

PROGRAM P

**ENGAGING MEN AS
CARING, EQUITABLE
AND NONVIOLENT
FATHERS AND
PARTNERS**

PROGRAM SUMMARY

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Equimundo: Center for Masculinities and Social Justice has worked internationally and in the US since 2011 to engage men and boys as allies in gender equality, promote healthy manhood, and prevent violence. Equimundo works to achieve gender equality and social justice by transforming intergenerational patterns of harm and promoting patterns of care, empathy and accountability among boys and men throughout their lives.

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SECTION 1.

OVERVIEW

INTERVENTION

Program P: P stands for Padre (Pai), meaning Father in Spanish (Portuguese)

RATIONALE AND DESCRIPTION

Program P is a gender-transformative intervention targeting parents (future or current parents of children aged 0-5 years). It is designed to encourage participants and community members to challenge harmful social beliefs and norms around gender power and roles. These norms include notions of male authority and female subordination and obedience as these factors are strongly linked to the level of familial violence.

Program P was created by Equimundo along with Cultura Salud/EME and REDMAS as part of the MenCare campaign. The program was built upon evidence that shows that co-responsible fatherhood can promote gender-equitable relations and the sharing of caregiving among female and male caregivers, enhance the quality of family relationships, health and well-being, and prevent violence against women and children.

- Research indicates that children exposed to violence (perpetrated by a man against his mother or by his parents against her) are at a greater risk of using violence in the future against their partners (in the case of children) or of being victims of violence (in the case of girls)¹.
- On the contrary, research shows that parents' positive involvement in their children's lives improves children's cognitive, social and emotional development. Children who witness how their parents do household chores and care for their siblings are more likely to repeat these gender equal behaviors in adulthood. This virtuous cycle contributes to a reduction in the use of violence and the level of stress at home and thus can prevent the intergenerational transmission of violence and promote instead the transmission of caring behaviors.

Program P provides a targeted programmatic response including concrete strategies to engage men in active fatherhood from prenatal care to delivery, childbirth, and children's early years. Hands-on activities and role-playing exercises with fathers and couples aim to create a safe environment for discussing and challenging traditional gender norms and practicing new, positive social behaviors related to men's caregiving and involvement in their children's lives as well as supporting their female partner's decision-making and economic participation. Specifically, the program seeks to promote

¹ Doyle K, Swan M, Manji S, Daelmans B, Greene M, Chaudhury S. Nurturing care and men's engagement: thematic brief. World Health Organization and the United Nations Children's Fund (UNICEF), 2022.

gender-equitable relationships, improve couple/parent-child relationship quality, reduce intimate partner violence and/or violence against children, and promote shared caregiving.

COUNTRIES OF IMPLEMENTATION

The program was first tested in 2013 in Brazil and Nicaragua. It has since been adapted, after formative research, in over 20 countries throughout Latin America, Africa, South Asia and the Middle East.

Countries of implementation include Armenia, Bangladesh, Bolivia, Brazil, Colombia, Chile, Ghana, Guatemala, Haiti India, Lebanon, Malawi, Mozambique, Nicaragua, Nigeria, Palestine, Russia, Rwanda, Senegal, South Africa, Sri Lanka, Uganda, United States (Pittsburgh, D.C., West Virginia), and West Africa (Mauritania, Chad, Ivory Coast, Niger, Burkina Faso, Mali).

ABOUT EQUIMUNDO

Equimundo is a global leader in promoting gender justice and preventing violence by engaging men and boys in partnership with women, girls and people of all gender identities.

Equimundo has adapted Program P and/or developed additional curricula to engage men as allies in fatherhood programming in partnership with a wide array of organizations globally.

GENDER THEMES OF FOCUS

Initial adaptations emphasized father's involvement in reproductive, maternal, newborn and child health, promoting the distribution of caregiving and domestic work and prevention of violence in the family. Later adaptations maintained the focus on engaging men in active fatherhood and promoting gender equitable relations between male and female caregivers, with added contents that aim to foster early childhood development, strengthen positive parenting skills, prevent child marriage, and enhance nutrition and food security.

Examples of different specific areas that the adaptations in various settings prioritized:

- Engaging fathers in using health services
- Engaging fathers to prevent child marriage
- Engaging men as partners in early childhood development, violence prevention, and gender equality
- Engaging men for equitable nutrition in conjunction with agricultural and nutrition programs
- Engaging immigrant and refugee fathers and couples in preventing domestic violence

PROGRAM APPROACH AND METHODOLOGY

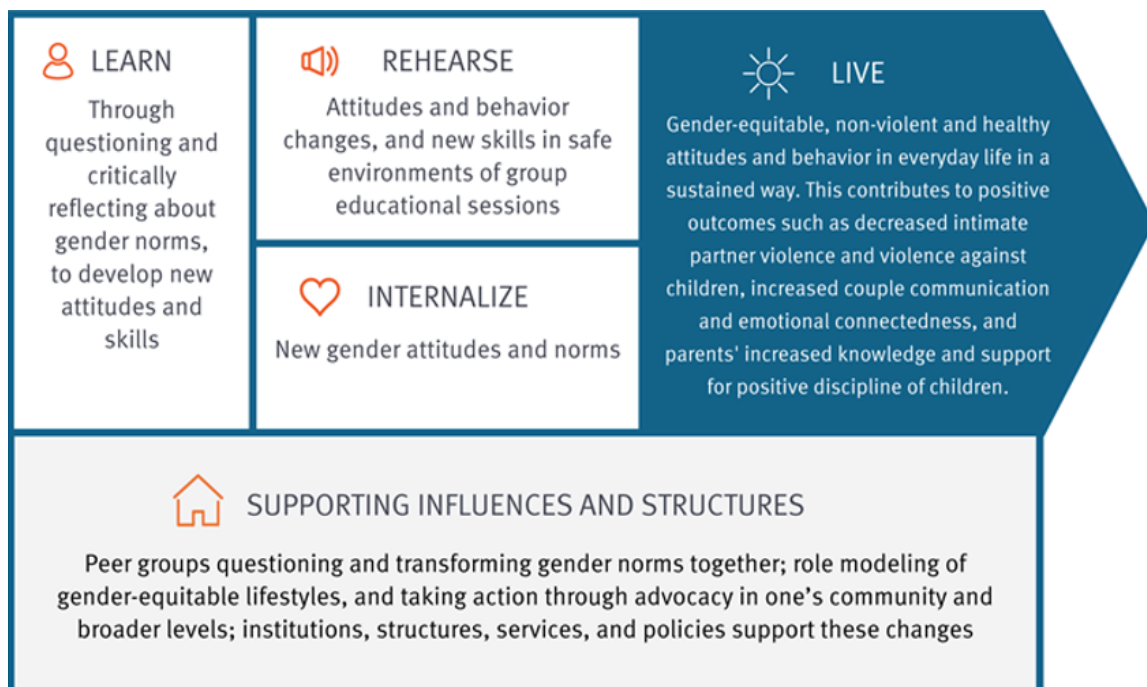
Program P's work in engaging men as allies in gender equality contributes to an intergenerational improvement in family wellbeing and health outcomes and enhanced relationships.

The original [Program P manual](#) includes three components which are ideally intended to be implemented jointly. Together, they reinforce the gender transformative effect, diffuse the newly adopted beliefs and attitudes of individual participants and create a wider enabling environment at the

community level, to support the individual changes. The Program P Manual includes; (1) a guide for health professionals on how to engage men in the prenatal consultation space and primary health clinics; (2) a series of eleven (10-15) group education sessions with men, and their female partners; and (3) a step-by-step guide to create and launch a [MenCare community campaign](#) (as part of a global fatherhood campaign).

Program P’s **Theory of Change** is premised on sociological theories of gender and masculinities that highlight how gender inequalities are reproduced, sustained, or transformed through everyday interactions in the home. The intervention aims to provide a structured, reflexive space for intimate partners to:

1. Question and critically reflect on gender norms and how these shape their lives
2. Rehearse equitable and non-violence attitudes and behaviors in safe spaces with peers
3. Internalize these new gender attitudes and behaviors, and apply them to their own lives to achieve gender-equitable, non-violent, and healthy practices



Men and their female partners become aware of the inequalities, reflect on the cost of rigid gender norms and power imbalance in relationships and learn and practice new skills (i.e. couple communication and joint decision-making) in safe, non-judgmental peer environments. In this context, positive changes can occur across a range of health and relationship behaviors. It is also key to support social mobilization strategies, engage with participants’ reference groups and other supporting influences and structures, such as peer groups, institutions, services and policies, that will create the enabling environment necessary to sustain these changes beyond implementation.

The methodology is tailored to the social, cultural and economic context of the country in which it is implemented. At times, it can be designed to complement women’s economic empowerment, nutrition, social protection or early childhood development programs.

TARGET POPULATION

Male, female and non-binary partners and caregivers with young children (0-5 years) and/or primary health-care providers, social protection or education practitioners or community workers supporting and interacting with family health and well-being.

SECTION 2.

IMPLEMENTATION ARRANGEMENTS

IMPLEMENTING PARTNERS

The implementing partners vary according to the context and nature of the project but are usually international, national or local Non Governmental Organizations (NGOs), or government institutions. Some Program P implementing partners include local NGOs, ministries of health, gender, social development or other family services. Partners have included ABAAD, Concern Worldwide, Global Communities, RWAMREC, World Vision, Plan International, CINDE, Puntos de Encuentro, Cultura y Salud, with the financial support of partners such as the World Bank, the Inter-American Development Bank, SIDA, the Oak Foundation, Wellspring, Equidna, UNICEF, UNFPA, UN Women and UN Population Fund.

PROCESS OF AND CRITERIA FOR SELECTING FACILITATORS

Successful groups have been led by either male or female facilitators. In some settings, a pair of facilitators (one male, one female) are trained to facilitate the small group sessions. Program P averages 1-2 facilitators per 10-12 participants. Facilitators can be selected by and from the community where the groups will be held, can be specifically recruited by the implementing organization or be community health promotion workers engaged by a public institution such as the Ministry of Health or Social Protection.

Effective facilitators usually meet the following criteria:

- are part of or are knowledgeable of the communities and sociocultural context in which the program is implemented
- personally committed to gender justice and women's economic empowerment;
- able to model respectful, equitable gender relation;
- capable of building trust with participants and facilitating open dialogue and sharing;
- able to engage with participants in a participatory, non-hierarchical manner; and
- able to withhold judgment and refrain from 'teaching' the participants.

Local community facilitators typically receive transportation and communication allowances to enable them to effectively implement the groups.

FACILITATORS SELECTION AND TRAINING

The training of facilitators is preferably done through a conceptual and practical, hands-on training. At times, it can be done through a training of trainers or a replication approach. In the latter case, Equipundo trains 'master trainers' within local, national, or international NGOs who then replicate the training or work directly to train the facilitators themselves. Facilitator training generally lasts between 5 and 14 days depending on the context and the prior experience and skills of the facilitators. Refresher training (two to five days) is often given after the piloting of the approach or after one cycle of implementation has been completed.

The content of the training usually begins with building a foundational understanding of the concepts of gender, masculinities, power and identity, followed by applying this knowledge to the setting and reality where the implementation will be delivered. It also covers the basics of gender-transformative programming approaches and men's positive engagement to advance gender equality in the context of family life.

Facilitators often arrive with a passion for this work and some experience in working on gender justice issues (personally or professionally). However, it is important to ensure that all participants have a shared foundation and understand the importance of creating spaces for individuals to critically reflect on, and question, harmful gender norms to foster social change and gender equality.

The training also includes an overview of the program curriculum and an exploration of how working with men and couples at the household level contributes to addressing some of the barriers to women's equality. The facilitators are introduced to the content for each session and related activities and can experience them themselves. They also practice facilitating the activities, which consist of role playing and participatory exercises, and receive feedback from the rest of the peer facilitators and Equipundo staff. Additional time is spent ensuring that they are informed about the logistical and organizational aspects of implementation, as well as ethical and do no harm and survivor-centered principles to ensure men are never engaged to the expense of women, that women are always consulted, and their agreement is sought before engaging men, if the curriculum includes couple sessions.

Finally, participants discuss if adequate referral pathways exist in case participants disclose experiences with violence and wish to be connected with specialized services.

SECTION 3.

IMPLEMENTATION PROCESS OF THE GENDER-TRANSFORMATIVE APPROACH

PROGRAM ADAPTATION AND IMPLEMENTATION CYCLE

The steps in the implementation process vary by location and project, but generally include the following:

1. Formative research to inform curriculum development
2. Curriculum development
3. Capacity building of staff on gender-transformative approaches
4. Training of staff and local facilitators to implement the curriculum
5. Piloting the draft curriculum
6. Iterative revision and full implementation of the final curriculum in group education sessions
7. Learning and scaling-up of program (where applicable)

LENGTH OF IMPLEMENTATION

The process of developing and piloting the curriculum often takes between 6 and 18 months. Implementation cycles generally last between three and five months, depending on the length of the curriculum. Depending on adaptation and context, the curriculum may include between 10 to 15 sessions, which can last from 1.5 hours to 3 hours per session. Sessions are usually implemented on a weekly or bi-weekly basis.

GRADUATION OF PROGRAM

In some settings, a more formal 'graduation' from the program is organized, often with the families and friends of participating couples, as well as local authorities to celebrate achievements and commit to sustaining the positive change. However, it is not a core component of the methodology.

SECTION 4.

MONITORING AND EVALUATION INDICATORS

MONITORING

Monitoring is often conducted by the implementing partners and facilitators with technical accompaniment from Equimundo through routine feedback meetings with the facilitators and the submission of monitoring forms. Monitoring data gathered includes rates of participant attendance and retention, observations and reflections on session implementation, success stories and

challenges encountered. The implementing partner also conducts monitoring visits to the group education sessions and follows up with facilitators who may need additional training or support. Periodic feedback is solicited from program participants to gather insights on how the sessions and topics addressed are perceived and appreciated. Throughout this process, adjustments in content or strategies that may be needed are made by all partners.

INDICATORS

The indicators used to evaluate the impact of the methodology vary depending on the specific goals of the program, but generally include some of the following quantitative indicators:

- Equitable gender attitudes based on Gender Equitable Men (GEM) scale scores (see Making Women Count in the resource materials for a description of how to use the GEM scale).
- Participation of women and men in joint and autonomous household, couple and family decision making (e.g., related to household finances, reproductive and sexual decisions, women's work outside the home)
- Quality of couple communication
- Perceived partner support during pregnancy
- Percentage use of modern contraception
- Parental use of physical punishment against children in past month
- Prevalence of intimate-partner violence
- Women's and men's time spent on unpaid care work
- Women's time spent on paid work

Data on these indicators are also gathered qualitatively through focus group discussions and in-depth interviews with male and female participants, facilitators, the implementing partner and key stakeholders in the community.

If the adaptation is linked to a complementary intervention, such a program to increase women's economic participation, information from the evaluation of the economic empowerment program can be collected. This information can then be used to understand whether the addition of the gender-transformative male engagement component has contributed to further women's economic development.

SECTION 5.

BUDGET



EXPENDITURES

The budget varies significantly depending on the context, length of implementation, rigor of the evaluation, and number of participants reached. The greatest costs relate to capacity-building

including the training of staff and facilitators (which covers both the mindset reflection period as well as training on the curriculum), and the research, monitoring and evaluation activities. The group education itself can often be implemented at low cost depending on context, whether incentives are provided to participants, and the costs associated with facilitators. Facilitators generally receive transportation and communication allowances or stipends or other forms of material support to enable them to implement activities, rather than being paid by item for implementation and transportation.

TOTAL COSTS

The costs associated with Program P in Bolivia, for example, were US \$170,000 for the design and implementation of one-program cycle with approximately 700 participants and US \$450,000 for a rigorous evaluation (i.e. development of the RCT, pilot tests, baseline, end-line evaluation).

SECTION 6.

RESULTS

PARTICIPANTS REACHED

Since 2013, Program P interventions have reached and trained (in the case of providers), at least **44,500** direct beneficiaries and **80,000** indirect beneficiaries.

- Direct beneficiaries include **25,250** fathers and men, **6,500** community members, **8,150** mothers and women, **1,812** facilitators, **1,323** father's clubs, **1,463** health providers, and **511** other service providers including social workers, teachers, and youth advocates.
- Indirect beneficiaries include **75,000** participants reached through campaigns and 3,753 children reached through parents.

For example: MenCare+ South Africa reached 713 participants (mostly male, some female) in the sexual and reproductive health groups and 1,550 participants (mostly male, some female) in the parenting groups, alongside 35 program stakeholders, program staff, healthcare workers, and social workers who were interviewed.

The actual number is much higher because several programs have been expanded or are ongoing without Equipundo's involvement and, as a result of the methodologies being open access, other organizations may also be implementing them.

RESULTS

Existing evaluations show that culturally adapted gender-transformative interventions with men and couples, such as Program P, can effectively change deeply entrenched gender inequalities and improve a range of health-related behavioral outcomes. Significant gender-related changes observed, for example, with Program P Bandedereho in Rwanda, include women experiencing less physical and sexual intimate-partner violence (IPV) within the past year and greater attendance and male accompaniment at ante-natal care visits; women and men reporting less child physical punishment, greater modern contraceptive use, higher levels of men's participation in childcare and household tasks, and less dominance of men in decision-making.

Individual, Couple, and Family Level Changes:

- Lower level of physical and sexual violence by partners reported by women
- Higher levels of women's antenatal care attendance and use of modern contraceptives
- A higher proportion of men accompanying women to antenatal care, using modern contraception, and supporting their partners during pregnancy
- Lower levels of male dominance in household decision-making and an increase in men's time spent in childcare and household work
- Lower levels of physical punishment of children

Institutional Changes:

- Program P's intervention works within existing health and educational settings to promote men's engagement in active fatherhood and maternal, newborn, and child health as well as early childhood development. This work has indicated positive changes in understanding the importance of men's role in caregiving and involvement in pre-and post-natal care, not only among men and women at the individual level, but also at the institutional level, resulting in policy changes and promotion of gender equitable services. Thus, the intervention provides direct benefits for participants and strengthens the gender-transformative capacity of local organizations and institutions.

SUCCESS FACTORS AND STRENGTHS

- Positive approach to engaging men
- An experiential based, interactive gender-transformative approach
- Emphasis on sharing of caregiving and domestic work between women and male parents/caregivers, balanced power relationships within the family, and supporting women's decision-making. This approach is designed to engage couples and foster critical reflection and build healthy relationships.
- Connects reflections on parental well-being with child well-being
- Supportive peer environment that goes beyond the intervention.
- Each session closes with behavior-based take-home activity to promote learning integration and practice of new skills and attitudes

SUSTAINABILITY

Equimundo's evaluations of gender-transformative interventions that engage men (e.g. in maternal, newborn and child health) have demonstrated that key changes can be sustained more than one year after the intervention ended. Related to men's participation in unpaid care work, women's decision-making power, and women's experiences of intimate partner violence have been sustained more than one year after the intervention ended. In Rwanda, for example, group members have continued to meet or reach out to other community members to promote change in their communities beyond the life of the program.

ADDITIONAL RESOURCE MATERIALS

Promundo. "Program P: A Manual for Engaging Men in Fatherhood, Caregiving, and Maternal and Child Health." Last modified 2021, <https://www.equimundo.org/resources/program-p-a-manual-for-engaging-men-in-fatherhood-caregiving-and-maternal-and-child-health/>

- Access [Program P manuals](#)

Promundo. "Program P." Last modified 2021, <https://www.equimundo.org/programs/program-p/>

- Access [Program P Overview](#)

Doyle K, Levto R, Barker G, Bastian GG, Bingenheimer JB, Kazimbaya S, et al. (2018) "Gender-transformative Bandedereho couples' intervention to promote male engagement in reproductive and maternal health and violence prevention in Rwanda: Findings from a randomized controlled trial." PLoS ONE 13, no. 4 (2018): 1-17, doi: e0192756. <https://doi.org/10.1371/journal.pone.0192756>

- Access [RCT Findings](#)

Bandedereho Facilitator's Manual (2021) Engaging men as fathers and partners in maternal and newborn health, caregiving, violence prevention, and healthier couple relations <https://www.equimundo.org/resources/bandedereho-facilitators-manual-2021/>

The Prevention Collaborative. "Program Summary: Bandedereho Couples' intervention to Promote Male Engagement in Rwanda." (2019). Accessed June 20, 2023. https://prevention-collaborative.org/knowledge_hub/bandedereho-couples-intervention-to-promote-male-engagement-in-rwanda/

- Access [Bandedereho Program Summary](#)

Doyle, Kate. 2020. "Good Practice: Journeys of Transformation or Engaging Men as Allies in Women's Economic Empowerment." United Nations Food and Agriculture Organization. <http://www.fao.org/3/cb1331en/cb1331en-05.pdf>

- Access [Journey of Transformation Programs](#)

Alemann, C., Mehaffey, R, Doyle, K. (2023) Core Elements of Gender-Transformative Fatherhood Programs to Promote Care Equality and Prevent Violence. Results From a Comparative Study of Program P Adaptations in Diverse Settings Around the World.

- Access [Here](#)

Doyle, K., Levto R, G., Karamage, E., Rakshit, D., Kazimbaya, S., Sayinzoga, F., et al. (Under Review). Long-term impacts of the Bandedereho intervention on violence against women and children, maternal health-seeking, and couple relations in Rwanda: A six-year follow-up of a randomised controlled trial.

