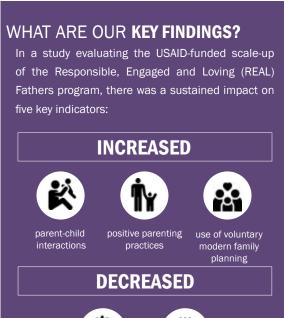
# real fathers. REAL Fathers Are Real Partners

#### FINDINGS FROM SCALE-UP EVALUATION OF THE REAL FATHERS PROGRAM IN UGANDA



harsh discipline of young children



## why focus on young fathers for violence prevention?

Evidence suggests gender transformative interventions that foster gender equitable norms and behaviors among men while challenging dominant, negative notions of masculinity can be effective in preventing violence. 1-3 Becoming a father is an important life transition for men, presenting a timely opportunity to prevent intimate partner violence (IPV) and promote positive discipline of children while introducing positive masculinities and more gender-equitable attitudes and behaviors.

perpetration

Violence against women and children is a global public health and human rights concern. IPV and violence against children (VAC) are associated with many adverse health and

psychosocial outcomes. Moreover, they frequently occur in the same household, share common risk factors and are associated with intergenerational effects including increased risk for violence perpetration and experience later in life.4

In Uganda, 56% of ever-married women have experienced some form of physical, sexual and/or emotional IPV in their current or recent relationship.5 Three in four Ugandans reported ever experiencing emotional, physical, and/or sexual violence from any perpetrator before the age of 18. For many this violence was perpetrated for the first time when they were under 5 years old; for the majority, a parent was the perpetrator.6







### what is the real fathers program?

**Responsible, Engaged, and Loving (REAL) Fathers** is a community-based mentoring program that capitalizes on the key period of transition when young men become fathers for the first time. The program works with fathers between 16-25 years old who are parenting a child one to three years old. REAL Fathers aims to:





Prevent IPV and harsh discipline (physical and/or verbal abuse) of young children



Improve fathers' use of positive parenting, their confidence in using nonviolent discipline and couple communication



Foster acceptance of non-traditional gender roles in parenting by fathers and the wider community

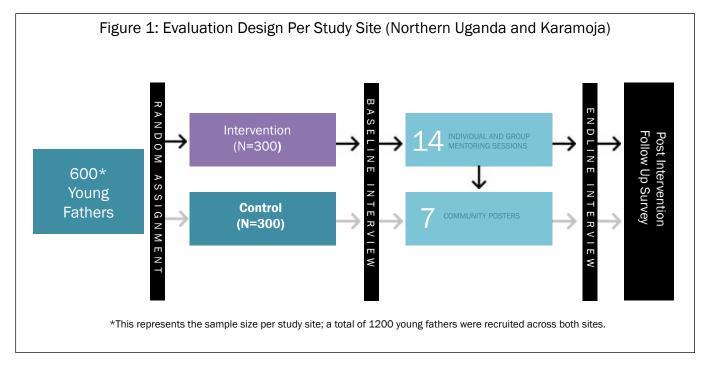


Increase acceptability and use of voluntary family planning by REAL Fathers couples

Following promising results from a pilot in Northern Uganda,<sup>7</sup> the scale-up phase (2016-2018) explored the feasibility and effectiveness of expanding coverage to new communities in the country and integrating the program into existing community program, with the addition of a family planning group and individual session. REAL Fathers was integrated into Save the Children's Early Childhood Care and Development in Karamoja and the Youth Initiative for Employment and Sustainable Livelihood and Development programs in Northern Uganda.

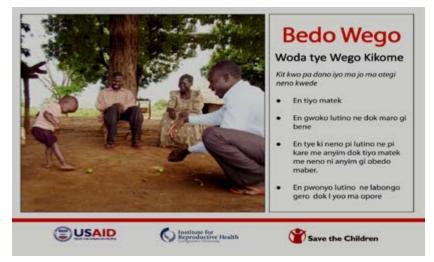
The scaled-up program was implemented similarly to the pilot. Young fathers selected trusted elders in the community to be mentors. If the elder was interested in mentoring, the young fathers' wives and community leaders validated the selection, confirming their capacity to mentor and demonstrate behaviors aligned with the program Mentors received training in gender equity and the different facets of the program before implementation. Program activities included individual and group mentoring sessions, a poster campaign reinforcing positive messages and demonstrating community support for changed behaviors and a community celebration at the end of the project to recognize accomplishments and encourage sustained changes. Over seven months, participating fathers were expected to attend seven individual mentoring sessions, including two with their partner, and seven group sessions with other REAL fathers and their mentors, and complete accompanying homework. Each of the session pairs (individual/group) focused on a theme such as positive parenting, communication, and family planning; complementary posters were displayed in public spaces to reinforce and normalize positive behaviors as new expectations for fathers.8

#### how did we evaluate the program?



This brief highlights changes from the survey findings on the five key indicators: decreased harsh discipline of young children; decreased IPV perpetration; increased positive parenting practices; increased parent-child interactions, and; increased use of voluntary modern family planning. In both sites, outcomes were analyzed looking at the difference between control and intervention arms over time (baseline, endline, one-year post intervention). Analysis used a proportional odds model with generalized estimating equations that controlled for the father's age and education, mother's education, and the payment of bride price.

Figure 2: Community Poster from REAL Fathers Scale-up



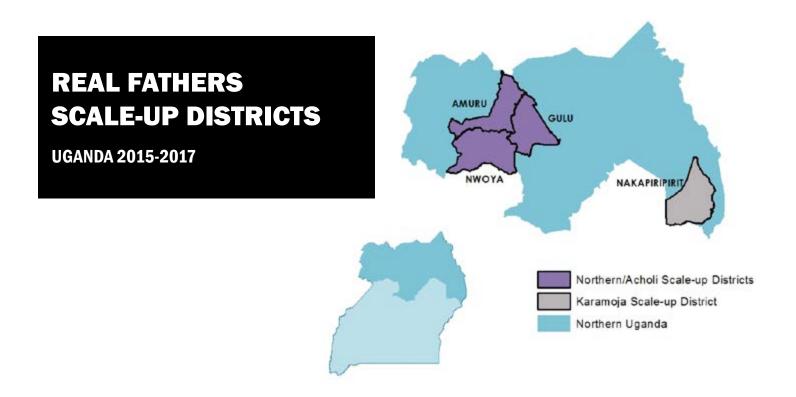
This evaluation study sought to assess the effectiveness of REAL Fathers to prevent IPV and harsh discipline of young children, improve positive parenting, and increase parent-child interaction, among other indicators. A randomized controlled trial was carried out in Acholi, Nwoya and Gulu in Northern Uganda and Loregedwat and Lolachat in the Karamoja region of Uganda. The study included a quantitative survey with eligible young fathers at baseline (2016), endline (2017) and one-year post intervention

(2018) to assess program effectiveness. In total, 1200 fathers were enrolled in the evaluation including 600 each in Northern Uganda and Karamoja. In both regions, 300 fathers were assigned to the intervention group, and 300 to the control group, who were only exposed to the community poster series. In addition, qualitative life history interviews at baseline and endline with young men and women participating in the program were conducted.

#### who are the participants?

In Northern Uganda, the average age of a young father was 22 years in the control and 23 years in the intervention group. Across all groups, most young fathers and their wives/partners completed upper primary or secondary school, though the young fathers had attended more school than their female partners. In all groups, agriculture was the main occupation.

In Karamoja, the average age of a young father was 23 years in both the control and intervention groups. Over 60% of the young fathers and 85% of wives in the intervention group had never attended school, compared to under just under half of the control fathers and 70% of control wives. Across groups, almost all young fathers and their wives worked in agriculture.



#### what did we learn?

**REAL Fathers Significantly Reduced their Use of Harsh Discipline of Young Children Compared to the Control Group** 

At baseline, prior to starting REAL, nearly half of fathers reported using harsh discipline with their young children in both Northern Uganda (43%) and Karamoja (47%). 'Harsh discipline' was measured with a scale encompassing seven physically and verbally abusive behaviors, for example, shaking your child or screaming at your child. Our data show that the intervention had both an immediate and sustained positive impact on reducing harsh discipline of young children by REAL Fathers in both regions (see Table 1).

Table 1: Change in Use of Harsh Discipline by REAL Fathers Compared to Control Group

At endline, REAL Fathers were... 1 year later, REAL Fathers were... ALMOST **NORTHERN** times more likely to be non-violent than times more likely to be non-violent than control fathers. control fathers. **UGANDA** OR: 1.98: CI: 1.34, 2.93 OR: 2.79; CI: 1.92, 4.05 1 year later, REAL Fathers were... At endline, REAL Fathers were... JUST OVER times more likely to be times more likely to be non-violent than **KARAMOJA** control fathers OR: 2.14; CI: 1.46, 3.12 OR: 3.59; CI: 2.53, 5.10

# Intimate Partner Violence Decreased Significantly Among REAL Fathers Compared to Fathers in the Control Group

At baseline in Northern Uganda, there was no significant difference reporting severe or some IPV, respectively, between intervention fathers (7%, 14%) and control fathers (5%, 14%). IPV was measured with a scale encompassing four physically, sexually, and verbally behaviors, for example, throwing something at your wife, or forcing her to have sex when she didn't want to. At baseline in Karamoja, intervention fathers were more likely to report severe or some IPV, respectively (20%, 25%), than control fathers (14%, 16%). Our data show that participation in REAL Fathers prevented IPV in both regions, and this change was sustained or improved over time (see Table 2).

Table 2: Change in IPV by REAL Fathers Compared to Control Group At endline, REAL Fathers were... 1 year later, REAL Fathers were... JUST OVER ALMOST times as likely to not engage in IPV as times as likely to not engage in IPV **NORTHERN** control fathers. compared to control fathers. **UGANDA** OR 2.15; CI: 1.28, 3.63 OR 2.90; CI: 1.51, 5.58 1 year later, REAL Fathers were... At endline, REAL Fathers were... JUST OVER times as likely to not engage in times as likely to not engage in IPV as KARAMOJA IPV as control fathers. control fathers. OR 3.45; CI: 2.15, 5.52 OR 3.20; CI: 2.09, 4.90

# **REAL Fathers Were Significantly More Likely To Report Positive Parenting Practices Than Fathers In The Control Group**

Fathers in both sites reported high levels of positive parenting at baseline, with just over 80% of both Northern Uganda and Karamoja fathers reporting some or frequent instances of positive parenting. Positive parenting was measured with a discrete scale encompassing five healthy parenting behaviors, such as praising your child, or telling your child you love them. Our data showed that REAL Fathers in both regions increased their use of positive parenting practices and this change was sustained or improved over time compared to fathers in the control group (see Table 3).

Table 3: Change in Positive Parenting by REAL Fathers Compared to Control Group



# **REAL Fathers Significantly Increased Interactions with their Children Compared to the Control Group**

At baseline in both Northern Uganda and Karamoja, intervention fathers reported similar parent-child interactions as control fathers. Parent-child interactions were measured by a scale summing the frequency with which fathers reported engaging in nine behaviors interacting with their children, for example, cooking for their children, bathing their children, or reading with their children—rarely, once or twice a month, several times a week, or every day. Our data showed that REAL Fathers in both regions increased frequency of positive child interactions, and that this change was sustained or improved over time (see Table 4).

Table 4: Change in Child Interactions by REAL Fathers Compared to Control Group

NORTHERN UGANDA

At endline, REAL Fathers were...

1 year later, REAL Fathers were...

OVER

1 times as many child-parent interactions as control fathers.

OR 1.81; CI: 0.83, 2.80

OR: 2.37; CI: 1.49, 3.26

OVER

KARAMOJA

At endline, REAL Fathers were...

times as many child-parent interactions as control fathers.

OR: 3.85; CI: 3.09, 4.60

1 year later, REAL Fathers were...

**3** times as many child-parent interactions as control fathers.

OR: 3.78; CI: 2.83, 4.73

# **REAL Fathers Significantly Increased Voluntary Family Planning Use in Northern Uganda**

At baseline in Karamoja, use of modern voluntary family planning methods was non-significantly lower for intervention fathers (13%) than control fathers (19%); in Northern Uganda, use of modern voluntary family planning methods was non-significantly lower for intervention fathers (58%) than control fathers (65%). Our data showed that REAL Fathers in Northern Uganda increased their use of modern voluntary family planning methods, and that this change was sustained over time; however, in Karamoja, there was no difference in family planning use between intervention and control fathers at either endline or one year out—this may be explained in part by low levels of access to high-quality family planning services in this region. (see Table 5).

Table 5: Change In Voluntary Use of Modern Family Planning By Real Fathers Compared To Control Group

NORTHERN UGANDA

At endline, REAL Fathers were...

1 year later, REAL Fathers were...

OVER

1 5 times as likely to currently use voluntary, modern family planning

OR 2.3; Cl: 1.46, 3.64

OR: 1.66; Cl: 1.14, 2.42

KARAMOJA

At endline, REAL Fathers were...

**No difference** from control group in their use of voluntary, modern family planning

OR: 0.85, (CI: 0.57, 1.26)

1 year later, REAL Fathers were...

**No difference** from control group in their use of voluntary, modern family planning

OR: 1.17 (0.80, 1.79)

#### what's next?

The adapted, integrated, and scaled-up REAL Fathers initiative has proved its effectiveness in sustained change to the key indicators of preventing IPV and harsh discipline of young children, improving positive parenting, and increasing parent-child interactions. Future adaptations of REAL Fathers that that include the family planning component may want to add a service linkages strategy to support increased use of voluntary modern family planning. We continue to seek partners to adapt and integrate REAL Fathers programming into appropriate platforms across the world. Currently, we are working to adapt and integrate REAL Fathers in West Bengal, India.

Are you interesting in integrating the REAL Fathers intervention into your work? Do you have any questions about REAL Fathers? **Please contact irhinfo@georgetown.edu.** 

#### references

- 1. Abramsky T, Devries K, Kiss L, et al. Findings from the SASA! Study: A cluster randomized controlled trial to assess the impact of a community mobilization intervention to prevent violence against women and reduce HIV risk in Kampala, Uganda. BMC Med 2014;12(1):15–7.
- 2. Lundgren R, Amin A. Addressing intimate partner violence and sexual violence among adolescents: Emerging evidence of effectiveness. J Adolesc Heal [Internet] 2015;56(1):S42–50. Available from: <a href="http://dx.doi.org/10.1016/j.jadohealth.2014.08.012">http://dx.doi.org/10.1016/j.jadohealth.2014.08.012</a>
- 3. Heise L. What works to prevent partner violence: An evidence overview. 2014.
- 4. Guedes A, Bott S, Garcia-Moreno C, Colombini M. Bridging the gaps: a global review of intersections of violence against women and violence against children. Glob Health Action 2016;9(1):31516.
- 5. Uganda Demographic and Health Survey 2016. Kampala, Uganda, and Rockville, MD: 2018.
- 6. Ministry of Gender Labor and Social Development. Uganda Violence Against Children Survey: Findings from A National Survey [Internet]. Kampala, Uganda: 2018. Available from: <a href="https://www.unicef.org/uganda/VACS\_Report\_lores.pdf">https://www.unicef.org/uganda/VACS\_Report\_lores.pdf</a>
- 7. Ashburn K, Kerner B, Ojamuge D, Lundgren R. Evaluation of the Responsible, Engaged, and Loving (REAL) Fathers Initiative on Physical Child Punishment and Intimate Partner Violence in Northern Uganda. Prev Sci [Internet] 2017;18(7):854–64. Available from: <a href="https://doi.org/10.1007/s11121-016-0713-9">https://doi.org/10.1007/s11121-016-0713-9</a>
- 8. Institute for Reproductive Health. REAL Fathers Long Term Follow Up Evaluation Report. Washington: 2018.