

KEY LEARNINGS FROM CAMBER GENDER SYNCHRONISATION CROSS-SECTIONAL SURVEYS^{1,2}

1 Decision making

Men seem to have conflicting views on decision making at the household level. In theory they believe women have more power than previous generations and support women making decisions on matters regarding their own bodies. But they also cite the ability to make decisions as the most popular indicator of success and see themselves as being responsible for most decisions in the household, including those that concern women's health.

2 Family planning decision making

For most couples, family planning decision making involves men and women. Men generally perceive themselves to be more involved in family planning decision making than women think they are.

3 Fertility desire

Both men and women express a shared desire for a large family size. Yet 33% of women would consider it to be problematic if they were to learn that they are pregnant right now, compared to 8% of men.

4 Family planning uptake

Less than a quarter of men and women report having ever used a modern method of contraception. However perceived use in the community is much higher with more than 50% of men and women believing that their peers are using a modern method of family planning.

5 Acceptance of family planning

Intra-couple perceptions in regards to family planning are different. The perception held by most women of the extent to which their partner may accept family planning vastly under-estimates the reality (i.e. men are more accepting than otherwise presumed).

6 Awareness of family planning

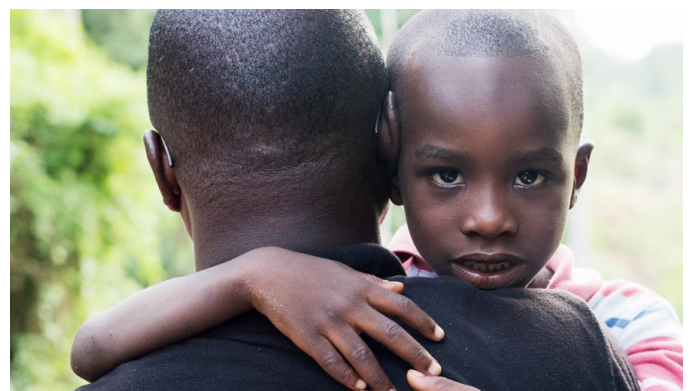
Both men and women report high levels of awareness of family planning, though women are much more interested in learning about family planning compared to men.

7 Sources of family planning information and influencers

Both men and women indicate that their partners are the most trusted source of family planning information followed by healthcare workers, and community. Mothers and mothers in law play a small role in influencing family planning or health care decision making according to both men and women (11% of women report that mothers or mothers in law are involved in healthcare decision making versus 7% among men).



Camber Collective photo



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GLOBAL GENDER SYNCHRONIZED PROGRAMS

Experts on gender synchronization call out a few exemplars of global gender synchronized programs, mostly in the Gender-Based Violence space:

UNITED STATES

Boys involved in the **Gender Matters** curriculum were more knowledgeable about family planning methods and more supportive of women accessing family planning options.

Outcome: Family planning

UGANDA

The **SASA!** program aiming at preventing HIV and gender based violence by engaging both men and women showed that women were more likely to report having engaged in joint decision making.

Outcome: Gender based violence, HIV

NEPAL

The **FACT Project** works with men and women (19-25) to increase awareness of fertility at the community level, shows changes in knowledge and attitudes.

Outcome: Family planning

NIGER

Reaching married adolescents: engaged adolescent girls and their husbands through village meetings and household visits and led to an increase in family planning uptake among adolescent girls and improved gender perceptions.

Outcome: Family planning

PSI Lahyar Iyali program: engaged with women, men, boys, and girls on sensitization specifically on gender norms and family planning - 93% of surveyed women confirmed having the support of either their husband or family in adopting a family planning method.

Outcome: Family planning

Implemented in tandem, UNFPA **Safe Spaces** and **Future Husbands Clubs** introduce topics related to women's empowerment to adolescent boys and girls.

Outcome: Women empowerment, Gender based violence

RWANDA

The **Bandebereho** initiative incorporated gender synchronized elements in group and dialogue sessions for women and men. Women in the intervention reported lower levels of violence.

Outcome: Gender based violence

The **Indashyikirwa programme** aimed to reduce intimate partner violence (IPV) and shift attitudes, behaviors and norms that support IPV among couples in selected communities in seven districts of Rwanda and reported a decrease in IPV.

Outcome: Gender based violence

KENYA

The **Primary-School Action for Better Health program** in Kenya showed that a gender-synchronized approach can be effective for primary school ages, utilizing in-service teacher training to improve pupils' health knowledge, self-efficacy, and condom use.

Outcome: Family planning, HIV



KEY RECOMMENDATIONS AND CONSIDERATIONS FOR DONORS AND POLICY MAKERS

- Develop a Theory of Change for gender synchronized interventions to better visualize the benefits of this approach as opposed to non-gender synchronized approaches.
- Invest in the evaluation of gender synchronized interventions to build evidence on what works and the cost effectiveness of gender synchronized interventions.
- Establish indicators for monitoring gender synchronized interventions, with specific attention to early detection of possible unintended consequences.
- Assess existing interventions focused on men and women to incorporate a gender synchronized approach. This could apply for instance to the Ecole des Maris (Husband's Schools) program in Niger.
- Elevate the importance of gender synchronization in family planning strategies.

KEY RECOMMENDATIONS AND CONSIDERATIONS FOR IMPLEMENTORS

- Critically consider power dynamics and differences in attitudes toward contraception at the outset of program design. Addressing gender norms can be a difficult topic and is context specific. Gender synchronization approaches should understand and consider gender-related power dynamics in a given community and should not engage men without first considering the ramifications for women (and vice-versa) to limit potential unintended consequences and potential backlash. Power dynamics should also be explored with participants.
- Include outreach at multiple levels (policy and institutional) and involve communities at the inception of any program to foster an enabling environment.
- Recognize the importance of facilitators in the success of programs. Ensure that facilitators are trained to facilitate the discussion of these sensitive topics, and that they are respected in the community. Prioritize discussion and reflective dialogue rather than presentation to involve participants.

- Pay attention to the sequencing of content: start with a conversation on gender dynamics to set a foundation for moving to a topic that is more immediately relevant to the audience and more closely related to family planning.
- Ensure the content of your program fosters a mutual understanding of couples' expectations. Misalignment between couples on topics like ideal family size, acceptance of contraceptive use, and birth spacing can lead to barriers in the use of family planning. Implement couple-oriented activities in your program to promote meaningful communication and conflict resolution between couples to ensure that expectations and perceptions of family planning are known and aligned within the couple.
- Combine different approaches, including group meetings and couple / individual counseling approaches to account for women and men's individual preferences and to mitigate potential harmful consequences of programming. For instance men who adopt supportive behaviors might be criticized by their peers for not acting 'as men', resulting in the participants instead adopting even more conservative behaviors. While role models are critical to demonstrate that alternative ways of behaving and navigating social norms are possible and achievable, implementors should keep in mind the possible unattended consequences of isolating a single person as an exemplar.
- Understand and recognize the contextual practicalities and sensitivities of working with men and women together, especially at a young age. Evidence however shows that programs that work with men and women separately still showed evidence of impact as long as interventions were synchronized.
- Adapt to specific sub-groups. Vary the messaging of the program based on the profile of the man / woman / couple and whether participants are polygamists or non-polygamists.
- Track gender dynamic outcomes throughout the project period to ensure that activities do not undermine women's agency.

1. Camber survey of Nigerien women age 15-49, Hewlett funded, N=2,004

2. Camber survey of Nigerien men age 15-54, Transform PHARE project, N=1,144

3. Margaret Greene and Andrew Levack, *Synchronizing Gender Strategies, A Cooperative Model for Improving Reproductive Health and Transforming Gender Relations*. 2010. <https://www.igwg.org/wp-content/uploads/2017/06/synchronizing-gender-strategies.pdf>