



EMPOWERING BOYS TO ADVANCE GIRLS

Designing an effective violence prevention
program for rural East Africa

Report By: Sonoko Ozawa - 2019

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Acronyms

AMSTAR	A Measurement Tool to Assess Systematic Reviews
GBV	Gender-Based Violence
IPV	Intimate Partner Violence
LMICs	Low and Middle-Income Countries
NGO	Non-Governmental Organization
PRISMA	Preferred Reporting Items for Systematic Reviews and Meta-Analyses
RCTs	Randomized Control Trials
SDGs	Sustainable Development Goals
VAWG	Violence Against Women and Girls
WHO	World Health Organization



Executive Summary

This report focuses on designing a promising program that prevents adolescent boys from perpetrating violence against their female peers in rural East Africa. Violence against girls and women is a risk factor for both acute and long-term intergenerational health issues. Emerging global evidence indicates that targeting adolescent boys before they develop fixed and negative attitudes that promote victimization of girls is the key to eradicating future violence. Yet, actual practice with rigorous research-backed programs remains scarce.

The report is divided into the following chapters:

- **Chapter 1** outlines the violence perpetration risk factors among adolescent boys identified through global research and field surveys through the ecological framework.
- **Chapter 2** summarizes the scientific evidence base for primary prevention strategies through systematic review studies and previous practices.
- **Chapter 3** presents the selected components for a promising intervention with their association with the risk factors identified in Chapter 1. Risk factors that did not meet with any suggested treatments will be created from practices in adolescent development.
- In the closing **Chapter 4**, the promising intervention will be proposed with its corresponding results chain model. Useful resources and techniques for implementation will be introduced in this chapter.



Introduction

Violence against women and girls is a widespread human rights violation that elevates the risk of both acute and long-term intergenerational health issues (Yount, Krause, & Miedema, 2017). In Sub-Saharan Africa, it poses major challenges, including perpetuating the HIV/AIDS epidemic, literacy gaps, and increasing infant mortality rates (García-Moreno et al., 2013; Mikton, 2010; World Health Organization, 2007). It is also the main obstacle for achieving gender equality, a stand-alone goal within the Sustainable Development Goals. Overcoming the obstacle is integral to all dimensions of inclusive and sustainable development (UN Women, n.d.).

Most practices to reduce violence are focused on girls and women. Gender challenges are often discussed using an overly-simplistic picture, where a brutal man beats a powerless woman, marginalizing men as bystanders instead of stakeholders. Men's use of violence is also often considered a consequence of socially-constructed masculinity, which can be reshaped.

Recent studies show evidence that programs focused on men can change male behaviors and further help them become advocates for women (Barker & Ricardo, 2005; Kato-Wallace, Barker, Sharafi, Mora, & Lauro, 2016; Peacock & Barker, 2014). Adolescence is recognized as a window of opportunity for offsetting childhood disadvantage and altering life trajectories. Emerging global evidence also suggests that adolescence (ages 10 - 19) is a key period when intimate partner violence initiates (Peitzmeier et al., 2016). Victimization of girls needs to be addressed with boys, especially by targeting adolescent boys before they develop fixed and negative attitudes that promote victimization of girls. This age group is critical because it is also associated with boys' reproductive age (Sarnquist et al., 2014, 2017).

There is increasing urgency for national governments and donors to provide greater support, services, and programming to adolescent boys (Jones, Presler-Marshall, & Kahane, 2019). According to research, it appears to be easier to change attitudes and behaviors of boys and younger men than of older adults, thus highlighting the need to target young people (Morrison, Ellsberg, & Bott, 2007).

This report will analyze the risk factors hidden behind adolescent boys' use of violence towards peer girls, particularly in rural East Africa. It will further suggest the best programs to prevent violence in the given locations. Given the absence of scientific research focused on the region, both risk factors and ideal prevention programs will be delivered in the following ways:



- **Risk factors:** The risk factors behind adolescent boys' use of violence will be identified by literature reviews, and field surveys conducted in rural Kenya and Tanzania, using the prevailing framework in gender policy analysis. The results of the field survey will be applied to screen the external validity of literature reviews.
- **Ideal Prevention Program:** The ideal violence prevention program for adolescent boys will be suggested through an analysis of relevant articles and recent comparable studies, followed by a synchronization with the diagnosed risk factors.

The purpose of this research paper is to suggest how to design an efficient violence prevention program for rural East Africa, supported by credible evidence. Studies suggest that violence prevention programs tailored for adolescent boys could lead to promising outcomes. However, actual practice with rigorous research-backed programs remains scarce.

The report is organized in four chapters. Following the introduction, Chapter 1 identifies the violence perpetration risk factors among adolescent boys; Chapter 2 analyzes the available literature on the subject and previous practices; Chapter 3 synthesizes each result; and Chapter 4 combines lessons learned and proposes the ideal program for the Asante Africa Foundation.

A brief explanation on the terminology applied in this paper is necessary. This paper will mainly use "poly-victimization of girls" instead of using the prevailing "gender-based violence (GBV)," "intimate partner violence (IPV)," or "violence against women and girls (VAWG)." It is based on the author's understanding, developed through field research, that there are no absolutely evil boys and no absolutely powerless girls. The author's field research revealed that violence victimization amongst adolescent girls was only part of the problem. There are also invisible scars for boys and men. Therefore, the author picked "poly-victimization" as the most non-judgmental language appropriate to this report.



1. Violence Perpetration Risk Factors among Adolescent Boys

Revealing factors associated with the boy's use of violence is necessary to analyze and determine an effective intervention. This chapter introduces the ecological model as a framework of analysis and applies the findings from scientific literature and informant interviews with students, teachers, and non-profit staff working in rural secondary schools in Kenya and Tanzania. This mixed-method approach allowed the author to take from generalized scientific findings without ignoring contextual analysis.

1.1 Analysis framework: the ecological model of violence

The ecological model, initially pioneered by Bronfenbrenner (1977), has subsequently been adopted to explain the multidimensional risk factors linked to the poly-victimization of women, including the UN Women's framework to underpin their action to prevent violence against women (McCloskey, Boonzaier, Steinbrenner, & Hunter, 2016; UN Women, 2015; Bronfenbrenner, 1977; Contreras-Urbina et al., 2016). As illustrated in **Figure 1**, the framework categorizes risk factors into four levels: individual, relationship, community, and societal level. Factors at each of the levels act in a mutually reinforcing way.

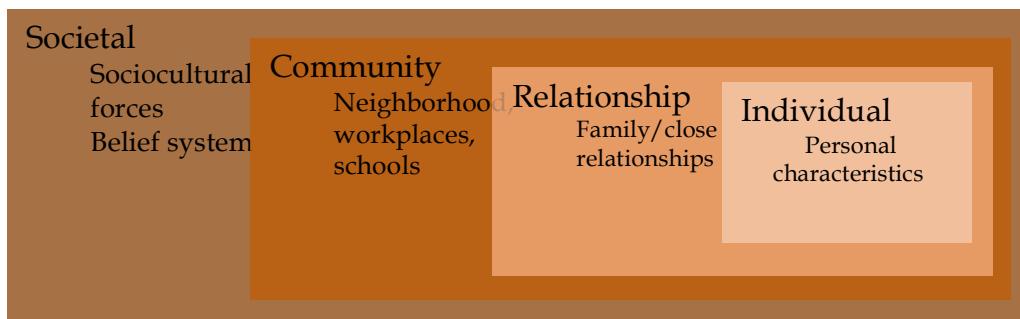


Figure 1: Understanding the ecological model

The following two sections will analyze the risk factors gleaned from academic research and field studies conducted by the author.

1.2 General violation perpetration risk factors

Previous works on modifiable risk factors of male-perpetrated violence have largely focused on adults, particularly in the United States (Peitzmeier et al., 2016). To maximize external validity, the author limited the literature to those that identify the risk factors with a correlation with violent attitude or behavior in low-income economies (Contreras-Urbina et al., 2016; McCloskey et al., 2016; Peitzmeier et al., 2016; UN Women, 2015). The results applicable to adolescent boys are summarized as **Table 1**.



Factors endorsed by statistical significance are highlighted in bold font and factors that are still discussed are explained below.

Child maltreatment, including community violence victimization, is controversial for its correlation with boys' violence perpetration. Systematic reviews and cross-sectional surveys, including those focusing on adolescent boys in Sub-Saharan Africa, show that victimization history is statistically significantly ($p < .05$) associated with violence perpetration (Mikton, 2010; Peitzmeier et al., 2016). However, a study in Malawi found that higher levels of exposure to violence did not associate with violent attitudes towards women and condoning rape for adolescent boys, while it did for adolescent girls (Ameli, Meinck, Munthali, Ushie, & Langhaug, 2017).

An in-depth study with boys and young men taken place in Northern Tanzania may suggest an answer to this debate. Through observation and interviews, the study exposed that violence is frequently observed by boys in their daily lives at home, in the school setting, and in the larger community, but boys themselves expressed a wish to see less violence (Sommer, Likindikoki, & Kaaya, 2013). Boys may perceive violence as aggression against themselves while they are physically and socially vulnerable, a stage when their parents and teachers can victimize them. Their perception may alter as they get older and when they obtain physical and social strength. They may recognize violence as a solution, which is justified by social norms.

Perpetration Risk Factors	Suggested Protective Factors
Individual Level	
Low income Low education Belief in rigid/unequal gender roles Exposure to child maltreatment Mental disorder Depressive symptoms Binge drinking Illicit drug use	Economic empowerment Group education Parenting programs Consciousness raising Reducing alcohol availability
Relationship Level	
Multiple partners/infidelity Low resistance to peer pressure Educational disparity Relationship quality	Group education Movement building Increasing women's access to education Community outreach
Community / Organization Level	
Acceptance of traditional gender roles Weak community sanctions Poverty	Social marketing campaigns Bystander programs Improvements in school infrastructure
Society Level	
Traditional gender and social norms supportive to violence State fragility	Public opinion campaigns Advocacy Funding



Weak legal sanctions Discriminatory laws and policies Lack of political will	Supportive infrastructure Legal and policy reforms
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Table 1: Boy's violence perpetration risk factors identified through previous literature

The next section outlines the findings from the field survey in Kenya and Tanzania to confirm the external validity of the results reported in this section and further enrich the perpetration risk factors with tailored raw evidence.

1.3 Findings from the field: rural Southern Kenya and Northern Tanzania

Research and data covering rural East Africa, specifically Southern Kenya and Northern Tanzania are limited. To identify the violence perpetration risk factors and clarify the circumstances surrounding the adolescents, the author conducted a field study in Kenya and Tanzania, specifically around Narok, Kenya and Moshi, Tanzania, from March 25 to 30, 2019. The visited sites and the geographical relationship in the region are described in **Figure 2**. The details of visited venues and the individuals that were interviewed are summarized in **Table 2**.

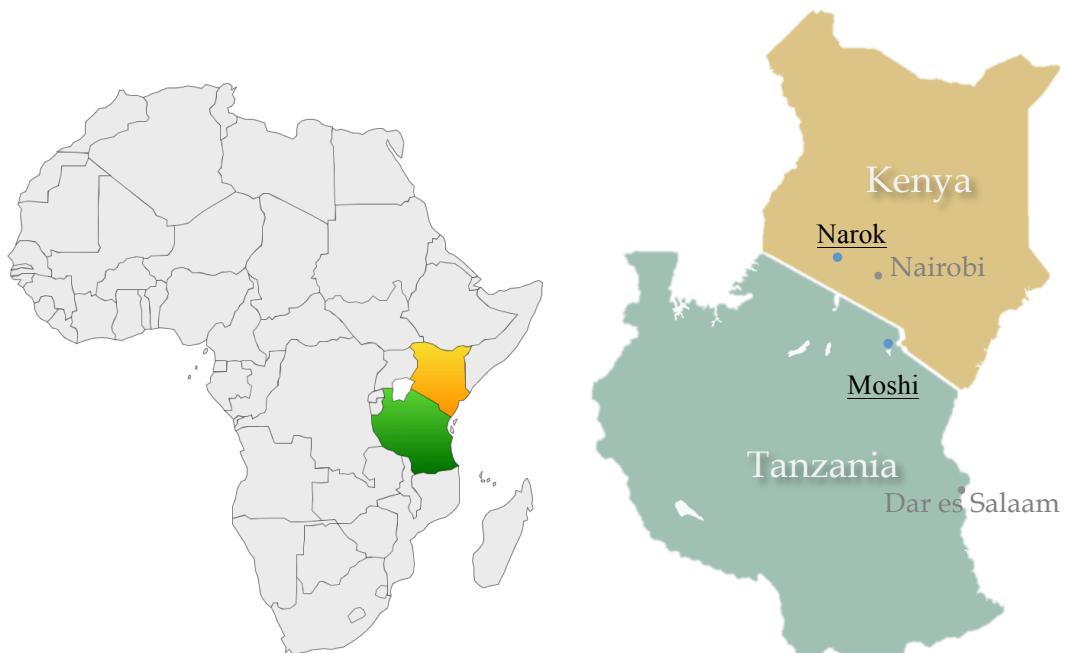


Figure 2: Field survey location

In addition to the individuals listed in **Table 2**, the Asante Africa Foundation staff were also interviewed by the author.



Name	Location	School type	Interviewed individuals (#)	Communication language
Sister Mary Stephen Nkoitoi Secondary School (Koitoi)	Narok (Kenya)	Private/Boarding	Student individuals (7) Deputy head teacher (1)	English/Swahili
Oloornganayio Primary School	Rural Narok* (Kenya)	Public/Day	Head teacher (1)	English
Shimbi Secondary School	Rural Moshi* (Tanzania)	Public/Day	Student group (approx. 220) Student individuals (9)	English
Mrao Keryo Secondary School	Rural Moshi* (Tanzania)	Public/Day	Student group (approx. 90) Student individuals (10) Teachers (2)	Swahili
Olesiawa Village (Traditional Masai residence)	Rural Mto Wa Mbu	-	Village Chief (1)	Swahili

* Administratively belongs to the nearest city but takes approximately 2 hours by vehicle

Table 2: Venues visited and Individuals interviewed

The interviews in Swahili were conducted through interpretation by either the national staff of the Asante Africa Foundation (in Sister Mary Stephen Nkoitoi secondary school and Olesiawa Village) or by a school teacher (in Mrao Keryo secondary school). The students were either interviewed as a large group or in small groups as individuals were all members of programs, meaning either scholarship programs (Koitoi) or leadership and entrepreneurship programs (Shimbi and Mrao Keryo) offered by the Asante Africa Foundation. The selection procedure and size of the sample population can suggest the presence of selection bias.

The author comprehended that interviewing adolescents about violence victimization experiences without trained skills and professional experience may involve unpredictable risks. Therefore, the author asked questions that were not directly related to either violence victimization or perpetration to students, but instead asked general questions that included their daily schedule, family size, time taken to commute, the experience of peer-students dropout, and adults they rely on. The purpose of these questions was to grasp the picture of the students' lives and to identify the influencers who impact the students' behavior, the data which could help design an effective prevention program. A brief description of the students' circumstances is summarized in **Table 3**.



	Boarding/Private Koitoi Secondary School	Day/Public	
	Shimbi Secondary School	Mrao Keryo Secondary School	
Have siblings in the same school or neighboring schools	0% (0/7)	100% (9/9)	93% (84/90)
Range minutes to commute for school	-	30 - 40 min	1 - 30 min
Whom to commute to school	-	Friends (100%)	Friends (97%) Siblings (3%)
Activities after school	Club activities, study	Take care of animals, housework, study	Housework study
Experienced classmate's dropout (reason)	43% (3/7) (pregnancy, marriage, drug use)	57% (4/9) (pregnancy)	40% (4/10) (pregnancy, housework, drug use)
Maintain relationship with dropped-out student	0% (0/7)	0% (0/9)	0% (0/10)
Who to rely on when involved in trouble (Details at Figure 4)	Teacher	Older siblings, Parents	Grandparents, Parents
"Hotspots" of violence (Question asked to Asante Africa Foundation staff)	School's restrooms, shower rooms	Commute route	Commute route

Table 3: Findings from interviews about student life

There were few shared underpinnings between boarding schools and day schools as indicated by the interviews. All schools had students who experienced their female classmates dropping out due to pregnancy. The students who dropped out due to drug use were all boys. None of the students maintained relationships with the students who dropped out, which suggests that the students lose connection with their peers once they drop out. Contrary to the literature findings, including a study at Moshi (Sommer et al., 2013), all individuals answered that binge drinking is not an issue for secondary school students because they do not have physical access to alcohol, but instead an issue among the elderly population, like college students.

The interviews also revealed the backdrop of dropouts related to early pregnancy. Unlike the stereotypical perspective, a girl's early pregnancy and marriage are not always a consequence of rape or forced child marriage. At times, it is caused by a belief of the girls themselves that pregnancy and marriage are to be prioritized over education. A head teacher shared with the author that there was a pregnant girl who persistently refused to come back to school after her childbirth, even with the teacher's enthusiastic persuasion and support. Social norms are shaping the behaviors and beliefs towards the population as a whole. Girls' mindsets are also perpetration risk factors.

The most significant difference between boarding schools and day schools was the students' sphere of life and network. Commuting, a "hot spot" of girls' victimization for day school students, did not exist for boarding school students.



Instead, water, sanitation, and hygiene facilities at schools such as toilets and shower rooms were mentioned to be high-risk sites for girls' poly-victimization because the facilities' poor design does not segregate or ensure privacy. **Figure 3** shows that the girls' toilets are visible from the outside.



Photos by Sonoko Ozawa

Figure 3: Girls' toilets at Sister Mary Stephen Nkoitoi Secondary School

Student's network, specifically key adults, also differed between day school and boarding schools. **Figure 4** depicts the types of individuals whom adolescents rely on when involved in trouble. While students at Shimbi and Mrao Keryo, both day schools, rely on their family members, most students at Koitoi answered that teachers are the most credible adults. It might sound like a lovely story if there were enough teachers, but there are only two teachers who are responsible for the whole 1,300 students' living. Students stated that the two teachers are brilliant and dedicate themselves to students, which the author agrees with as well, but it is impossible to believe that the school allocates enough human resources to maintain and improve the students' wellness.

The interview and field survey illuminated both similarities and differences between day schools and boarding schools. Both schools projected the girls' dropouts related to early sex and the necessity of gender equality programs, though the ecology of the two school types is distinct. That is, in the context of the ecological model, some perpetration risk factors, particularly those related to interaction with others, are not identical. While day school students are at more risk with being primed with unhealthy gender norms through their parents and siblings, the boarding school students are more vulnerable due to inadequate care

from mature guardians. In other words, day school students are likely to increase their perpetration risks through inappropriate parental control, but for boarding school students, the lack of parental control develops their perpetration risks.

Who do you ask for help, when you are in trouble outside school?

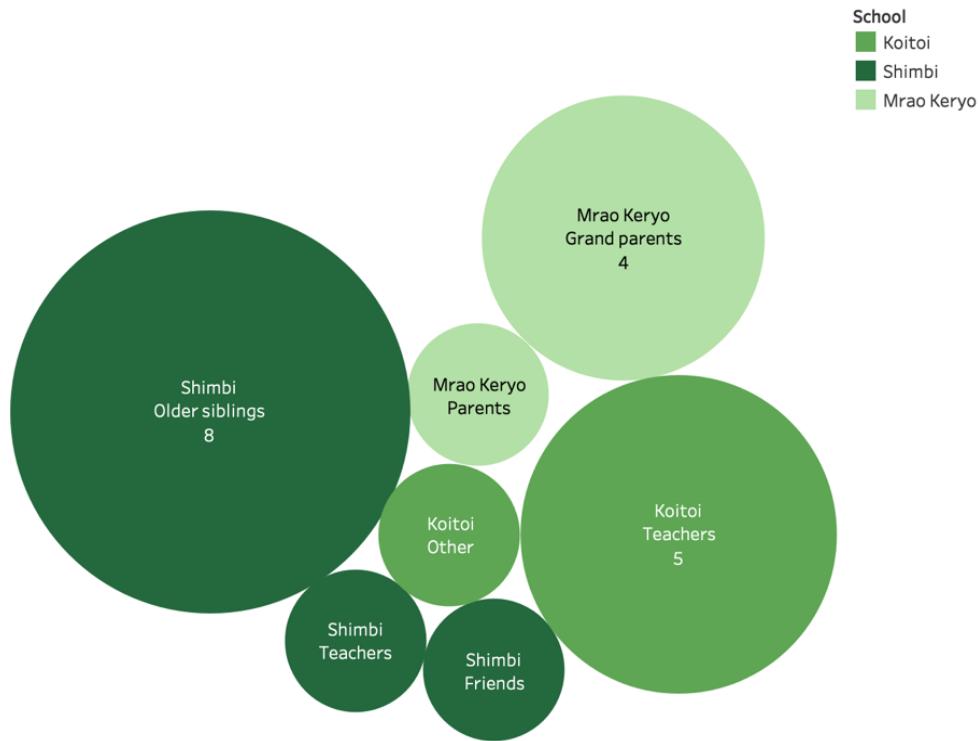


Figure 4: Individuals who secondary school students rely on

1.4 Key results

Table 4 summarizes the risk and protective factors for violence perpetration by adolescent boys in rural East Africa as identified through literature and field surveys. Both factors are categorized according to the individual, relationship, community, and societal levels of the ecological model depicted in **Figure 1**.

Perpetration Risk Factors	Possible Protective Factors
	Individual Level
Struggle of puberty changes Victimization history Low socio-economic status Illicit drug use Depressive symptoms Negative attitudes about gender norms	Knowledge of body change Counseling Scholarship programs Medical treatment, wellness programs Appropriate attitudes about gender norms
	Relationship Level
Multiple partners Girls' acceptance of violence Girls' attitude to prioritize marriage / pregnancy over education	Education Bystander intervention Girls' knowledge and skills to refuse violence
	Community/Organization Level
Day Schools Unsafe commute Weak community sanctions for rape Acceptance of negative gender roles in the neighborhoods	Supportive community leaders Social marketing campaigns
Boarding Schools Lack of mature mentors Unsafe school infrastructure (e.g., toilets, shower rooms, dormitories) Poor school management	Reliable mature mentors Improve school facilities for girls School management training
	Society Level
Social norms supportive of violence Lack of legislations	Advocacy Community outreach

Table 4: Risk factors and protective factors sorted through field survey



2. Lessons learned from previous practices

The purpose of this chapter is to find the principles of successful intervention strategies through previous violence prevention programs for adolescent boys.

In contrast to the increased commitment and investments of governments and private agencies to end violence against women and girls, relatively little interventions with rigorous research designs that focus on adolescent boys in East Africa have been implemented. Database searches (PubMed, ProQuest Social Science, SAGE Publications, Elsevier) combined with meta-systematic review articles (De Koker, Mathews, Zuch, Bastien, & Mason-Jones, 2014; McCloskey et al., 2016; Ricardo, Eads, & Gary, 2011; World Health Organization, 2007; Yount et al., 2017) resulted in three studies (Baiocchi et al., 2017; Keller et al., 2017; Pulerwitz et al., 2015), which were performed in urban areas, not in rural regions. Studies that perfectly fit the criteria, **“Violence prevention program with rigorous research design targeting adolescent boys in East Africa,”** were too few for identifying the keys for success.

To overcome the limitations of applicable studies, this chapter consists of two layers of analysis: (1) reviewing systematic reviews that provide general strategies for success, and (2) a qualitative review for the most relevant studies. This double-layered approach will enable this chapter to discuss both universal principles for boys' intervention with the detailed schemes that fit the East African context.

2.1 Findings from reviewing systematic literature reviews

This section clarifies the keys of an effective and an ineffective intervention through examining review articles. The criteria for the inclusion and exclusion of reviews are summarized in **Table 5**. The criteria were established to find the most relevant review articles to answer the research question, “What elements are the most effective interventions to prevent violence perpetration for adolescent boys in East Africa?”

Attributes of Intervention Study in Review	
	<ul style="list-style-type: none">• Gender-based violence prevention or• Intimate-partner violence prevention or• Changing gender-based inequity
Population Sex*	Male
Population Age*	Adolescent
Context*	Sub-Saharan Africa
Published Date	After 2006
Language	English

*Given the limited amount of reviews, the author allowed to miss one out of the three criteria
The author used “Sub-Saharan Africa” instead of East Africa, given its frequency in the literature

Table 5: Criteria for inclusion of reviews



Review	Attention	Individual		Societal	Reviewed studies #	Main Criteria
		Focus on adolescents?	Focus on male?	Africa or LMICs?		
Yount et al., 2017	GBV prevention	○	(Both gender)	○	27	AMSTAR PRISMA
McCloskey et al., 2016	IPV prevention	(any age)	(Both gender)	○	7	Implemented at Sub-Saharan Africa
De Koker et al., 2014	IPV prevention	○	(Both gender)	(global)	8	For adolescents By RCTs or quasi-randomized CTs
Ricardo & Barker, 2011	GBV prevention	○	○	(global)	65	For adolescent boys and young men
WHO, 2007	Gender inequity	(any age)	○	(global)	58	Health programs with men and boys

Table 6: Systematic reviews of intervention studies assessing impact of preventing gender-based violence

Electronic databases searched for peer-reviewed review articles published in English were PubMed and ProQuest Social Sciences. Grey literature was sought through searches with Google, aiming at reports published by multilateral organizations or international non-profits. Reviews carried solely to confront HIV and other reproductive illnesses were excluded.

The search and selection process identified five relevant reviews. **Table 6** describes the five reviews and the characteristics of interventions assessed in each of the articles. As shown in **Table 6**, the criteria for review varied by each article and none overlapped; no review perfectly fulfilled the three criteria: adolescent, boys, and Sub-Saharan Africa.

For three reviews (De Koker et al., 2014; Ricardo et al., 2011; World Health Organization, 2007), the overwhelming majority of the analyzed interventions derived from those implemented in the United States, where cultural contexts and resources do not have much in common with Sub-Saharan Africa. While two reviews(Ricardo et al., 2011; World Health Organization, 2007) focused on interventions targeting men and boys, the remaining three included interventions that only treated women and girls. Therefore, the weight of the suggestions that are discussed in each review should vary from their proximity to the author's criteria, namely, adolescents, boys, and Sub-Saharan Africa, to maximize their external validity.

Table 7 summarizes the key findings that were identified in the five reviews. All reviewers noted that the studies and practices in this field lacked rigorous scientific evaluation; thus the outcomes are unclear (De Koker et al., 2014; World Health Organization, 2007; Yount et al., 2017). Overlapping findings are highlighted with bold font, and contradicting findings are highlighted with red font. The technical terms are explained below.



	Effective / Significant	Ineffective / Unclear
Yount et al., 2017	<ul style="list-style-type: none"> • Bundle individual-level and multilevel interventions that includes 2-3 components* • Include skill-building activities to enhance voice/agency, strengthening social networks • Multilevel intervention that rely on community engagement to create a favorable environment • Interventions with adolescents to enhance their social resources outside the family 	<ul style="list-style-type: none"> • Single and sextet-component intervention had either mixed or null impact • No clear pattern in the type of interventions with adverse effects • Effective target age is unclear
McCloskey et al., 2016	<ul style="list-style-type: none"> • Initiate with the support of local community leaders 	<ul style="list-style-type: none"> • North American criminal-justice approach lacks feasibility
De Koker et al., 2014	<ul style="list-style-type: none"> • Comprehensive interventions based in school and community, including individual-level curricula and community-based components • Focus on key adults in the adolescent's environment (e.g., teachers, parents, community members) • Address relationship skills and measure more than one type of IPV (e.g., physical and sexual, psychological) 	<ul style="list-style-type: none"> • Short interventions which consist of a curriculum (i.e. group education) only was not effective • Unclear whether gender neutral approach is better than gender focus approach*
Ricardo & Barker, 2011	<ul style="list-style-type: none"> • Focus on bystander attitudes • Approach men as allies, cultivate their commitment to and capacity for preventing and intervening 	<ul style="list-style-type: none"> • Mix-sex settings have both negative and positive aspects • The impact of facilitator's profession and experience is unclear • Ideal length of intervention is unclear • There is an over-reliance on attitude measures as proxies for behaviors
WHO, 2007	<ul style="list-style-type: none"> • Gender-transformative programs* that include deliberate discussions of gender and masculinity • Combine group education with community outreach, mobilization and mass-media campaigns • Ideal group education is weekly, 2-2.5 hr per sessions for 10-16 weeks initiated by specifically trained facilitators. • Use positive, affirmative messages showing what men and boys could do to change, affirming that they could change • Identify male groups or individuals who influence the behavior of other men 	<ul style="list-style-type: none"> • Knowledge-only sessions showed little impact • Media campaigns focusing on a single issue without talking about gender equality have not been effective

Table 7: Key findings from the review articles

- *Intervention components:* Yount et al. (2017) classified the approach of each intervention into four individual-level components and two community-level components. The individual-level consists of the *economic-resource, human-resource, social-resource, and voice-and-agency components*. The community-level



components consist of *community engagement* and *infrastructure development*. Two out of the seven interventions that had a favorable impact, bundled the social-resource and voice-and-agency components together.

- *Gender transformative program:* WHO (2007) categorized each program into three types, namely, *gender-neutral*, *gender-sensitive*, and *gender-transformative*. Gender-neutral programs distinguish very little between the needs of men and women, and do not reinforce, nor question, gender roles. Gender-sensitive programs recognize the specific needs and realities of men based on the social construction of gender roles. Lastly, gender-transformative approaches seek to transform gender roles and promote more gender-equitable relationships between men and women.

As illustrated in **Table 7**, there are both corresponding and contradictory findings. Reviewers align that a program which equips the participants with relationship skills, combined with community outreach that enhances social resources, is the most effective, and knowledge-only group education does not demonstrate significant results. However, approaches toward gender norms (gender neutral versus gender sensitive), ideal program length, and facilitator's expertise, varied with reviewers. The effectiveness of mixed-sex versus single-sex interventions remained discussed as well.

2.2 Deliverables from recent practices in East Africa

The purpose of this section is to decide on the debated components that emerged from the review of the literature that focused on whether the ideal gender approach, length of the program, facilitator's background, and either single-sex or mixed-sex setting is favorable. The section analyzes recent interventions implemented in East Africa, which fulfill **Table 5**.



	Participants	Description of intervention
Baiocchi et al., 2017	<p>Country: Kenya Sample: 3,147 girls, from 14 primary schools in informal settlements of Nairobi (numbers of participating boys not reported) Mean Age: 12.3 years, (range: 10-16) Year of implementation: Jan-Mar 2014, followed-up with booster training sessions within 3 months</p>	<p>Intervention type: School-based group education, sex-segregated, gender-transformative, and skill-development approach Duration: 6 weeks Summary: 6-sessions delivered by trained instructors Boys' intervention: focused on promoting gender equality and developing positive masculinity (gender-transformative) Girls' intervention: role-plays, facilitated discussions, verbal and physical skill practice (skill-development) Activities: Weekly hold sessions for 6 weeks immediately after school. Instructors: Experienced GBV reduction advocates, men and women. Selected through rigorous examination, trained prior activity by mock interviews, and field training exercise. Average instructor to student ratio was 1:15. Results: Estimated 3.7% decrease ($p=.03$) in risk of sexual assault in the intervention group due to the intervention.</p>
Keller et al., 2017	<p>Country: Kenya Sample: 1,543 participants, all males, from 36 secondary schools in Nairobi or bordering the six largest slums Mean Age: 16.99 years, (range: 15-22) Year of implementation: Jan-Feb 2013, two refresher courses at 4.5 and 9 months post-intervention</p>	<p>Intervention type: School-based group education, single-sex setting, gender-transformative, and skill-development approach Duration: 6 weeks (six 2-hr sessions) Summary: 6-sessions delivered by trained instructors focused on changing attitudes toward women, promoting gender equality, development of positive masculinity, and teaching boys how to safely and effectively intervene in GBV. Instructors: Experienced (2 years) GBV reduction advocates, from local region, all male, age 20-34. Minimum 250 hr instruction by expert facilitators, mock interviews, and field training exercise prior activity. Average instructor to student ratio was 1:18. Results: More boys ($p<.0001$) in the intervention group successfully intervened when witnessing violence, which was verbal harassment: 78%, physical threat: 75%, physical/sexual assault: 74%, while the control intervened to each situation at 38%, 33%, 26%.</p>
Pulerwitz et al., 2015	<p>Country: Ethiopia Sample: 809 participants, all males, from 11 youth groups in 3 low-income sub-cities of Addis Ababa Mean Age: n/a (range: 15-24) Year of implementation: Jun-Nov 2008</p>	<p>Intervention type: Community-based group education with community engagement, single-sex, gender-transformative approach Duration: 6 months (Community engagement, CE), 4 months (Group education, GE) Summary: Interventions focused on promoting critical reflection of unhealthy gender norms which were: GE: Activities including role plays, group discussions, and personal reflection, usually on weekends, at youth centers during regularly scheduled youth group hours. CE: Distributed monthly newsletters and leaflets (approx. 15,000), music and drama skits reaching 8,700 people, monthly community workshop meetings, distributed 1,000+ condoms. Instructors: 2-3 peer educators each session with 20 participants, oversight from a master trainer (gender, training duration not mentioned) Results: Participants in the GE+ CE were twice as likely ($p<.01$) to show increased support for gender-equitable norms.</p>

Table 8: Overview of study and intervention description of the three relevant interventions



The search and selection process identified three relevant reviews. **Table 8** summarizes the three studies that matched all the criteria listed in **Table 5** and was implemented in East Africa.

Two out of the three studies, (Baiocchi et al., 2017; Keller et al., 2017) used school-based 6-week interventions that were implemented by the Ujamaa-Africa, an NGO located in Nairobi, Kenya. The other study (Pulerwitz et al., 2015) was performed by Hiwot Ethiopia, an NGO operating in Ethiopia.

All programs applied the gender-transformative approach and used role-plays and discussions, in addition to knowledge-based education, to deepen the participants' understanding of gender equality. **Table 9** compares the three studies on their type and length of program, location, facilitator's background, and their sex-setting.

	Baiocchi et al., 2017	Keller et al., 2017	Pulerwitz et al., 2015
Approach	Gender-transformative		
Type	Group education		Group education + Community engagement
Length	6 weeks		4 - 6 months
Location	School-based		Community-based
Facilitator	Professional		Peer
Sex-setting	Sex-segregated	Single-sex	
Methods	Discussions, role-plays, knowledge-based education Bystander intervention skill development		
		Personal reflection, newsletters, music & drama skits, workshops	

Table 9: Comparison of the three relevant interventions

Pulerwitz et al. (2015) have interesting implications for determining the necessity of community engagement. This quasi-experimental study compared the effect of a program that involved community engagement activities in combination with interactive group education, with a program that involved community engagement activities alone. The results show that the participants in the group education and community engagement group displayed increased support for gender equitable norms. On the other hand, the most significant decrease in intimate partner violence was among those in the community engagement only group, which decreased from 60% to 37%. Changes in the combined community engagement with the group education group were 53% to 38%. These findings may suggest that community engagement alone may deliver better positive effects than group education in the community-based intervention.

However, the site of intervention may correlate with the necessary dosage for behavioral change. The classroom environment possesses potential benefits, including a broader cross-section of the student-age population, and "group immunity" (Baiocchi et al., 2017). Although all interventions resulted in a



significant decrease in the participants' violence perpetration risk, the two school-based interventions took 6 weeks while the community-based intervention spent 6 months for implementation. The feasibility of the intervention depends on time and resource constraints; the "ideal" length and type should be decided in the context.

2.3 Essences of promising projects

Table 10 lists the suggestions identified in systematic literature reviews in Section 2.1, with the major actual practices mentioned in the previous Section 2.2.

A definite conclusion cannot be drawn from these comparisons. Although most studies in the review articles were not implemented in East Africa, the number of screened interventions is enormous: the suggestions are based on 165 interventions overall, 55 times more than the number of relevant interventions, which are only 3. The generalizability of the review cannot be ignored. On the other hand, the relevant interventions are programs that were already achieved, and their feasibility is of utmost importance. The best elements, according to their estimated effectiveness matched with the identified risk factors, will be selected in the following chapter.

Review Articles' Suggestions		Relevant Interventions
Approach	Gender-transformative or gender-neutral	Gender-transformative
Type	Group education + Community engagement	Group education Group education + Community engagement
Length	Unclear	6 weeks (School-based) 6 months (Community-based)
Location	School + Community	School-only Community-only
Facilitator	Unclear	Experienced (School-based) Peer (Community-based)
Sex-setting	Unclear	Single-sex and sex-segregated
Methods	<ul style="list-style-type: none"> • Approach men as allies, cultivate their commitment • Enhance adolescents' social resources within and outside the family • Develop bystander intervention skills • Address relationship skills 	<ul style="list-style-type: none"> • Develop bystander intervention skills • Combine discussions, role-plays, and knowledge-based education • Distribute newsletters, music & drama skits, workshops (Community engagement)

Table 10: Comparing suggestions from reviews with relevant interventions

Although it is safe to consider that mixed-sex settings are less effective in adolescent-focused programs in the East African or, more broadly, the Sub-Saharan context, the author found that major interventions with mixed-sex settings performed in Sub-Saharan Africa (Abramsky et al., 2014; Pronyk et al., 2006; Wagman et al., 2015), focused on a broader generation (e.g., ages 18–49), not on adolescents. A South African study (Jewkes et al., 2008), that has frequently been



mentioned in other articles as a mixed-sex intervention was also a sex-segregated program. Single-sex or sex-segregated settings could be a more feasible option.

Including a bystander intervention skills session in the program could also be effective and feasible. However, the authors of a review article noted that such skills development training is at risk of reinforcing specific traditional models of masculinity, e.g., the “protector” role, and may encourage boys to envision themselves as the rescuers of troubled girls, which reinforces their male dominance (Ricardo et al., 2011). These risks should be acknowledged during the curriculum design and be considered by the facilitators.



3. Screening elements for rural East Africa

This chapter picks the components for an effective program for reducing violence perpetration risks among East African adolescent boys. The recommendations compiled in Chapter 2 will be chosen through their association with the risk factors identified in Chapter 1. Options to address the risk factors that did not meet with any suggested treatments will be created from practices in adolescent development. Lastly, the necessary elements to address the risk factors among East African adolescent boys will be summarized.

3.1 Matching risk factors with effective previous interventions

Table 11 synthesizes the risk factors identified in Chapter 1 with the estimated practical intervention essence found in Chapter 2 included in either group education or community engagement. Risk factors that are not accessible from a non-profit, including societal-level factors and those directly related to economic circumstances, are excluded from the table. Risk factors that are partially adjustable by either group education or community engagement are noted in “Additional intervention preferred,” whereas risk factors that are unlikely to be solved through the suggested interventions are noted in “Additional intervention necessary.”

The matching results highlight the strengths and weaknesses of group education and community engagement. Group education can modify inaccurate knowledge and develop participants’ skills but cannot manage clinical issues that involve psychological damages and substance abuse. Traditional community engagement practices shown previously in Chapter 2 are sufficient for the “community” surrounding day school students but not for the boarding school’s environment. Group education and community engagement are only valid if the associated risk factors are the primary root of violence perpetration.

	Risk factors	Possible solutions through group education(GE) / community engagement(CE)
Individual	Struggle of puberty changes	Educational session, group discussions, role-play (GE)
	Victimization history	Personal reflection session Additional intervention preferred
	Illicit drug use	Anti-drug educational session Additional intervention preferred
	Depressive symptoms	n/a Additional intervention necessary
	Negative attitudes about gender norms	Develop gender-equitable attitude and positive masculinity (GE)



Relationship	Multiple partners / infidelity	Educational session (GE) Additional intervention preferred
	Girls' acceptance of violence Girls' attitude to prioritize marriage / pregnancy over education	Train boys as mentors of their female siblings and peers (GE) Additional intervention preferred
	Missing bystander intervention	Develop boys' bystander intervention skills (GE)
	Day schools	
	Unsafe commute	Cultivate supportive community (CE) Develop boys' bystander intervention skills (GE)
	Weak community sanctions	Cultivate supportive community (CE)
	Acceptance of negative gender roles	Outreach key adults (parents, grandparents, older siblings, teachers) (CE)
	Boarding Schools	
	Lack of mature mentors	n/a Additional intervention necessary
	Unsafe school infrastructure	n/a Additional intervention necessary
	Poor school management	n/a Additional intervention necessary

Table 11: Matching identified risk factors with suggestions from previous practices

The projected characteristics of group education and community engagement form a choice that school-based group education could be more practical than a community-based one at present. Throughout the field survey, the author did not meet any entities besides schools that function as a hub for the adolescents.

Adolescents, including those from nomadic families in the most remote areas, went to school every day and spent most of their time at school or commuting. However, if the program is intended to be implemented in a site where youth centers or any other community-based facilities are more dominant than schools, like transitional settlements for displaced populations, community-based intervention could be more reasonable.

Table 11 highlights the function and the necessity for community engagement interventions at day school focused interventions. Community engagement could stretch to the key adults whom adolescents rely on and nudge them to refrain from resorting to violence themselves and guide their children to promote gender equality. It can also assist the key adults fostering girls to understand the importance of education, which could eventually prevent early pregnancy and marriage that results in girls' dropouts. Combining school-based group education with community engagement appears to increase the intervention's efficiency at a day school location.

Debates about the preferred sex-setting of the intervention could be concluded through the matching results. As shown in **Table 11**, a boys-only program is not perfect for reducing the risk factors. A simultaneous sex-segregated intervention, e.g., Baiocchi et al. (2017), could be used to approach more risk factors than a single-sex program; however, its expediency may depend upon resource constraints. This paper will not further discuss how to develop a girls focused intervention.



The most significant finding revealed in **Table 11** is that conventional community engagement programs cannot address any of the risk factors boarding schools confront. It may not be a surprise since there were no interventions in Chapter 2 that were directed on boarding school students, including the studies evaluated in the systematic reviews. That is to say that the suggestions proffered in Chapter 3 may have higher validity for day school students than for boarding school students. Creating a new tailored program is vital to reduce the perpetration risk at boarding schools.

3.2 Creating missing solutions for boarding school students

This section outlines possible options that may address the risk factors for which no solution was found in the previous section. This section will mainly focus on issues surrounding boarding school students, given the absence of associated practices. Feasible options for each risk factor, such as a lack of mentors, poor school management, and unsafe school infrastructure will be shaped from practices in adolescent development.

Missing mentorship and school management could be concluded as a wellness issue for the students. The ideal option is to allocate enough trained school managers and life teachers to the boarding schools, which succeeded in boarding schools in rural China. A cluster-randomized control trial held in boarding schools in the Shaanxi province that shares challenges with rural Kenya and Tanzania, (e.g., students from relatively low-income families living in remote villages, under-equipped school facilities with limited human resources) significantly improved students' health and behavior (Yue et al., 2014). Introducing this program is ideal if there were enough resources, which is not applicable in this context. An affordable, alternative program is expected. The author suggests adding a buddy system to group education as a feasible option.

A buddy system that pairs first-year students with elderly students is a popular mentoring program introduced at boarding schools and military academies in high-income countries. It is also applied to elite universities to support students with nontraditional backgrounds to aid in their adjustment (Turner & Diver, 2017; Ward, Siegel, & Davenport, 2012). In a general buddy system, the elderly student serves as a mentor to determine needs and expectations for the freshman mentee.

A successful buddy system not only improves students' wellness but also develops a quasi-sibling relationship that could even last a lifetime, though the hidden risks should not be ignored. The asymmetric relationship between the mentor and mentee, backed with gaps of knowledge, experience, and physical development, can quickly transform into a hotbed of bullying. Selecting disciplined students with adequate training is the key to fostering qualified mentors. The whole process could be incorporated into the group education session suggested above.



Starting a pilot project at a selected cohort, like students in a leadership development program, could reduce the risks and provide opportunities to adjust the design. A buddy system is an affordable option, though the mentor students should not replace adult guardians or professional counselors.

The importance of protected and sex-segregated toilets to promote gender equality is actively discussed among practitioners and journalism (Lafraniere, 2005; World Health Organization, 2017). In a study in informal settlements of Nairobi, Kenya, unveiled girls' voices of fear and anxiety due to harassment from male peers were associated with inappropriately designed and managed school toilets (Girod, Ellis, Andes, Freeman, & Caruso, 2017). However, their impact on preventing girls' poly-victimization is hardly evaluated. Studies that evaluated whether improving toilet design can prevent girls' poly-victimization were not found through database searches, including PubMed. Instead, UN Women remarks that improving school infrastructure for safety is ineffective in preventing violence against girls and women (UN Women, 2015). Improving school healthcare facilities may fit better in the public health context rather than the violence prevention scheme. At the present moment, there is little evidence to support and fund necessary construction from the gender equality framework.

3.3 Programs to address violence perpetration risks in rural East Africa

Table 12 summarizes the components of interventions screened through the previous sections. Studies and reports related to studies in Chapter 2 and guidelines published from multilateral organizations were referred to develop the details written in the activity contents and logistics (EngenderHealth & Promundo, 2008; Keller et al., 2017; Pulerwitz et al., 2015, 2010; UNFPA & Promundo, 2010; World Health Organization, 2007).

	Activity Contents	Logistics
Group Education	<p>Educational Session</p> <ul style="list-style-type: none"> • Knowledge of puberty changes, sexual consent, harm of drugs • Learn why supporting peer girls and female siblings is important • Develop positive masculinity <p>Skill-development</p> <ul style="list-style-type: none"> • Learn assertive body language and verbal response • Learn how to identify alerts in potential assault situations 	<p>Location: School Length: 2 hrs * 6 weeks minimum Facilitators: Either professionals or trained teachers</p>



Community Engagement (intended for day schools)	Community workshops <ul style="list-style-type: none"> Facilitate a platform to exchange ideas and debate issues related to gender, relationship, sexuality Arrange a meeting where peer groups present skits concluding their takeaways Street theater <ul style="list-style-type: none"> Showing men changing or acting in positive ways, demonstrate what men and boys could gain from changing their gender-related behavior Distributing informational materials <ul style="list-style-type: none"> Prepare papers focusing on gender and women's victimization and distribute to the community 	Location: Community Length: 4-6 months Facilitators: Involve community leaders from the initial baseline analysis and programming phase
Buddy Training (intended for boarding schools)	Buddy training session <ul style="list-style-type: none"> Develop skills to support younger students Learn how to acclimate and navigate mentees to the new environment Learn when to notify and how school managers can intervene when mentees are having difficulties 	Location: boarding school Length: further research required Facilitators: further research required

Table 12: Discovered key components

The accessible resources and priorities may determine the facilitator of group education, given the pros and cons of allocating outside professionals. Trained experts could be costly but could create a safe environment for the participants who are likely to be exposed to the stigma around admitting violence. On the other hand, training teachers can strengthen the violence prevention cycle at schools but could also be risky if they are perpetrators of corporal punishment and the offered training was not adequate to persuade the teachers to eradicate violence associated with unequal power relationships. Since both Kenyan and Tanzanian legislation prohibits corporal punishments at schools, it is recommended to work with the local governments and head teachers to deal with corporal punishment before beginning the adolescents' program.

Reliable studies evaluating an effective buddy system could not be found through database searches. A classical study of a community buddy system conducted six initial 3-hr weekly sessions followed by biweekly sessions for the duration of the project year (Fo & O'Donnell, 1974), in which both society and participants hardly shared the baseline with rural East African boarding schools. Details of buddy systems applied in elite universities are merely disclosed, which also does not share much with the target population. The buddy system design requires carefulness by interacting with the participants.



4. Proposal: Programming boys' empowerment

This chapter proposes the appropriate intervention endorsed by the evidence described in the previous chapters. Intervention components suggested by Chapter 3 will be mapped through the results chain model which seeks to explain the causal logic with identifying the gaps and weak links in program design. The following sections will list useful resources, techniques, and groundwork that could improve the impact. The chapter as a whole will provide a comprehensive material to design an effective program.

4.1 Results Chain of the proposed components

Table 13 depicts the component details through the results chain, a model used by the World Bank that sets out a logical, plausible outline of how a sequence of inputs, activities, and outputs that are expected to improve the outcomes and impact (Gertler, Martinez, Premand, Rawlings, & Vermeersch, 2016). Primary inputs which are common to all programs, including staffing and training facilitators and other organizers, obtaining the necessary permission from relevant authorities, and budgeting, are excluded from the input. All projects are intended to result in reducing boys' violence perpetration risk factors, and further reduce girls' poly-victimization.

Previous practices do not disclose the details of the preparation and implementation of community engagement. The author carefully read the reports published by the organizers reviewed in the earlier chapters, but was not able to earn featured information. It may be related to the characteristics of the community activities that do not always fit well in a formal written language. A further survey involving a direct interview with the predecessors are necessary.

Amongst the three proposed projects in **Table 13**, the outcomes of the buddy system do not directly relate to gender-related behavior change. The impact of the buddy system is expected to be more holistic, compared to the other two:



	Input	Activity	Output	Outcome
Group Education	<ul style="list-style-type: none"> Find schools and communities willing to participate Conduct a baseline survey and adjust the curriculum to fit the observed risk factors Decide whether to train teachers as facilitators or employ outside experts 	<ul style="list-style-type: none"> Participants complete educational session (topics: puberty changes, sexual consent, positive masculinity, gender equality, and other) Participants learn bystander intervention skills 	<ul style="list-style-type: none"> Participants understand puberty changes, valid consent Participants understand masculinity is not always associated with violence Participants develop bystander intervention skills 	<ul style="list-style-type: none"> Participants support peer girls and female siblings at home, street and classrooms Participants intervene when witnessing potential assault situations
Community Engagement	<ul style="list-style-type: none"> Identify and meet community leaders, conduct a baseline survey together to draft the activity Organize an advisory committee with identified stakeholders Prepare materials, venues, and staff for street theater, workshops, leaflet distribution 	<ul style="list-style-type: none"> Identified stakeholders initiate activities Community member talks about gender-related topics at workshops Community members observe positive masculinity behavior and its benefits through street theater Community members receive informational materials about gender equality 	<ul style="list-style-type: none"> Identified stakeholders feel committed to gender equitable campaigns Community members know how their peers think about gender, relationship, sexuality Community members come across positive examples of men chaining themselves and behave differently Community members know opinions around gender equality 	<ul style="list-style-type: none"> Committed stakeholders become advocates Community members get motivated to alter their behavior Community members start developing a gender-equitable male identity and lifestyle
Buddy system (pilot project)	<ul style="list-style-type: none"> Find boarding schools with motivated students and school managers Involve school managers and life teachers develop supporting skills Train prospective students 	<ul style="list-style-type: none"> Trained and screened elder students paired with younger students Elder students navigate the younger students 	<ul style="list-style-type: none"> Elder students advise younger students, play an older sibling role in the school dormitory Younger students gain accessible advisors 	<ul style="list-style-type: none"> Elder students develop confidence and leadership skills Younger students get acclimated to school Younger students feel connected

Table 13: Results chain of the proposed intervention components

Therefore, it could be implemented as a leadership development program, if the schools or authorities prefer.



4.2 Useful resources and techniques

Throughout the data collection and analysis, the author encountered resources that may assist in the preparation process. This section briefly describes the resources and suggests ideas.

"Engaging Boys and Men in Gender Transformation: The Group Education Manual" is an educational manual for working with men to question non-equitable views about masculinity and develop positive attitudes to prevent unhealthy behaviors. It has been adapted in diverse settings like schools, youth clubs, and community groups in various countries, including Kenya and Tanzania (EngenderHealth & Promundo, 2008). The Ethiopian case study analyzed in Section 2.2 also referred to this manual for developing their community engagement program. The details of the manual, including its URL, are included in the bibliography.

Ujamaa Africa is the non-profit that implemented two of the three studies analyzed in Section 2.2. According to the description of the literature studying their activities, the organization is likely to possess access to the trained facilitators who participated in the interventions in Nairobi. Requesting them to become instructors of the training of trainers process could be more practical and efficient than hiring and sending an instructor from the U.S.

4.3 Groundwork for success

The keys to success are adjusting the curriculums and project design by the results of the baseline survey. The author revealed in the earlier chapters that the risk factors surrounding adolescent boys varies between the area and does not always match with the well-known general elements reported in research. This paper also shares the limitations - the findings from the field survey stated in section 1.3 are not absolute at all. Given the size of the sample population and resource constraints, the listed risk factors are likely to vary widely depending on the timeframe and targeted grader. Conducting a baseline survey and matching the project design with identified risk factors is a prerequisite for an effective program.



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