

Promoting gender equity as a strategy to reduce HIV/STI risk and violence among young men from low income Indian urban communities

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Most behavior change strategies with young men in India rely primarily on giving knowledge and information and have little or no focus on contextual issues, such as addressing masculinity and gender norms as a means to change behavior. Although there is increasing awareness of the role that norms encouraging gender inequality play in fostering HIV risk behaviors and partner violence, few studies have attempted to influence these norms and to measure changes in support for them among young men exposed to an intervention. In response to this gap, the Horizons Program/Population Council, conducted operations research to examine the effectiveness of various interventions designed to improve young men's attitudes toward gender roles and sexual relationships and to reduce HIV/STI risk behaviors and partner violence.

Objectives

The broad objectives of the study are;

- How can we promote gender-equitable norms and behaviors among young men in low income settings in India?
- What are the differing impacts of peer led group education interventions on young men?
- Will interventions focused on changing gender norms reduce violence against women and also reduce HIV risk ?

Methods and Intervention

Set in urban slums in Mumbai (in the western state of Maharashtra), this operations research used a quasi experimental design to test the impact of different combination of intervention activities. The sample included married and unmarried young men aged 16-29 years old.

In Mumbai, the study was located in three communities and used a three-arm study design. Arm 1 of the intervention (in the community of *Vashi Naka*) included “Group Education Sessions” and “Life Style Social Marketing Campaign” (GES + Campaign); Arm 2 of the Intervention (*Mankhurd*) had only “Group Education Sessions” (GES only) and the Arm 3, the Control Group (*Cheetah Camp*) had a delayed Intervention. In each of these three sites, surveys were administered before any intervention activity (n=333 in Arm 1, n=332 in Arm 2 and 221 in Arm 3) and after the intervention had been ongoing for six months (n=197 in Arm 1, n=175 in Arm 2 and n= 165 in Arm 3).

The gender attitudes of young men were assessed using a version of the Gender Equitable Men (GEM)¹ Scale adapted to the Indian context. A change in number of behavioral indicators on condom use, violence against partners, and communication with partners were measured and associated with changes in the GEM scale over time and across the intervention arms.

Data Collection and Measurement of Gender Attitudes

The quantitative data was collected using handheld devices. The research team was intensively trained on the use of handheld devices (Perseus Software) through class room structured training sessions and practical training in the field. Systems were developed to download data from independent handhelds to the mainframe computer.

The key indicators identified to assess the intervention impact include Gender attitude measured through Gender Equitable Men Scale (GEMS), self reported perpetration of gender based violence, self reported STI symptoms, sexual behavior, condom use etc.

¹ The GEM Scale was developed by the Horizons Program, Instituto PROMUNDO, and partners in Brazil. The scale consists of a list of statements about attitudes regarding gender roles in domestic work and child care, sexuality and sexual relationships, reproductive health and disease prevention, and intimate partner violence, as well as attitudes toward homosexuality and close relationships with other men. For more information about the development and use of the scale, please see Horizons Report (2005)

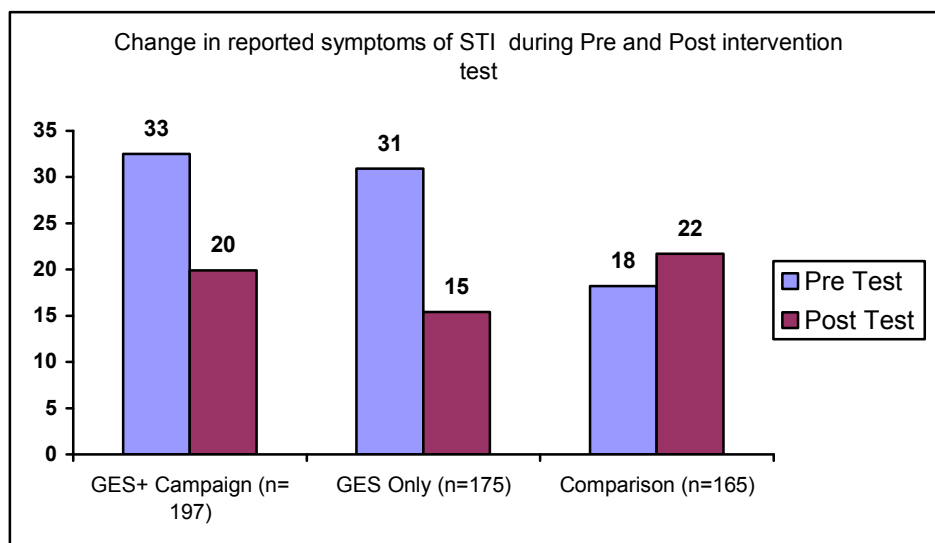
Key Findings

Young men developed more positive attitude towards gender norms and behavior during the intervention period

After the intervention, mean scores on the GEM scale showed significant changes in almost all the intervention sites. While the scores improved significantly in the two intervention sites they remained same or decreased in the control site. Post-intervention, the difference in mean scores between the intervention and control sites was also significant (ANOVA test; $p < .05$) while there was no significant difference between the intervention sites in the mean scores.

Decrease in reported symptoms of STI during the last 3 months in intervention sites

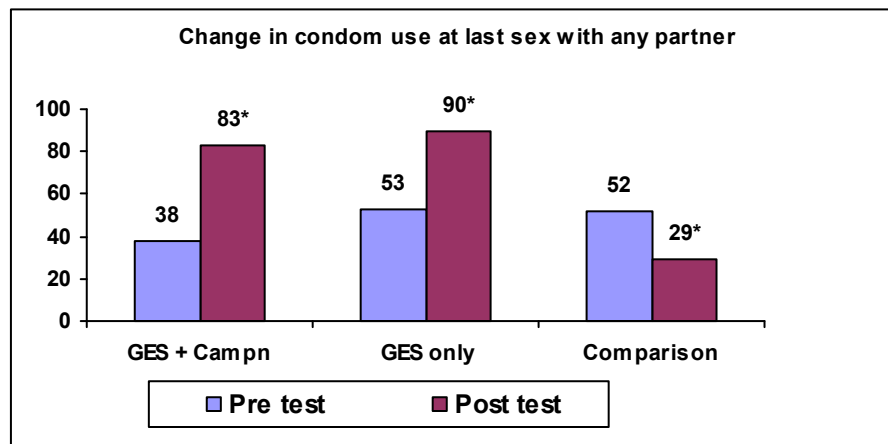
The young men participating in the study had a decrease in reported symptoms of STI ($p < .05$) in the intervention area. At baseline, the percentages of young men reporting symptoms were 33 percent in Vashi naka, 31 percent in Mankhurd and 18 percent in Cheetah Camp. After the intervention, percentages decreased to 20 percent in Vashi Naka and 15 percent in Mankhurd while they increased to 22 percent in Cheetah Camp.



$P < .05$, Chi Square test

Significant increase in condom use in all intervention areas

The proportion of sexually experienced young men at intervention sites who reported condom use during last sex, increased significantly after the intervention. There was a two-fold increase in condom use intervention sites. In the control sites however, the condom used decreased significantly among young men.



*p < .05, Chi square test

Exposure to intervention associated with improvement in gender attitude and reduction in HIV/STI risk behaviors

Change in attitude is positively correlated with exposure to intervention. The young men who were exposed to intervention were 2 times more likely (based on odds ratio) to have a positive change in attitude at endline as compared to young men in the control sites (p < .05).

With regards to HIV risk behaviors, young men exposed to intervention were 15 times more likely to use condoms as compared to young men not exposed to the intervention (p < .001). Also, in intervention sites, young men were significantly less likely to report they had perpetrated violence against any partner. There was a reduction by 90 percent. (based on odds ratio of .12 p < .001).

There was a correlation between positive change in attitude and reduction in HIV risk behaviors. The findings clearly indicate that improvement in gender attitudes can reduce HIV/STI risk practices. For example, young men who had an improvement in the GEM scores at endline were 1.2 times more likely to use condoms. They were also 1.2 times more likely to communicate with their partners on issues related with HIV/STI risk reduction. Similarly, young men with positive change in attitudes were less likely to report inflicting violence against any partner after the intervention and prior to the survey. These young were also less likely to report sex with more than 1 sexual partner in the three months preceding the endline survey. The likelihood of sex with multiple partners in the last 3 months reduced by 10 percent after the intervention.

Intervention results indicate equitable gender norms can be promoted

Study findings clearly indicate that group education focusing on gender equitable norms has a positive influence on young men's attitudes and behaviors. And, this intervention is culturally appropriate for different settings in India. The findings suggest the need for addressing gender norms and in particular explicitly discussing norms related to masculinity in HIV prevention activities. It is necessary to build alliances for large scale discourse on men and masculinities.