the freedom to assemble affect CSOs as organizations, the work CSOs undertake, and the populations these organizations serve. Ultimately, these conditions limit the ability of CSOs to express dissent and hold governments accountable. In turn, this further curtails the exercise of and advocacy for civil liberties.

Figure 3. CSOs Reporting Restrictions to Freedoms of Expression & Information (%)

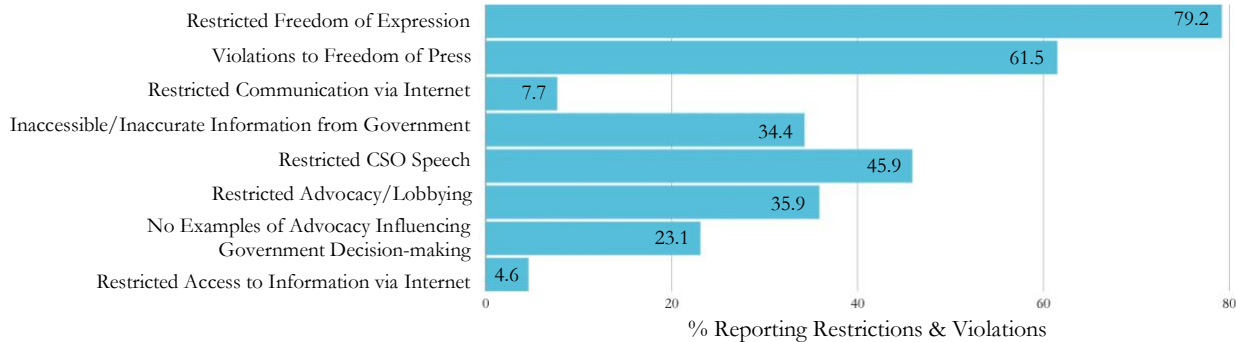
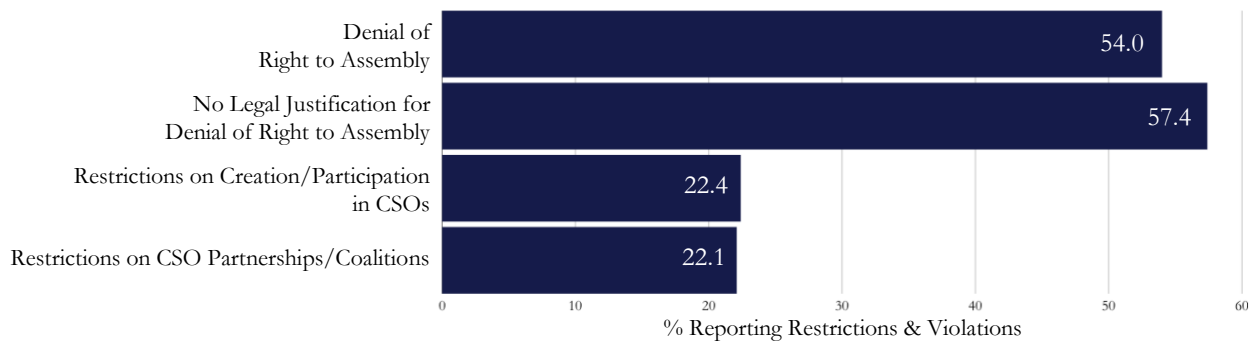
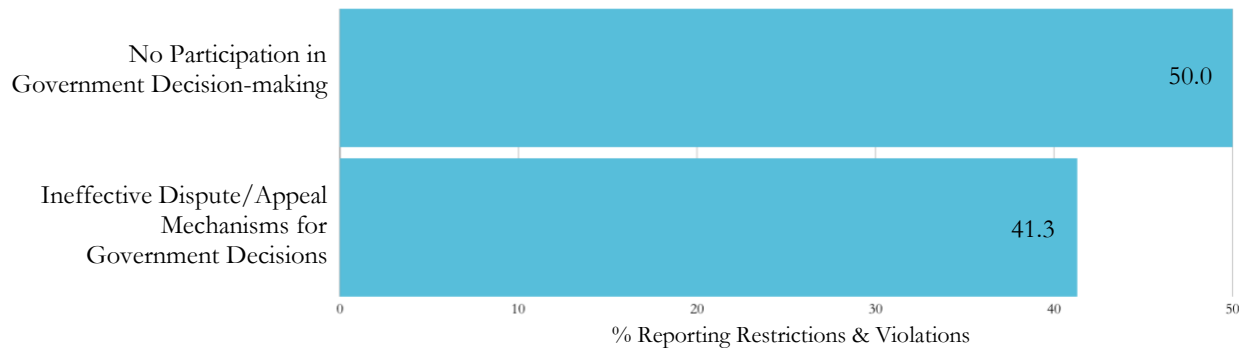


Figure 4. CSOs Reporting Restrictions to Freedoms of Organizing (%)



Participatory government decision-making is mixed, with some CSOs reporting that neither they nor their constituents are able to participate in government decision-making processes (50.0% overall, ranging from all CSOs reporting this in Afghanistan to only 14.0% in Mali). This includes decisions made in government agencies, ministries, or legislative bodies. After decisions are made, 41.3% of CSOs (31.8% without Afghanistan) find that dispute and appeal mechanisms are ineffective and often inaccessible (ranging from 93.8% in Afghanistan to 7.7% in Niger). This implies that CSOs are not able to influence policy decisions within their areas of expertise—reducing the effectiveness of public governance—and cannot push back against harmful legislation, compromising their ability to serve the groups they support.

Figure 5. CSOs Reporting Government Decision-Making Restrictions (%)

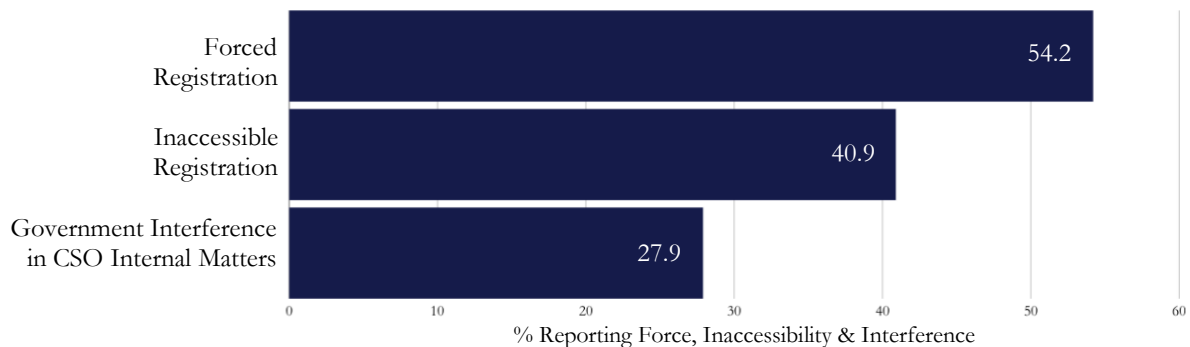


Shifts in Civil Society Environment since 2020

The political and physical environment within which CSOs operate has seen dramatic changes since the onset of the COVID-19 pandemic in 2020. These changes include restrictions to mobility, and constrained freedoms to speech and the press. The figures below offer a summary of primary survey data focused on these changes. CSOs were asked a series of questions about changes in their ability to register and work, access to information, collaborate, express views, and engagement in dialogue, including critical expressions of speech since 2020.

The data suggests freedom of expression, including among the press, freedom of assembly, and the ability to operate without government oversight, showed the most deterioration since 2020. These are the same areas of concern for CSOs at present. While CSOs were already restricted in their ability to influence government decision-making, evidence also suggests deterioration for some CSOs in the advocacy and lobbying space. This may, to an extent, be attributable to the institutionalization of civil liberties repression tactics that governments engaged in to contain outbreaks during the COVID-19 pandemic. Moreover, the global trend toward authoritarian governance, which is inherently more restrictive to CSO activities, may also be to blame.⁸⁷

Figure 6. CSOs Reporting Increased in Forced Registration & Interference since 2020 (%)

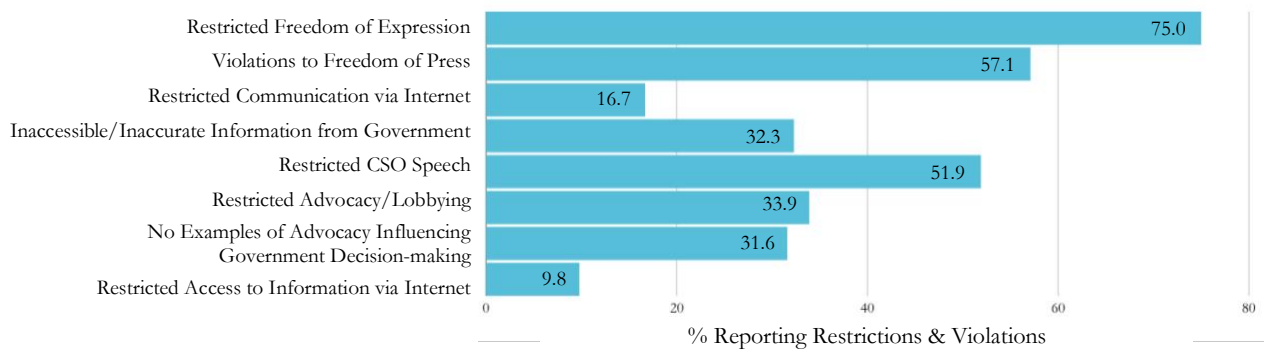


⁸⁷ See Freedom House’s yearly report for [2021](#) and [2022](#).

Around half of CSOs report increased pressure from governments to formally register as civil society organizations (54.2%, ranging from 93.8% in Afghanistan to 8.3% in Mali). Formal registration has become increasingly inaccessible since 2020 for 40.9% of CSOs, and 27.9% of CSOs report that government interference in their internal matters has worsened (low of 7.1% in DRC to 87.5% in Afghanistan).

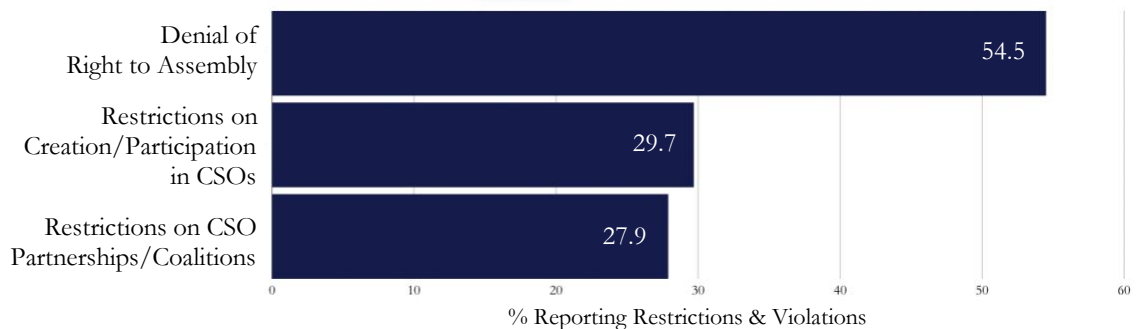
However, the most commonly reported erosion of civic space over time is from encroachment on the freedom of expression. Most CSOs (75.0% or 63.4% without Afghanistan) report worsening restrictions to free expression (ranging from 100.0% in Afghanistan to 33.3% in Mali). Similarly, 51.9% report worsening violations of the right of CSOs to speak freely about human rights, fundamental freedoms, and critically about the government. Finally, 57.1% (38.2% without Afghanistan) report increased intimidation and harassment of journalists and less press freedom since 2020 (ranging from 100% in Afghanistan to 21.4% in DRC).

Figure 7. CSOs Reporting Worsening Restrictions to Freedoms of Expression & Information since 2020 (%)



Since 2020, the civil society space has become increasingly challenging in regard to informal organizing, licensed assembly, and public demonstration. Permission to assemble, even for peaceful public demonstrations, is increasingly denied for 54.5% of CSOs (ranging from all CSOs reporting this in Afghanistan to just 9.1% in Mali).

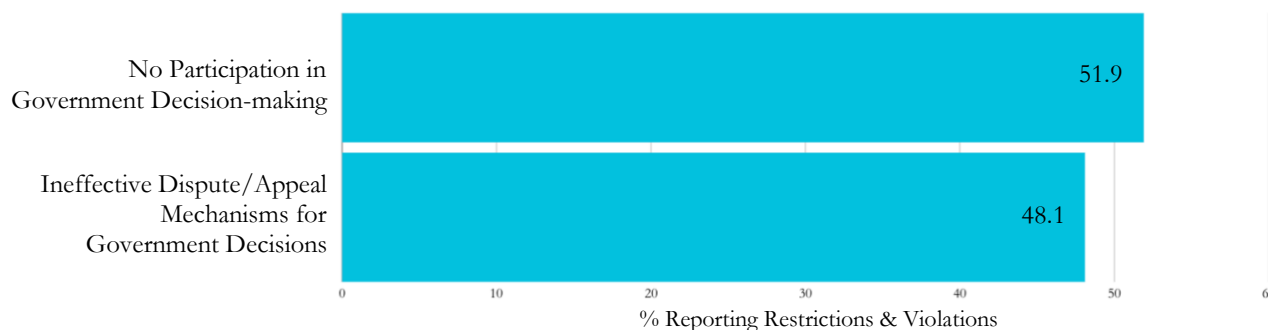
Figure 8. CSOs Reporting Increased Restrictions to Freedom of Organizing since 2020 (%)



More than half (51.9%) of CSOs report decreased access to participation in government decision-making processes, including decisions made by government agencies, ministries, or legislative bodies (ranging from all CSOs reporting this in Afghanistan to 15.4% reporting this in Mali). For some CSOs

(48.1%, or 26.3% without Afghanistan), dispute and appeal mechanisms have become increasingly ineffective and often inaccessible (all CSOs in Afghanistan reported this, while only 20.0% experienced this in Mali).

Figure 9. CSOs Reporting Worsening Government Decision-Making Restrictions since 2020 (%)



Strengthened Rights

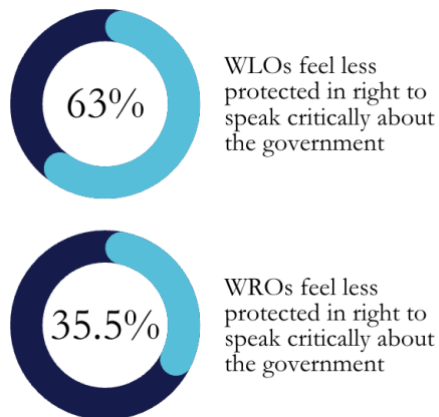
At present, less than 10.0% of CSOs (holding aside Afghanistan) report violations related to the following key rights: individual or organizational access to information and communication, the ability of people to create/join CSOs, and CSOs' ability to freely build coalitions. Specifically, only 2.0% of CSOs report that individuals and CSOs face restrictions to accessing information via the internet. No CSOs experienced internet information restrictions in Burundi, DRC, and Niger, while 7.1% reported these restrictions in Mali and 12.5% in Afghanistan. Few CSOs report restricted online communication—no CSOs in Burundi or DRC experienced such restrictions; 6.7% of CSOs in Mali reported these restrictions as did 12.5% in Afghanistan and 16.7% in Niger. Restrictions on CSO formation or membership are rare (outside of Afghanistan, where 81.3% of organizations report restrictions to creating, joining, or participating in informal or registered CSOs). Specifically, just 12.5% of CSOs in Burundi and 6.7% in Mali experiencing such restrictions, while no CSOs report this issue in DRC or Niger. Similarly, the ability to form partnerships and coalitions with other CSOs without government interference remains fairly intact outside of Afghanistan (where 87.5% of CSOs reported interference), with no CSOs reporting issues with this freedom in Burundi, Mali, or Niger, and just 7.1% of CSOs reporting this issue in DRC.

Comparatively few CSOs experience deterioration in these areas as well. None outside of those in Afghanistan report worsening ability to access information via the internet. No organizations in Burundi or DRC experience worsening ability to freely communicate over the internet, while only 15.4% report this issue in Mali. However, close 1 in 3 report worsening access and freedom to communicate over the internet in Niger (33.3%) and Afghanistan (31.1%). Outside of Afghanistan, organizations rarely experience greater interference from the government in their ability to form partnerships and coalitions. While 93.8% of CSOs reported worsening conditions related to this ability in Afghanistan, none did in Mali or Niger, and only 7.1% and 14.3% experience greater interference in DRC and Burundi, respectively. Similarly, while all CSOs in Afghanistan reported a decline in the ability of individuals to create/join/participate in CSOs, no organizations in DRC or Mali experience greater restrictions on this freedom, and only 14.3% of CSOs reported greater restrictions in Burundi and Niger.

Unique Challenges & Opportunities for Women-led Organizations

To account for the unique position of women-led organizations (WLOs), we compare the experiences of WLOs against those organizations engaged in the promotion of gender equality but not led by women (WROs). For this comparison, we hold aside the small number of civil society organizations that did not meet either criterion.⁸⁸

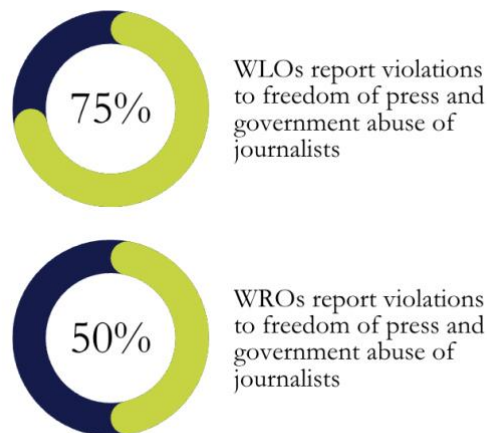
Challenges experienced by WLOs vary across contexts. Multiple respondents in Burundi, DRC, Mali, and Niger pointed to challenges affecting both WLOs and WROs equally. These shared challenges referred primarily to formal conditions—that is, the legal and policy frameworks that states utilize to regulate the operations of civil society organizations. This suggests that states have put forth consistent, if not always beneficial, policies with regard to actors in the civic space affecting WLOs and WROs similarly. However, interviews reveal differences in practical conditions across countries. We should again note the exceptional case of Afghanistan, where targeted policies have been implemented to erode and eliminate women-led organizations as part of a broader campaign to limit women's participation in social and economic spheres.



Data collected for this study reveals a variety of unique challenges that woman-led organizations face on a practical level. The greatest point of departure between WLOs and WROs relates to the ease of registration. In this regard, 62.1% of WLOs characterize the registration process as neither quick nor accessible, compared to only 33.3% of WROs. In some contexts, like Afghanistan, registration has become so complicated that the process often extends for nearly one year—a time that some organizations, especially smaller organizations at the community level, cannot afford. For WLOs with already limited capacities, required registration becomes a barrier to entry into the civil society space.

⁸⁸ The vast majority of the CSO sample either met the criteria for a women's rights organization (52.9% of the sample) or a women-led organization (41.4% of the sample). We held aside the four CSOs that did not meet either criterion for more accurate comparison.

Raising concern, the majority of WLOs (63.0%; compared to 35.5% of WROs) also report feeling less protected in their right to speak critically about the government or favorably about human rights. More WLOs (75.0%; 50.0% WROs) report that the government violates freedom of press and resorts to intimidation and harassment of journalists. In the DRC, respondents note that women in civic spaces are often harassed and targeted by men with whom they interacted, authorities, armed soldiers, and even the leaders of other CSOs. This contributes to a sense of continued fear and vulnerability to violence that impedes effective work and contributes to employee turnover.



70.4% of WLOs face obstacles to legal assembly

While WLOs are more likely to articulate concerns regarding free-speech protections for themselves, the general public, and journalists, they are also more likely to contend with the negative institutional and individual consequences of work in this space. In terms of public organizing, a greater percent of WLOs (70.4%) report facing obstacles to obtaining the permissions necessary to legally carry out assemblies (compared to 45.5% of WROs). Additionally, a greater majority of WLOs (71.4%; 50.0% WROs) confirm that the reasons for denial for assemblies have worsened, becoming less rational and less legally justifiable.

Women-led organizations more often (64.0%; 41.9% WROs) report that citizens and CSOs, including those critical or opposed to the government or government action/policy, are unable to fully participate in government decision-making processes. Similarly, 65.2% of WLOs, compared to 44.4% of WROs, note that participation in government decision-making has worsened since 2020.

When viewed collectively, these conditions suggest that WLOs face added difficulties when attempting to register and organize. Official barriers, like denial of permission to assemble, are accompanied by little rationale and no legal justification. Representatives of WLOs are less able to participate in government decision-making processes and reported notable declines in the area as well. The challenges faced by WLOs are symptomatic of broader problems with bureaucratic engagement between civil society and their respective governments. This reflects a trend toward authoritarian governance in the countries analyzed, as well as the global shrinking of civic space, which together manifest in both deteriorating administrative processes and a greater exclusion of women-led civil society organizations. Overall, the perspective of WLOs suggests that they view the civic space as one in relative decline across a variety of areas.

While these findings are concerning, interviews also reveal that WLOs are viewed with more credibility by communities and community leaders. Women-led organizations are trusted allies assumed to seek social, rather than political or financial, benefits. Multiple respondents referenced financial and resource mismanagement by male civil society leaders in contrast to the trusted reputation of female leaders in the same space. Women-led organizations are seen as distinct from their male counterparts,

imbuing them with greater trust as agents of change at the level of social relationships and as partners when negotiating with local governments.⁸⁹ Even with greater trust and allyship, challenges remain around unequal access to material and financial resources—which were often noted as privileged towards male-led organizations—and the need to continue to bridge the capacity gaps that weaken WLOs internal operations.

In response to these challenges, women-led and women’s rights organizations have adopted coping strategies to navigate state regulation and broaden their community engagement. They have primarily adopted strategies of collaboration and compromise to continue their work—more so than their male-led counterparts. For instance, since the country experienced an attempted coup in 2015 due to President Pierre Nkurunziza’s intention to run for a third term, limitations in Burundi have worsened considerably. As a result, citizens have had to comply with new government regulations, regardless of their disruptions, while creating networks with inclusive spaces. These spaces help multiple civic organizations in capacity building, expanding their visibility, and providing mutual assistance. This has helped smaller organizations contend with the civic space crackdown that followed the coup, which labeled civil society participation a form of political opposition, making these organizations subject to repeated targeting by authorities. These adaptations have been implemented with a good level of success and have helped these organizations remain competitive in securing participation and resources, despite continued restrictions.

CARE had a vital role in supporting these adaptation efforts. Representatives of CSOs interviewed for this study spoke favorably of GEWEP’s role in expanding civic space, especially for WROs and WLOs, noting that the project aided in (1) improving cooperation and communication between CSOs, (2) facilitating capacity building for local groups, (3) providing funding to enable CSOs to carry out their activities, (4) establishing connections with microfinance institutions, (5) co-creating coordination and decision-making spaces, including an innovation hub to address common problems, and (6) organizing public events for collective awareness raising. These avenues of support were viewed favorably across all studied contexts, with interviewed organizations expressing support for the expansion of these initiatives in the coming years.

Similar Methodologies to GEWEP

Across country contexts, methodologies employed by WROs, WLOs, and CSOs reflect diverse approaches to implementing programs similar to GEWEP. In Mali, these strategies include building partnerships between organizations led by men and women, signing framework agreements with the government, capacity building of CSO staff, decentralization of activities, establishment of networks, adoption of digital solutions, implementation of income-generating activities, and the integration of positive masculinities into programs. Each strategy employed in Mali came with strengths and weaknesses. For example, integration of positive masculinities content has received the support of male role models but faced resistance from women beneficiaries. Similarly digital solutions offer cost reduction benefits but faced challenges in terms of message clarity and understanding. In Niger, methodologies involve participatory and inclusive approaches, such as involving all stakeholders in program development, technical and material support for income-generating activities, strengthening local partners' capacities, and collaborative planning with beneficiaries.

⁸⁹ Noted by stakeholders in Mali and DRC.

In Burundi, WLOs adopt collaborative coping strategies like creating networks for mutual assistance and focusing on inclusive spaces for broader community engagement. Compromises around compliance with government regulations enables these organizations to navigate state regulations. In turn, these adaptations have allowed organizations to remain competitive in securing participation and resources despite continued restrictions. In the DRC, effective methodologies include the establishment of ‘Malala’⁹⁰ clubs in schools for gender equality awareness, the “he for she” campaign⁹¹ which engages both men and women, the use of “violentomètres” (violent-o-meters)⁹² to monitor household dynamics, celebrity-led awareness campaigns, and the use of GEWE themed graffiti murals in public spaces.

Organizing awareness through celebrities and influential men recognized as such in the communities (artists, musicians, etc.) has better results in changing norms to the extent that fans of these celebrities easily adhere to the messages given by their idols and consider them as absolute truth.

— Male respondent, DRC⁹³

Several other actors are engaged in the work of improving civic space and supporting civil society in the DRC. For example, the United Nations Development Programme (UNDP) and Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) methodology supports Decentralized Territorial Entities, while Mercy Corps empowers CSOs directly through subsidies for microprojects, providing a direct connection between the organization and small groups. *For more information on country-level methodologies, including the ones touched upon here, please refer to the country specific GEWEP Midterm Studies.*

Implications for Civic Space

The civic space component of this research sought to understand the ways in which civic space improved or deteriorated since 2020 in the country, especially in terms of five key categories of rights or abilities of CSOs to operate: CSOs’ ability to register and work, access to information, collaborate, freely express their views, and engage in dialogue with government authorities. Our findings suggest that some components of each of these five categories of rights are currently threatened and/or have deteriorated since 2020. Thus, while governments commonly require CSOs to register, CSOs reported few concerns with citizen’s abilities to create, join, and participate in CSOs and reported relative freedom in forming coalitions. This suggests some challenges with government oversight, but not so much that CSOs could not operate at all. Similarly, while the freedom to assemble is especially vulnerable, comparatively fewer CSOs report issues engaging in advocacy and lobbying activities or participating in government decision-making, although there were some concerns with deterioration in these areas as well. Thus, especially confrontational actions (e.g., assembly and public

⁹⁰ Pakistani women's rights and girls' education activist

⁹¹ UN’s global campaign which engages both men and women in achieving equality by taking action against negative gender stereotypes and behaviours

⁹² The implementation of “violentomètres” (violentometers) within households and couples allows groups of committed men to make home visits to other committed men to assess the attitudes and behaviours of the men who live in the house, which is informed by the household’s woman and children. Men whose household “violentomètre” are at a very low level are rewarded, such as through official recognition. However, this methodology requires means to train household members on how to fill in the “violentometer”.

⁹³ Interviews conducted April-June 2023, DRC.

demonstrations) have been curtailed, but the ability to engage with government is not entirely closed off. Still, when considering the co-occurring worsening conditions around freedom of expression and freedom of the press, these findings raise concerns about the extent to which CSOs can have authentic dialogue, unrestricted by fear of retaliation, with their governments.

As it stands, WROs, and especially WLOs, must contend with some added complications. While formal policies tend to set out non-discriminatory policy frameworks for the operation of CSOs, affecting them alike regardless of focus area or leadership (with the exception of Afghanistan), gender-based biases can limit access to domestic funding sources, further compromising the possibility of registration and the continuation of programming. Additionally, a slide toward authoritarian governance has meant a trend toward disavowal of gender equality, thus presenting a more hostile institutional environment for WROs and WLOs in study countries. As local organizations continue to require support to navigate emerging restrictions and to enable the continuation of their activities, particularly those related to human rights, bureaucratic barriers complicate the work of WROs and WLOs in a distinctive way.

A note on Afghanistan

Afghanistan is the most significant outlier in this study. As a result of the Taliban takeover of the government on August 15, 2021, Afghan women have had to contend with the enactment of regressive mandates stripping them almost entirely of their rights to work and education—in what has been called a “*gender apartheid*.”⁹⁴ This severe institutional backlash against women’s involvement in society and paid employment has profoundly disrupted all activities geared toward gender equality. In parallel, efforts to curb dissent have led to a broad deterioration of almost every avenue of the country’s civic space.⁹⁵ These developments, compounded by worsening socio-economic conditions and the lingering aftermath of the pandemic and armed conflict, have further exacerbated the precarious situation of civil society organizations in Afghanistan.

While these effects have broadly impacted civic space as a whole, WLOs have faced profoundly severe restrictions. As noted above, the government is actively hostile to any activity promoting women’s equality, rights, and empowerment. All activities explicitly targeted towards women have been shut down, and only those serving men continue through formal avenues. Additionally, women have been excluded from almost all negotiations and collaboration with the government, only being allowed to operate in select subsets of the health sector. According to one interviewee, continued resistance from authorities has led approximately 70.0% of local organizations in Afghanistan to close,⁹⁶ despite a continued and growing need for assistance.

Women-led organizations must contend with structural barriers to their work at a greater level than that of male-led organizations. One of the most severe disruptions has been to CSO capacity. Put simply, forcing women to exit the public sphere results in a noticeable loss of institutional knowledge, specialized contextual and thematic skills, and professional expertise. Restrictions prohibiting women

⁹⁴ Akbari, F., & True, J. (2022). One year on from the Taliban takeover of Afghanistan: re-instituting gender apartheid. *Australian Journal of International Affairs*, 76(6), 624-633.

⁹⁵ More information available at [link](#), [link](#), and [link](#).

⁹⁶ This approximate figure was referenced during interviews with civil society organizations in Afghanistan.

from working and leaving their homes unaccompanied have led many organizations to lose up to 90% of their employees.⁹⁷ Those that remain face threats of violence and a greater level of job insecurity. Adding to this, reports from local partners indicated seizures of property by the Taliban. For women-led organizations, these measures have not only compromised operational staff and vital resources, but also key leadership positions. In attempts to circumvent Taliban-imposed restrictions, many WLOs have moved to fully online meetings and hired men to undertake all external-facing tasks. However, with the deteriorating economic situation in the country and limited funding, women-led organizations report struggling to pay salaries and currently have few options to maintain their operations. When asked about their expectations for the coming years in terms of civic freedoms, respondents highlighted further deterioration in the future.

⁹⁷ Interviews conducted in May 2023.

6. Conclusion

Research increasingly indicates the critical role of engaging men and boys in the pursuit of gender equality. While sensitive and sticky, men's conception of their own masculinity and related attitudes and behaviors are subject to change. Interventions like CARE's GEWEP stand to help configure new social identities of masculinity that can advance equity, reduce instances of violence, and improve the lives of women and girls globally. This empirical 6-country study sought to measure the magnitude, significance, and potential sustainability of change resulting from a men's and boys' engagement program. Using a survey of 3,226 male respondents and interviews with 168 men across Afghanistan, Burundi, the DRC, Mali, Niger, and Rwanda, we examined changes in men's beliefs, attitudes, and behaviors related to masculinity and gender equality. As a companion to this research on changing attitudes and behaviors, the Research Team mapped the civic space and explored changes relevant to the workings of WROs, WLOs, and CSOs.

From the first portion of this study, we learn that the treatment effect of EMB activities is positive yet complicated. Treatment effect may not fully extend to considering women directly equal *relative to men*. Men, regardless of treatment status, do not express noticeably more supportive attitudes towards GEWE when they consider men and women in direct comparison to one another. Notable exceptions point to the complexity of attitudes. Greater program participation (treatment saturation) is fairly consistently associated with attitudes less permissive of violence towards women, positive attitudes around joint responsibility for contraceptive use, and some attitudes less consistent with toxic masculinity. Treatment is also associated with attitudes less consistent with toxic masculinity—for example, greater rejection of the notion that men must be tough and respond to insults with violence.

Of the various GEWEP EMB activities, training sessions not for male leaders and community sensitization activities not led by men are both less consistently effective. This suggests that programming that reinforces or centers men's leadership is important to create change around men's support for GEWE and positive masculinities. Less structured small groups (safe spaces and boys/youth clubs), may be less effective than more structured activities like trainings for male leaders and reflection sessions.

External factors also affect the sustainability of positive changes in men's attitudes and behavior. Negatively conditioning the long-term continuity of positive behaviors were: (1) pressure to maintain normative gender inequality from peers or colleagues and (2) political factors affecting the practical possibility of exercising egalitarian behavior under repressive governments. Evidence of effectiveness across the majority of study countries indicates the generalizability of this finding, pointing to possible benefits in a wider range of country contexts. Respondents suggested the expansion of program activities as a solution to peer pressure and other external factors negatively affecting program impact. The importance of village elders in reinforcing positive change was noted in Afghanistan. In Rwanda, participants credited community-level meetings and government efforts in solidifying program teachings.

The final portion of this study, which focused on the civic space, pointed to a number of worsening challenges facing WLOs, WROs, and CSOs. Restrictions on freedom of expression and denial of the freedom to assemble continue to negatively impact CSOs as organizations, the work CSOs undertake, and the populations these organizations serve. The environment in which CSOs operate has seen

dramatic changes since the onset of the COVID-19 pandemic in 2020, including the deterioration of freedom of expression, freedom of assembly, and the ability to operate without government oversight,

The negative effects of these changes have been carried by WLOs more than WROs, and by WLOs and WROs more than other CSOs. There is an enduring need to bridge capacity gaps that weaken WLOs' internal operations. Even while the civic space has weakened and challenges remain around unequal access to material and financial resources, WLOs are seen as more credible. Women-led organizations are trusted allies distinct from their male counterparts, which imbues them with greater trust as agents of change.

Women-led, women's rights, and other civil society organizations involved in this study noted important contributions from GEWEP include: (1) improving cooperation and communication between CSOs, (2) facilitating capacity building for local groups, (3) providing funding to enable CSOs to carry out their activities, (4) establishing connections with microfinance institutions, (5) co-creating coordination and decision-making spaces, including an innovation hub to address common problems, and (6) organizing public events for collective awareness raising.

Findings

Engaging Men & Boys

1. **Participation in GEWEP is associated with higher GEM Index scores at a global level**, indicating greater support for gender equality and women's empowerment (GEWE) and greater alignment with positive masculinities.
 - Engagement in GEWEP is associated with a statistically significant difference in support for GEWE and positive masculinities, placing treatment men 5.0% higher on the GEM Index scale, at nearly moderate support of GEWE and alignment with positive masculinities, while the control group sits at low-moderate.
2. **The greatest statistically significant, within-country treatment effects are seen in Burundi and DRC.** The average man involved in GEWEP in Burundi has a moderate, approaching high, GEM Index score, while the mean control group score is low, approaching moderate. In DRC, the mean treatment group score is moderate, while control group scores are low, approaching moderate. Treatment men also have noticeably higher scores in Niger (near moderate, while control group scores are halfway between low and moderate). Treatment and control groups are not statistically significantly different in Mali, Rwanda, or Afghanistan.
3. **Rwanda exhibits the highest control group mean for the GEM Index amongst all countries, on par with the treatment group mean in Rwanda. This suggests generally higher levels of support for GEWE and alignment with positive masculinities** regardless of GEWE programming. Burundi similarly had a higher GEM score baseline (control group mean), followed by Niger.
4. **Globally, men who participated more often or in a wider range of GEWEP activities hold attitudes more supportive of GEWE and aligned with positive masculinities.** Using treatment saturation, rather than simply comparing treatment men to control group men, revealed greater program participation is significantly associated with higher GEM Index scores in Mali and Rwanda. However, this is not the case in Afghanistan, meaning Afghanistan is the only country where neither treatment versus control comparisons nor comparisons based on men's level of participation revealed evidence of higher GEM scores.

5. **Across contexts, GEWEP may be creating change best characterized as incremental.** Especially sticky attitudes and behaviors—those related to identity, for example—require time and consistency to slowly move participants toward more support for sensitive topics like GEWE and more positive masculinities.
 - Men with program participation levels in the bottom 25th percentile have a GEM score of 2.65. Those with participation scores in the top 75th percentile have a GEM score of 2.71. This fairly small difference in GEM Index scores (.06) points to incremental change.
6. **Treatment effect may not fully extend to considering women directly equal *relative to men*.**
 - Men, regardless of treatment status, do not express noticeably more supportive attitudes towards GEWE when they consider men and women in direct comparison to each other. For example, the statement “rights for women mean that men’s lives will not be as good” offers a zero-sum contrast between women’s or men’s rights rather than a collaborative “our rights” or additive “women’s and men’s rights.” Responses to this contrasting statement illustrate no effect of treatment.
7. **The most effective program activities are (1) interactive, collective sessions with a focus on male leaders and/or (2) couple or family-centric activities.**
 - Training sessions on masculinities or gender equality/women’s rights targeting male leaders, and reflection sessions with leaders or community members, are associated with higher GEM Index scores in Afghanistan, Burundi, the DRC, Mali, and Rwanda.
 - Acting as a role model couple and participating in couples counseling and family talks are associated with higher GEM Index scores in 80% of the countries where these program activities were implemented. Further, acting as a role model couple, couples counseling and family talks are the most effective program activities in Niger.
8. **Program participation is associated with a higher likelihood of self-reported action to reduce gender inequality within the household, workplace, or the community.**
 - Treatment men are 2.5 times more likely to report taking action compared to control men.
 - High levels of treatment saturation (75th percentile) are associated with 1.28 times greater likelihood of self-reported action to reduce gender inequality compared to those with low levels of treatment saturation (25th percentile).

Civic Space & CSOs

1. **Most interviewed organizations operate at the national level (41.4%), followed by those engaging at the district or regional levels (35.7%).**
 - 8.6% of WROs, WLOs, and related CSOs operate at the community level across 6-20 communities.
 - 10.0% operate in under five communities.
2. **Most CSOs begin and often exist for some time as informal, unregistered organizations. Forced registration creates financial and legal barriers** for organizations that may not have the funding or capacity to formally register, especially at the local level.
 - Formal registration is inaccessible for 43.5% of CSOs (35.9% without Afghanistan). Further, 62.1% of WLOs characterize the registration process as neither quick nor accessible, compared to only 33.3% of WROs.
3. **Ability to form partnerships and coalitions with other CSOs without government interference is fairly intact** outside of Afghanistan.

- 87.5% of CSOs reported interference in Afghanistan (93.8% report increasing interference).
 - 7.1% of CSOs report interference in DRC (7.1% report increasing interference).
 - No CSOs report interference in Mali or Niger.
 - In Burundi, while all CSOs feel this ability to form partnerships and coalitions is mostly respected by the government, 14.3% report conditions related to government interference are worsening.
4. **Only CSOs in Afghanistan, Niger, and Mali report worsening ability to access information via the internet.**
 - 1 in 3 CSOs report worsening access and freedom to communicate over the internet in Niger (33.3%) and Afghanistan (31.1%).
 - 15.4% report worsening access and freedom to communicate over the internet in Mali.
 - No organizations in Burundi or DRC experience worsening ability to freely communicate over the internet.
 5. **Advocacy and lobbying are restricted in 35.9% of cases.** 41.3% of CSOs (31.8% without Afghanistan) find that dispute and appeal mechanisms within the government are ineffective and often inaccessible.
 - Ranging from 93.8% in Afghanistan to 7.7% in Niger find that dispute and appeal mechanisms within the government are ineffective and often inaccessible
 6. **79.3% of CSOs report encroachment on the right to freedom of expression**, with 75.0% (63.4% without Afghanistan) of these organizations reporting that restrictions to free expression have worsened since 2020.
 - Ranging from 100.0% in Burundi and DRC to 22.2% in Mali report encroachment on the right to freedom of expression.
 - 100.0% of CSOs in Afghanistan and 33.3% in Mali report restrictions to free expression have worsened since 2020.
 7. **45.9% report lack of protections of the right of CSOs to speak freely** about human rights, fundamental freedoms, and critically about the government, with 51.9% noting that the situation has deteriorated since 2020.
 - Ranging from 93.8% in Afghanistan to zero CSOs in Mali.
 8. **Permission to assemble, even for peaceful public demonstrations, is being increasingly denied for 54.6% of CSOs.**
 - 70.4% of WLOs (45.5% of WROs) report facing obstacles to obtaining the permissions to legally assemble.
 - 57.4% of CSOs report denials of assembly are not accompanied by any reasonable legal justification.
 9. **Only 2.0% of interviewed civil society representatives report that individuals and CSOs face restrictions to information** via the internet.
 - No internet information restrictions reported by CSOs in Burundi, DRC, and Niger.
 - 7.1% reported these restrictions in Mali and 12.5% in Afghanistan.
 10. **Women in civic spaces are often harassed and targeted by men in positions of authority, armed soldiers, and even the leaders of CSOs**, contributing to a sense of fear and vulnerability.
 - 63.0% of WLOs (compared to 35.5% of WROs) report feeling less protected in their right to speak critically about the government or favorably about human rights.

- 75.0% of WLOs (50.0% WROs) report the government violates freedom of press and resorts to intimidation and harassment of journalists.

Recommendations

1. Expand GEWEP activities to more communities. Consider joining together nearby communities during implementation to reinforce peer support across communities.
2. Continue and expand upon the engagement of village elders and faith leaders as authority figures in their communities. Offer trainings to elders and faith leaders using sacred text to provide evidence they can draw on when advising other men and families. Encourage a formal or informal training-of-trainers model as appropriate in each context.
3. Explore ways to encourage greater collaboration between headquarters and country offices and between country offices implementing GEWE activities. This will eliminate confusion around intervention strategies, improve monitoring and reporting, and offer opportunities for cross-country sharing of best practices.
4. Support continued research into the complexities of attitudes around masculinities, especially at points of contradiction, interpersonal and sexual violence, and involvement with armed actors.
5. Fund additional research into the stickiness of attitudes comparing women's and men's equality, value, and rights to one another as opposed to collaborative or additive attitude formulations.
6. Foster the continued creation of inclusive spaces (like consortiums, networks, and clusters) where women-led civil society organizations can share best practices, engage in joint programs, and learn from each other. These multi-actor partnerships have proven useful to more effectively adapt to changing circumstances and develop responses.
7. Offer training and initial core funding for women-led organizations to produce sustainable income-generating activities. Provide aid and technical expertise in the development of these alternative funding lines. This funding might also be used to support formal registration of WLOs and WROs. Organizations should prioritize their core activities, but income generation can be necessary as supplemental funding streams. WLOs and WROs struggle with the costs of formal registration, creating financial and legal barriers for existing organizations. Therefore, generating income can be a helpful way to support these organizations. These additional avenues of income can help WLOs and WROs address severe funding concerns, especially in contexts like Afghanistan where the inaccessibility of funding and the exclusion of women from the labor force has curtailed the ability of organizations to secure financing and continue their operations.
8. Explore online campaigning and organizing with WLOs, WROs, and CSOs unable to gather in person. For security reasons, these efforts may need to be initiated out of country, but can be developed in collaboration prior to that point.

7. Annexes

Annex I: Ethical Protocols

Below are protocols that every Global Insight team follows for each program, regardless of participant populations. While all protocols may not be applicable to every program, these policies guide all our work. The protocols applied for this study will also be GDPR compliant.

“Do no harm ethic”

The anonymity and protection of vulnerable populations requires all members of the study team to take responsibility for the safety and ethical treatment of participants. As such, a do no harm ethic is paramount to this work. Recognizing a fundamental duty of care towards participants, we are committed to:

- Assessing risks and putting in place proportionate safeguarding measures, including but not limited to: personally training and vetting team members, closely monitoring data collection techniques, and daily debriefings with the research team, partner staff, and security personnel.
- Providing clear program content, ethics, and safety training to all team members who undertake fieldwork on behalf of this research.
- Considering the short- and long-term impacts on children and vulnerable adults when making arrangements to meet with participants, store data, and publish this research.
- Valuing and respecting participants, which begins with the presumption of legitimacy and includes listening to their views and integrating their feedback on the research topic as well as ethical and security constraints of this work.
- Ensuring compliance with US and UN evaluation policies and relevant laws in country.
- Ensuring compliance with research ethics regulations and processes in country.

Working with Vulnerable Populations Protocol

Working with vulnerable populations presents a number of risks. These risks fall disproportionately on participants, but also affect the study team. With this in mind, the following procedures will be followed to mitigate these risks:

- Receiving consent prior to engaging with all participants. Verbal consent will be received using a consent script and form. The consent process will include:
 - Offer adequate/sufficient and appropriate information to make a decision. This will be done through a consent form and script provided to each participant. A verbal discussion between the researcher/enumerator and participant will be encouraged per the wishes of the participant.
 - Ensure no pressure or coercion applied for participation.
 - Explicitly inform all participants that participation in the study will not influence their good standing with the program in any way.
 - Search for subtle signs of refusal.
 - Provide participants with adequate time to think about the decision to participate and ask questions before giving verbal consent.
- Participants will be provided plenty of space to pause or stop the conversation as well as withdraw from the interview at any point, without question.

- Interviewers will make sure participants are in a safe, private space where participants feel comfortable and anonymity can be ensured before beginning the interview.
- Only the researcher/enumerator, an interpreter or note taker as needed, and the participant will be within listening distance during the interview/survey. Guests of the participant may join, only with permission of the participant.
- The Research Team is a mix of both women and men to account for any gender and cultural sensitivities. Given that it is customary in many places for men and women to interact and socialize in separate settings, it is important to have a mixed gender representation of enumerators to maximize the comfort of participants who may wish to speak with only women, or not be in the presence of men without another woman present.
- Interviews will be recorded (audio only) on an encrypted device if, and only if, the participant agrees without hesitation.
- No additional identifying information – name, date of birth, village or specific location of residence, etc – will be gathered unless the participant expressly requests to be identified. If the participant wishes to be identified, the team will go over the risks of doing so in clear and concrete terms. The participant will then be asked to confirm their desire to be identified a second time.
- No video or photos will be taken of participants to ensure confidentiality, unless the participant wishes to have their image taken.
- Study team will inform participants at the outset that they can change their mind and withdraw their consent at any point during the data gathering period.

Data Security Protocol

To ensure the security of data and anonymity of participants, data will be stored according to the following procedure:

1. Verbal consent will be received.
2. Any identifiable information gathered during recruitment – name, phone number, or other contact details – will be securely deleted when recruitment is complete. Names will never be directly linked to the participants' responses.
3. Interview notes, recordings, and transcripts will only include an ID number connecting these documents. Participants' confidentiality and privacy will be protected by the fact that their responses and names will never appear on the same document.
4. During interviews, participants will never be asked for nor referred to by their name.
5. A password-protected encrypted file will contain names and ID numbers. The Team Lead will have access to this document. Other study team members may be granted access under the supervision of the Team Lead. This linking file along with all interview notes, recordings, and transcripts will be stored on a secure device. When data collection is complete, this linking file – containing names and ID numbers – will be securely deleted since there will be no need to retain participant names.

Annex II: Data Collection Instruments

Full data collection instruments for this study can be found [here](#).

Annex III: Terms of Reference

Full terms of reference for this study can be found [here](#).