

Does Shifting Gender Norms on the Community Level Lead to Increased HIV Services Uptake?

A growing body of evidence suggests that programs seeking to change harmful gender norms can have notable HIV-related impacts on program participants, including increased condom use, and a decrease in STIs and intimate partner violence. Yet there is limited evidence of whether such programs can shift norms at the community level, and if so, whether, and how, these changes can improve men's and women's uptake of HIV services.

Project SOAR and partners are addressing these knowledge gaps by building on an ongoing National Institute of Mental Health-funded randomized controlled trial being conducted



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Research Partners: Project SOAR (Nicole Haberland and Julie Pulerwitz), University of North Carolina (Audrey Pettifor), University of the Witwatersrand (Kathleen Kahn), University of California at San Francisco (Sheri Lippman), and Sonke Gender Justice (Dean Peacock)

Location: Mpumalanga Province, South Africa

Study Duration: 2015–2018

For more information, contact
Nicole Haberland
nhaberland@popcouncil.org

in South Africa—Community Mobilization for Treatment as Prevention. Specifically, we are strengthening and expanding the gender content of the intervention to engage both women and men in critically examining gender norms and power inequalities. We are also examining the intervention's effects in changing community gender norms and resulting HIV service utilization.

This study is particularly timely as it will address a key question in the field as to how gender norms may operate to affect HIV service utilization. Building the evidence base in this area is vital for improving care outcomes as well as creating more equitable gender norms, a gateway variable to a range of positive HIV-related behaviors. There is also a need to better understand these relationships in South Africa, given its generalized HIV epidemic and high levels of gender-based violence.

Our Research

This study is a two-arm, cluster randomized controlled trial located in Mpumalanga Province, an area marked by poverty, unemployment, and an HIV prevalence rate that is among the highest in South Africa. Sixteen villages have been randomized to either the intervention or the control condition. The effects of the intervention are being assessed with three evaluation components:

1. Collecting data on HIV-related clinical visits in the study area, including for HIV testing, and HIV care and treatment services.
2. Surveying 1,200 randomly selected males and females, ages 18–49 from the study villages at baseline and endline, to assess HIV testing rates, views toward gender norms, and other outcome variables.
3. Conducting a robust qualitative component to examine the gender norm change process, and how such change affects HIV service utilization.

The Importance of Gender

The intervention utilizes a gender lens, tackling both women-specific and men-specific issues. For example, men are less likely to get tested for HIV and women tend to be more fearful of disclosure to their partner because of the threat of violence. It is important that community-based programs are responsive to these and other gender-specific needs.

Intervention Activities

The intervention focuses on a theory-driven community mobilization framework to address social barriers to care, including HIV-related stigma, fear of disclosure, and norms around care-seeking, caregiving, and violence against women. Specific activities include:

- Workshops.
- Theater.
- Debates.
- Single-sex small groups.
- Discussions using digital videos documenting real stories of individuals' testing and care experiences.

Additionally, the research team is conducting a costing component to determine the cost per HIV test resulting from the intervention and the intervention's cost-effectiveness.

These research activities will produce a strong, rigorous, and unique data set to answer the study's research questions.

Research Utilization

This study, like other Project SOAR studies, actively engages stakeholders from the beginning to ensure the utilization of findings, including the costing results, in guiding programming and in allocating resources.