



Preventing Intimate Partner Violence

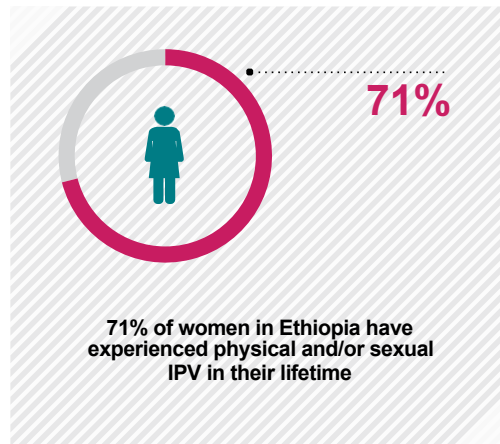
Gender-transformative cultural ceremonies:
Unite for a Better Life in Ethiopia

Goal

The goal of this cluster randomised controlled trial was to evaluate the effects of a gender-transformative intervention designed to reduce intimate partner violence (IPV) and HIV risk behaviors and promote healthier, more equitable relationships. In different trial arms, the intervention was separately offered to men only, women only, and couples.

The Role of Targeting Men, Women and Couples in IPV Prevention

Previous evidence suggests that culturally sensitive education interventions can be successful in reducing IPV and associated risk behaviours; however, the existing evidence primarily analyzes interventions targeting women. The Unite for a Better Life (UBL) program is a gender transformative, participatory intervention delivered to men, women and couples in Ethiopia in the context of the coffee ceremony, a traditional forum for community-based discussion. The programme aims to reduce physical and sexual IPV and HIV risk behaviors as well as promote healthier, more equitable relationships.



The Research

This evaluation was the first full-scale evaluation analysing an intervention targeting the prevention of IPV delivered to couples, and one of the first full-scale evaluations analysing an intervention delivered to men. It is also one of the first to evaluate such an intervention in a rural, low human-capital context, rather than an urban area or a higher-education context.

How?



This evaluation was a four-arm cluster randomised controlled trial. In three arms, the UBL intervention was offered to men, women and couples; the fourth arm served as a control arm.

Where?



The study was conducted in rural southwestern Ethiopia. Previous evidence from this region suggests that the area is characterised by consistently high rates of IPV, as well as low knowledge around sexual health and HIV prevention and high rates of risky sexual behavior.

Who?



6,770 households across 64 randomly-selected villages were enrolled in the study. Baseline data from one spouse in each household was collected according to the study subarm assignment (3,386 women, 3,384 men). Across the trial, the overall follow-up rate at 24 months among the respondents surveyed at baseline was 88%. Endline data were also collected from the spouse of the baseline respondent.

Why?

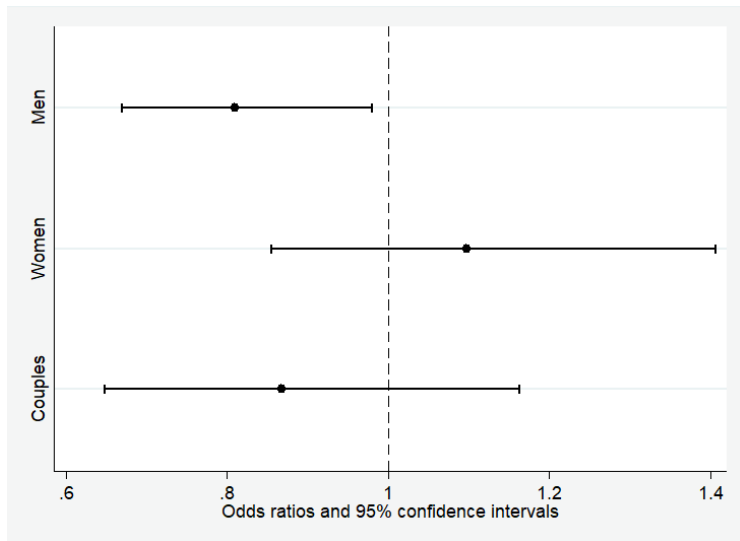


IPV is a pervasive problem in Ethiopia and 71% of Ethiopian women have reported physical and/or sexual IPV in their lifetime. IPV has significant immediate and long-term health, social, and economic consequences and is also linked to an increased risk of HIV.

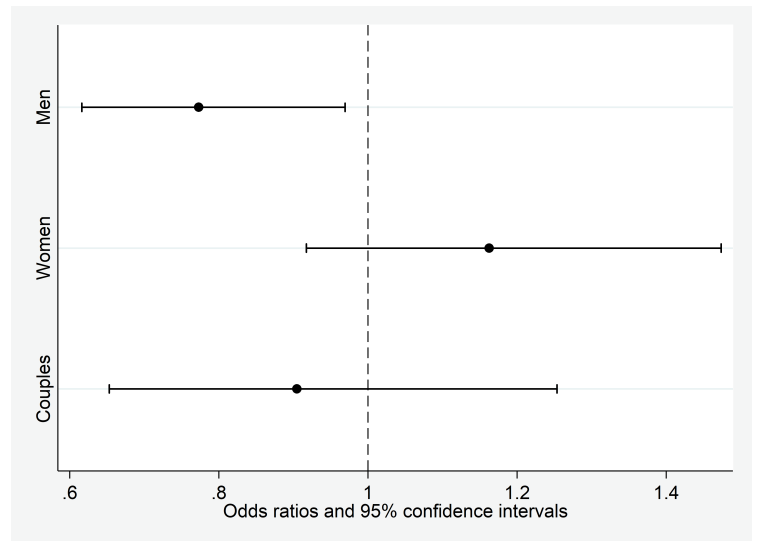
“ The lessons we are receiving are providing us the same service as an ambulance - they are saving our lives. Initially, people and especially our husbands were pulling us from attending the sessions, but now even our husbands are seeing the life-changing lessons we are bringing home. ”
– Program participant

Results on Primary Outcomes

Overall, the men's UBL intervention significantly reduced male perpetration of past-year sexual IPV and past-year physical and/or sexual IPV. There was also a statistically significant reduction in experience of past-year physical and/or sexual IPV among women in the male UBL intervention group. However, there was no significant effect on IPV observed for the women's or couples' arms, and there were no significant changes in the experience of or perpetration of physical or emotional IPV across any of the arms.



Change in reported prevalence of women's experience of past-year physical and/or sexual IPV



Change in reported prevalence of men's perpetration of past-year physical and/or sexual IPV

Results on Secondary Outcomes



The men's and couples' UBL interventions had a significant impact on a range of HIV-related outcomes among both men and women. This included significant improvements in comprehensive knowledge on HIV, condom use, HIV testing, and discussing sex with their partner.



Women reported a statistically significant increase in male involvement in childcare and household tasks in the couples' arm, but no changes in male dominance in household decision-making.



However, among men, there were statistically significant changes in all male involvement and household decision-making outcomes in the couples' arm and the men's arm.

Conclusions and Future Research Opportunities

This trial demonstrates the effectiveness of a 14-session in-person gender-transformative intervention delivered within the context of the traditional coffee ceremony in reducing both experience and perpetration of IPV in a rural Ethiopian setting. Our study makes unique contributions to the existing evidence base around IPV prevention, and highlights the relative effectiveness of working with men compared to couples or women in this context.

Further research is needed to understand why couples' and women's interventions were not effective in reducing IPV, and the potential mechanisms of change. Further research should also focus on understanding the optimal number of sessions needed to elicit positive outcomes, and the role of same-sex versus mixed-sex discussions within couples' programming.

Researchers

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