A Qualitative Endline Study of a Male Advocate Intervention to Prevent Violence against Women and Girls in Da Nang, Viet Nam

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**ABBREVIATIONS AND ACRONYMS**

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<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tr>
<td>CEFAW</td>
<td>Committee for the Advancement of Women</td>
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<td>DEPOCEN</td>
<td>Development and Policies Research Center</td>
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<td>DNWU</td>
<td>Da Nang Women’s Union</td>
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<tr>
<td>DV</td>
<td>Domestic Violence</td>
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<td>DVPC Law</td>
<td>Domestic Violence Prevention and Control Law</td>
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<td>GBV</td>
<td>Gender-Based Violence</td>
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<td>GEMS</td>
<td>Gender Equality Movement in Schools (India)</td>
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<td>GSO</td>
<td>General Statistics Office of Viet Nam</td>
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<td>P4P</td>
<td>Partners for Prevention</td>
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<td>SVRI</td>
<td>Sexual Violence Research Initiative</td>
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<td>UNDP</td>
<td>United Nations Development Programme</td>
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<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<td>UNV</td>
<td>United Nations Volunteers</td>
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<td>UN Women</td>
<td>United Nations Entity for Gender Equality and the Empowerment of Women</td>
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<tr>
<td>VAWG</td>
<td>Violence Against Women and Girls</td>
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<tr>
<td>WHO</td>
<td>World Health Organization</td>
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<td>WU</td>
<td>Women’s Union</td>
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This qualitative endline study was commissioned by Partners for Prevention (P4P), a regional joint programme of the United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA), the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women) and the United Nations Volunteer Programme (UNV), working for the prevention of violence against women and girls (VAWG) in Asia and the Pacific. The views and opinions expressed in this report are those of the authors and the study participants and do not necessarily reflect the official policy or positions of P4P, UN Women Vietnam or Da Nang Women’s Union.
EXECUTIVE SUMMARY

The Male Advocate Club project was implemented in Da Nang City, Viet Nam from August 2015 to November 2016 by the Da Nang Women’s Union, the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women) Viet Nam, and UN Volunteers (UNV) Viet Nam with the support of Partners for Prevention (P4P), a regional joint programme of the United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA), UN Women and UNV, working for the prevention of violence against women and girls in Asia and the Pacific.

Designed in response to regional and national research into the causes of violence against women and girls, the project aimed to work with men to change social norms and address harmful masculinities related to gender inequality and violence through building the capacity of local facilitators, running year-long participatory workshops, and promoting volunteerism to sustain the project’s results.

This qualitative endline study documents the experiences, changes and recommendations of project participants and facilitators and the reflections and recommendations of key stakeholders and found that the project improved perception and understanding of violence against women and girls, challenged gender roles and norms, improved family relationships and parenting skills and encouraged volunteerism.

Background

The UN Multi-country Study on Men and Violence led by P4P was carried out in six countries across nine sites in the Asia-Pacific region. It documented men’s use of violence and identified key risk factors for the perpetration of violence against women and girls with a particular focus on intimate partner violence (Fulu et al. 2013). The findings of this research revealed that, on average, 45.6 per cent of men had ever perpetrated physical and/or sexual intimate partner violence; 53.2 per cent had perpetrated emotional intimate partner violence; and 34 per cent had perpetrated economic intimate partner violence (Fulu et al. 2013). In addition, 10.9 per cent of men reported perpetrating non-partner rape in their lifetime (Fulu et al. 2013). These findings indicate the high levels of the perpetration of intimate partner violence in the region.

The National Study on Domestic Violence against Women in Viet Nam measured the rates of intimate partner violence against women aged between 18 and 60 years old (United Nations Vietnam 2010). The results showed that 32 per cent of ever-partnered women had experienced physical intimate partner violence and 10 per cent reported experiencing sexual violence by an intimate partner in their lifetime. The study also found that 54 per cent of women had experienced emotional abuse by an intimate partner and 9 per cent had experienced economic abuse.

In Viet Nam, P4P supported a qualitative study to explore and understand violent and non-violent masculinities given the importance of this construct in the perpetration of violence against women and girls, as outlined in the findings of the multi-country study described above (Dao et al. 2012).

The findings of the research indicate that early experiences of violence during childhood, such as corporal punishment at home and school, build an association between violence and discipline; and, indeed, men in the study commonly described their use of violence in the family as a tool for disciplining and maintaining authority. In addition, outside of the home, violence among peers was used as a tool to establish hierarchies according to the relative strength and dominance among boys or men. Indeed, childhood experiences appeared to be particularly influential in the development of either violent or non-violent masculinities among men. While public physical violence was frowned upon, violence in private against wives was generally considered acceptable or even necessary. Men’s use of violence was generally prompted by a desire to defend or demonstrate their masculinity.

These findings indicate both an urgent need for effective primary prevention interventions that will prevent such violence from occurring at all as well as creating opportunities for their successful implementation. UN Women, UNV and the Da Nang Women’s Union, with technical support from P4P, developed and piloted such an intervention. This qualitative endline study aims to understand the acceptability, relevance and potential impact of the intervention.
Study objectives

The overall objective of this endline study was to collect qualitative endline data about change and transformation inspired by the intervention and to collect recommendations to strengthen the intervention from the perspective of intervention participants and facilitators.

The specific objectives of the study were to:

1) Document the experiences, changes and recommendations of 20 participants (direct beneficiaries) in the project intervention through individual in-depth interviews, including:
   a) Stories of personal change and transformation
   b) Perspectives on how to sustain changes
   c) Involvement in community volunteerism and activism
   d) Perspectives on the implementation of and how to strengthen the intervention

2) Document the experiences, changes and recommendations of 16 intervention facilitators of the project intervention through focus group discussions, including:
   a) Stories of personal change and transformation
   b) Changes and transformation witnessed among participants and/or in the community
   c) Perspectives on the implementation of and how to strengthen the intervention

3) Document general reflections and recommendations of eight key stakeholders representing local authorities and the Women’s Union branch at two piloted intervention sites, including:
   a) Changes and transformation observed during the intervention activities
   b) Perspectives on the implementation of and how to strengthen the intervention

Methods

Within the context of the P4P-supported project in Viet Nam, a group intervention, specifically for men and facilitated by male community members, was piloted at the community level in two communes. This “male advocate intervention” – also called “male advocate clubs” – employed a participatory learning methodology that has shown to be key to effective primary prevention of violence against women and girls in existing intervention studies – for example, PREPARE (Mathews et al. 2016), Skhokho Supporting Success (Jama Shai et al. 2015), Stepping Stones (Jewkes et al. 2008), SASA! (Abramsky et al. 2014), and the Good Schools Toolkit (Devries et al. 2015) – through delivery by trained and supported community facilitators.

This intervention was implemented as part of a broader violence against women and girls prevention programme that included: 1) Strengthening the Committees for the Advancement of Women at city, district and commune levels to prevent, respond and monitor violence against women and girls; 2) Working with local media to improve gender sensitivity in reporting cases of violence against women and girls and reduce gender stereotyping in their reporting; 3) Developing communication materials and organizing public communication events to raise awareness and engage communities to prevent violence against women and girls; 4) Developing and applying the “Safe community – Friendly School – Equal Family”, a local Government regulation and supporting parent clubs; 5) Building the capacity of Reconciliation Team/Rapid Response Task Forces to employ a women’s rights approach (including the two communes where the male advocate clubs were piloted).

This qualitative endline study sought to investigate and document the changes and transformation effected by the intervention pilot. It also sought to collect recommendations to strengthen this intervention from groups directly involved in its implementation either by facilitating the groups or participating in them. Data was collected from 16 facilitators through 4 focus group discussions – 2 in each of the 2 communities where the intervention was conducted. Individual, in-depth interviews were conducted with 20 intervention participants from 2 communities where the intervention was conducted.

This qualitative data allows us to understand the intervention’s acceptability, relevance, and potential impact within a very small pilot project. It does not allow for a full randomized control trial or quasi-experimental evaluation of the intervention.

Findings

Four main themes and transformation that took place within these themes emerged from feedback from male advocate facilitators and club members.
These are briefly summarized here:

- **Perception and understanding of violence against women and girls**
  Participants’ reflections illustrate important shifts in their views on violence against women and girls. Specifically, the intervention broadened their understanding of violence against women and girls to recognize its multiple forms. There was also evidence of behavioural transformation in reported reductions in coercive sex within marriage, improved communication and conflict resolution skills, and some advancement in how to handle cases of domestic violence. These changes are largely positive and encouraging; however, there are some indications that some participants continue to hold on to problematic ideas and practices related to violence against women and girls, such as being conciliatory to men in cases of domestic violence.

- **Gender roles and norms**
  Participants’ ability to recognize patriarchal gender norms in their daily lives (especially within their families) improved over the course of the intervention. Several participants also reported finding these norms and expectations on women to be unjust and also a risk for increasing violence against women and girls. This understanding led men to have more respect and appreciation for and less impatience with women and the work – especially the unpaid work within families – that they do. These ideas were translated into practice by men who reported being less demanding and helping more around the home.

- **Family relationships and parenting skills**
  Family relationships and the home were typically the first places in which participants implemented some of the changes that came about as a result of what they learned in the intervention. Specifically, these men came to see the value of their families and the importance of being positive role models to influence their children’s attitudes and ideas about relationships, and they reported engaging in a range of positive parenting practices including emotional engagement and demonstrating love and care, less harsh discipline, and improved communication and conflict resolution.

- **Volunteerism**
  Participants realized the potential for them to be agents of change through role modelling in their families and communities through their own changed attitudes and behaviours, as well as actively encouraging others to think about and try to do things differently. Through addressing violence against women and girls in the community, participants put their learning into action in volunteerism efforts to help community members. Several participants reported finding volunteerism to be personally rewarding.

Overall, participants reported high levels of enjoyment and relevance of the intervention to their lives and the issues facing their communities. They particularly appreciated the participatory style of intervention sessions which they noted helped them to much better retain what they were learning. Some improvements to the intervention guide and materials were suggested, primarily related to reducing technical language. Participants described some potential opportunities for strengthening and expanding the intervention through more active cooperation, collaboration and support across different organizations and at multiple authority levels. Implementers should consider how to engage different groups in the community in violence against women and girls prevention beyond the older men who typically participated in this pilot of the male advocate intervention.

**Conclusions**

This male advocate intervention inspired important transformations among club members and facilitators with regard to their perceptions, attitudes and practices of gender equality and strengthening understanding and non-acceptance of different forms of violence against women and girls and how to prevent it. Furthermore, there is evidence that participants implemented changes in their families through improved relationships with their wives and children, as well as in their communities through various forms of volunteerism. The male advocate intervention was not implemented in isolation, so these findings must be considered within the context of a broader multicompont programme. These encouraging findings suggest that this model of intervention could be strengthened, scaled up and further evaluated.
Violence against women and girls globally

Violence against women and girls is a worldwide public health, human rights and societal problem encompassing many forms of violence including: intimate partner violence, non-partner sexual violence, sexual abuse of girl children, female genital mutilation, sexual trafficking of women, child marriage and honour killings. Nearly one-third (30%) of women aged 15 and over globally experience physical or sexual intimate partner violence in their lifetimes (Devries et al. 2013). The global prevalence figure masks considerable variation between countries. In the World Health Organization (WHO) multi-country study on women’s health and domestic violence, a range of lifetime prevalence of physical or sexual violence victimization between 15 per cent and 71 per cent of ever-partnered women was reported (García-Moreno et al. 2005).

The negative consequences of violence against women and girls are multiple. Globally, 38 per cent of all murders of women are committed by intimate partners (Abrahams et al. 2013). Furthermore, abused women have a 16 per cent greater likelihood of having a baby of low birth weight, more than twice the likelihood of having an abortion, almost twice the likelihood of having depression, and, in some regions, are 1.5 times more likely to acquire HIV, as compared to women who have not experienced intimate partner violence (Jewkes et al. 2010). Children who have been physically or sexually abused have a greater risk of depression, suicidality, post-traumatic stress disorder, unwanted pregnancy, alcohol dependency and sexually transmitted infections (Felitti et al. 1998, Jewkes et al. 2010, Koss, 2003, Turner et al. 2006.). Exposure to abuse and neglect during childhood also increases the risk of developing anti-social and violent behaviour, including rape perpetration (Caspi et al. 2002, Jewkes et al. 2011).

Violence against women and girls in the Asia Pacific region and in Viet Nam

The UN Multi-country Study on Men and Violence led by P4P was carried out in six countries across nine sites in the Asia-Pacific region. It documented men’s use of violence and identified key risk factors for the perpetration of violence against women and girls with a particular focus on intimate partner violence (Fulu et al. 2013). The findings of this research revealed that, on average, 45.6 per cent of men had ever perpetrated physical and/or sexual intimate partner violence; 53.2 per cent had perpetrated emotional intimate partner violence; and 34 per cent had perpetrated economic intimate partner violence (Fulu et al. 2013). In addition, 10.9 per cent of men reported perpetrating non-partner rape in their lifetime (Fulu et al. 2013). These findings indicate the high levels of the perpetration of intimate partner violence in the region.

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An analysis comparing men in the UN Multi-country Study on Men and Violence who committed intimate partner violence and those who did not revealed specific factors associated with intimate partner violence perpetration (Fulu et al. 2013). These factors included:

- Ideals and practices of manhood that promote toughness or aggression, heterosexual prowess, and dominance over women as evidenced by gender-inequitable attitudes, controlling behaviour, having multiple sexual partners, and having sex with a sex worker.

- Childhood trauma and adversity, especially experiencing physical, emotional or sexual abuse during childhood, and witnessing the abuse of their mother in childhood – this indicates the intergenerational transmission or cycle of violence.

- Poor relationship-building skills evidenced by frequent quarreling and conflict with partners.

- Mental health challenges, specifically depression, low life satisfaction, and alcohol abuse.

- Low levels of education and current economic problems (as evidenced by current food insecurity).

Recent additional analysis of data from the National Study on Domestic Violence against Women in Viet
Nam indicated that gender inequality and harmful conceptions of masculinities are at the core of this violence and thus should be the focus of prevention interventions (Jansen et al. 2016). In addition, alcohol use by men, childhood abuse, and women’s higher financial contributions to the household were significant risk factors in the Vietnamese context (Jansen et al. 2016).

In Viet Nam, P4P supported a qualitative study to explore and understand violent and non-violent masculinities given the importance of this construct in the perpetration of violence against women and girls, as outlined in the findings of the multi-country study described above (Dao et al. 2012).

The findings indicate that early experiences of violence during childhood, such as corporal punishment at home and school, build an association between violence and discipline; and, indeed, men in the study commonly described their use of violence in the family as a tool for disciplining and maintaining authority. In addition, outside of the home, violence among peers was used as a tool to establish hierarchies according to the relative strength and dominance among boys or men. Indeed, childhood experiences appeared to be particularly influential in the development of either violent or non-violent masculinities among men. While public physical violence was frowned upon, violence in private against wives was generally considered acceptable or even necessary. Men’s use of violence was generally prompted by a desire to defend or demonstrate their masculinity.

These findings highlight the need for prevention interventions to be gender transformative as well as prevent childhood trauma, build healthy relationship practices including communication and conflict resolution skills, promote mental health, promote school completion and strengthen livelihoods.

Rationale

The findings that emerged from the quantitative and qualitative research discussed above present an opportunity to engage in the evidence-driven development of primary prevention interventions. That is, by understanding the underlying factors associated with perpetration of violence against women and girls, an intervention can be designed to address some of these factors and thus potentially prevent violence against women and girls before it ever begins. Therefore, UN Women in partnership with UNV and the Da Nang Women’s Union (DNWU), with technical support from P4P, developed and piloted a community-based intervention that engages men with the aim of transforming harmful masculinities and promoting advocacy by men to prevent violence against women and girls.

This proposed pilot project of the “male advocate intervention” sought to determine the acceptability, accessibility and potential effects of the intervention as a proof of concept to practically inform further primary prevention programming in Da Nang and Viet Nam more broadly. Furthermore, insights gained from this qualitative endline study will contribute to the global evidence pool of what works in primary prevention of violence against women and girls.

Gender transformative interventions seek to promote gender equality through challenging patriarchal constructions of gender including rigid gender roles, harmful masculinities, and the power imbalance between males and females. The intervention seeks to facilitate increases in gender equitable attitudes, practices, identities, and social norms.

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3) Document general reflections and recommendations of eight key stakeholders representing local authorities and the Women’s Union branch at two piloted intervention sites, including:
   a) Changes and transformation observed during the intervention activities
   b) Perspectives on the implementation of and how to strengthen the intervention

Intervention description and evaluation methodology

Inspired by the theory of change that seeks to address and transform problematic social norms and risk factors among a critical group – in this case, men – and equip them to have healthy, non-violent interpersonal relationships and gender-equitable attitudes and behaviours, the male advocate intervention was piloted in two communes in Da Nang, Viet Nam.

This qualitative endline study sought to investigate and document the changes and transformation effected by the pilot intervention and collect recommendations to strengthen this intervention from groups directly involved in its implementation either by facilitating the groups or participating in them.

Data collection included (a) Collecting qualitative data in individual discussions with a sample of intervention participants (n=20, all males); and (b) Collecting qualitative data in four group discussions with intervention facilitators and supervisors (n=16, all males). Supplementary data was gathered from eight key informant interviews with Women’s Union representatives at city, district and commune levels and representatives of local authorities at the two districts and communes where the intervention was piloted. This qualitative data allowed an understanding of the intervention’s acceptability, relevance and potential impact within a small pilot project. The data did not allow for a full randomized control trial or quasi-experimental evaluation of the intervention.

This male advocate intervention pilot supported by P4P was implemented in tandem with UN Women’s Asia-Pacific Regional Programme on “Leveraging technical tools, evidence and community engagement to advance the implementation of laws and provision of services to women experiencing violence in South-East Asia” (Phase I: 2013–2015). This regional project funded by the Australian government was implemented in several countries in Southeast Asia, with a particular focus on Indonesia, the Lao People’s Democratic Republic, Timor-Leste and Viet Nam. The male advocate intervention is one component within the broader regional project of six components in a community-based prevention model implemented over an 18-month period in three communes in and around Da Nang (DEPOCEN 2016).

The other components of the project were: 1) Strengthening the Committees for the Advancement of Women at city, district and commune levels to prevent, respond and monitor violence against women and girls; 2) Working with local media to improve gender sensitivity in reporting cases of violence against women and girls and reduce gender stereotyping in their reporting; 3) Developing communication materials and organizing public communication events
to raise awareness and engage communities to prevent violence against women and girls; 4) Developing and applying the “Safe community – Friendly School – Equal Family”, a local Government regulation and supporting parent clubs; 5) Building the capacity of Reconciliation Team/Rapid Response Task Forces to employ a women’s rights approach.\(^3\)

The male advocate intervention was implemented over a 15-month period in two of the three communes. It is possible that some male advocate club members were exposed to or participated in some of the other community activities that were part of the broader community-based prevention program. However, this qualitative endline study focuses exclusively on the male advocate intervention.

The male advocate intervention consisted of 16 sessions, each between 1 and 3 hours long. The intervention was designed to use a participatory learning methodology with a community facilitator guiding group discussions, games, and other activities aimed at transforming harmful masculinities, promoting gender equality, challenging the use of violence against women and children and building relationship skills (e.g. being supportive, using open communication, and resolving conflict in a non-violent way). In addition, throughout the intervention, participants were encouraged and given opportunities to participate in community activism and volunteerism activities as part of the broader project, and then to develop and implement their own community advocacy and volunteerism activities to help build a safe and vibrant community and end violence against women and girls. Facilitators were recruited from communities by DNWU and they participated in a pre-service, five-day training and an in-service, three-day refresher training. They also received regular supportive supervision from a UN Volunteer who was assigned to the intervention project. A facilitator guide was available in Vietnamese that provided outlines of activities for each session, background information for each session and some handouts for participants provided as supplemental material. The guide was intended only for use by the facilitators and not as a workbook for club participants.

**Data collection**

Qualitative data was collected from intervention participants (also referred to as club members) (n=20), intervention (or club) facilitators (n=16), and key informants (n=8) from DNWU and People’s Committees at the district and commune level. The intervention participants and facilitators were all adult males. Participants were purposively selected from the two communities where the intervention was piloted by the research team and the UN Volunteer based in Da Nang who supported the intervention project.

The facilitators were also all males. They included older adult men and representatives from the Youth Union. All facilitators were eligible to participate in and invited to a focus group discussion. Participation was voluntary. Only 16 out of 24 facilitators gave their consent to participate in focus group discussions. Two focus group discussions were held in each commune. In the rural commune, there was one for Youth Union facilitators and one for older male facilitators. In the city ward, both focus group discussions were held with older male facilitators as there were no Youth Union facilitators. The key areas in which the intervention intended to effect change were the main areas of inquiry such as personal change and transformation, community change, volunteerism and activism. See Appendix 1 for the intervention participant inquiry guide and Appendix 2 for the intervention facilitator inquiry guide.

All focus group discussions were conducted at the premises of the People’s Committee while all in-depth interviews were carried out either at the respondents’ private homes or wherever in the community the respondents felt most at ease to meet the research team. Data collection sessions, either through in-depth interviews or focus group discussions, began with a full informed consent procedure (see Appendix 3 for intervention participants and Appendix 4 for intervention facilitators).

From a gender perspective, the presence of a local, middle-aged male researcher was helpful in creating a favourable atmosphere for conducting in-depth interviews and focus group discussions with male participants in the research locations. The female researcher generally conducted focus group discussions with young male facilitators whereas the male researcher generally conducted discussions with middle-aged facilitators.

The study team also introduced themselves and the objective of the endline study before each key informant interview. Key informants were asked for verbal informed consent to confirm their voluntary

\(^3\) See details of the interventions here: https://www.youtube.com/watch?v=Uc3k71SjSsc
participation and their agreement to have the content of the interviews used as primary data. All key informants were interviewed in their own offices, which lasted between 30 and 45 minutes. Individuals could decline to participate, or withdraw from the interview or group discussions at any time. Each in-depth interview lasted between 60 and 90 minutes. The audio was recorded for in-depth interviews to help capture accurately participants’ insights in their own words, and researchers also took notes. At the beginning of interviews, permission was obtained from respondents to make a digital audio recording. One club member did not feel comfortable with the use of an audio recording device; thus 19 in-depth interviews were tape-recorded and detailed researcher notes were used for the one other in-depth interview. Detailed researcher notes were used for key information interviews. The qualitative data was transcribed and translated into English for analysis and report writing. For the sake of anonymity, all personal information was removed or changed.

Of 20 in-depth interview participants, 4 club members were considered to have made “slow progress” according to the assessment of the leader of the local club where they were involved. They were considered slow relative to other club members and not compared to an objective norm or standard. They were said to have learned little from the intervention in the club leader’s view and some still retained strong patriarchal attitudes and biases toward women. It is important to remember that patriarchal attitudes are deeply entrenched and take time to change. The results suggest that even the club members considered progressing slowly experienced important and encouraging changes, even if not to the same degree that other club members did.

Data analysis considerations

The qualitative data was coded and analysed thematically. The emerging themes and insights were discussed within the research team before analysis and interpretation were finalized. With several Vietnamese people working on this project as well as international technical advisors, a multifaceted view of the data took into account the local and global context of violence against women and girls prevention work.

Ethical considerations

The qualitative endline study was conducted in line with ethical and best practices including the guidelines of the Sexual Violence Research Initiative and the World Health Organization for violence against women and girls research (Sexual Violence Research Initiative 2012, WHO 2001). The study team secured approval from a single local institutional review board: the Hanoi School of Public Health.

Participation in this study was voluntary. Furthermore, participants could choose to stop participating in the focus group discussion, in-depth interview or key information interview at any points during the data collection session and/or could decline to answer specific items without any penalty. All potential participants went through a standard informed consent procedure (see Appendices 3 and 4) with the research team before any data collection began. Participants’ confidentiality was protected by not recording any names, identifying information or specific locations in the research reports. Informed consent forms were securely filed separate from any study data or reports. All participants were given a list of resources to find referral or help sources (see Appendix 6).

Strengths and limitations of the qualitative endline study

The endline study team provided anonymity to encourage authentic answers. The diversity of responses obtained, including some constructive criticism, indicates that respondents felt able to voice their opinions freely.

There were no conflicts of interest for the endline study team or their organizations. No individual or organization involved in the endline study stands to gain or lose financially based on the results of the study.

A limitation to this endline study was that there was no formal baseline conducted to precede and contextualize it. Therefore, assessments of change rely on the self-reported and subjective views of the facilitators, club members and key informants instead of on more objective baseline data. In addition, the endline study did not have a control group. Therefore, we are limited in attributing the changes reported by study participants to the male advocate intervention in particular.

Additionally, the nature of qualitative research data collection could result in a social-desirability bias, i.e. respondents answer questions in a way they believe makes them look good. However, this was mitigated
because the researchers conducting the interviews and group discussions are experienced in remaining non-judgemental and objective during interactions with study participants and they were independent of the intervention development and implementation teams thus minimizing the immediate social desirability characteristics during the data collection interviews or discussions.

Since the endline study took place two months after the project had ended, a number of participants did not remember all of the content of every lesson. As a result, some of the answers to the queries about intervention sessions were vague. However, this experience indicates the potential value of several formal follow-up assessments to be conducted soon after the end of the intervention as well as after some time has passed after the end of the intervention to understand both the immediate and short-term changes and transformations as well as the longer term ones inspired by the intervention. However, it is possible that although participants may not remember the details of the intervention content, changes in behaviour and attitudes or norms may endure and would be considered a success for the intervention; however, this hypothesis needs to be tested in a larger trial.

Data collection took place in the period preceding Tet [Vietnamese New Year]. It was a busy time for government offices and local organizations to wrap up their activities and people were also busy with their families. Six facilitators were absent for these reasons. However, the sample size achieved was adequate and a diversity and also great depth of data were gathered.
FINDINGS

Change and transformation inspired by the male club intervention

Perception and understanding of violence against women and girls

Participants’ reflections illustrate important shifts in their views on violence against women and girls, specifically broadening their understanding to recognize multiple types of violence against women and girls. There was also evidence of behavioural transformation, with reported reductions in coercive sex within marriage, improved communication and conflict-resolution skills, and some advancement in how domestic violence cases are handled. These changes are largely positive and encouraging; however, there are some indications that some participants continue to hold onto problematic ideas and practices related to violence against women and girls and these examples will also be illustrated here.

Broadening understanding of violence against women and girls

All facilitators and club members – including those who belonged to the so-called “slow progress” group – agreed that after participating in the intervention they have changed the way they think about violence in general and the topic of violence against women and girls in particular. All facilitators and club members said they had heard of the subject of domestic violence at meetings and activities previously organized by the Youth Union and other mass organizations such as the Women’s Union, Fatherland Front, the Farmers’ Union or via mass media such as TV, newspapers, billboards and banners. All said they previously used to think of violence as purely physical and generally overlooked other forms of violence such as verbal abuse, financial exploitation and sexual violence; however, after their experiences in the intervention sessions, they now recognized these other types of violence against women and girls in the context of intimate relationships and in the public sphere. This finding shows that although legislation on violence against women and girls covering these multiple forms of violence has existed in Vietnam since 2007, the men in this study only fully understood them as a result of the intervention. They also realized that violence against women and girls impacts severely on women’s health, ruins family happiness and hinders social progress. The following quotes illustrate this change in understanding:

“After joining the club, I have learned something about violence against women and girls [and] grasped its causes that I did not understand deeply before. For example previously, when the neighbors quarreled [and] cursed each other, I did not see this and other verbal abuses as a form of violence. Now having joined the club, I understand that these cursing or verbal abuses can be seen as a form of bạo lực tình thân [emotional abuse].”

Club member, retired, aged 62, in-depth interview

“Obviously I have changed myself, though up to now I have never used violence, I have never beaten anyone. But I often felt anger when I thought of something [that did not go my way], not realizing this can be seen as a form of bạo lực tình thân [emotional abuse].”

Club member, retired, aged 57, in-depth interview

“Before taking the course, frankly, I didn’t pay attention to this mental thing, what is called mental abuse. Now having learned this, when there is something in the family that I don’t like, I react calmly; I don’t make a fuss anymore, because that’s no good.”

Facilitator, retired, aged 67, focus group discussion

“We peasants like to think only the husband has the right to spend money. Before, many families used to think like this, they didn’t realize this is financial exploitation. For example if the wife earns two million dong, she hands the whole amount to her husband. She thinks that’s normal, that follows the rule, but really it’s not fair. It’s exploitation because she earns it, she has the right to keep it, for her own expenses. It’s not right to give it all to her husband, [because] when she needs it, she has to ask him and he gives her just a little, bit by bit.”

Club member, farmer, aged 52, in-depth interview
“With regard to certain lessons about violence, for example if you see a young man [passenger] using violence against a woman in a bus, how would you handle this? This is something new because the previous programmes were about domestic violence, mostly about [problems among] ward residents.”

Club member, civil servant, aged 57, in-depth interview

This last quote illustrates not only how participants’ understanding of violence against women and girls has changed but that this change is closely linked to acknowledging and questioning dominant gender constructions, particularly within family or intimate relationships.

Improved communications and conflict resolution

Not only have participants’ ideas and understanding changed, but they also reported changes in their behaviour and practices. Participants often mentioned the improved ability to control their temper in interpersonal relations in the family as well as in society at large. They described the personal and family benefits that they experienced because of applying these new skills and ideas in their lives. One theme of the intervention promoted respectful communication skills including expressing feelings and non-violent conflict resolution, and gave participants opportunities to practice applying these in real-life situations.

“Before I used to be hot-tempered. Now I can control myself, I’m less impulsive. If I disagree with someone [in a discussion], if that person wants to impose his opinion on me, which could lead to friction, I just let it go, or respond in a mild manner.”

Facilitator, factory worker, aged 27, focus group discussion

Reduction in coercive sex within marriage

Participants and facilitators reported specific changes in their understanding of coercive sex within marriage and they described how this change in understanding has led them to change their behaviour. This important change was linked directly to the male advocate intervention.

“Take the case of Mr C, age 70, a former party inspector, who could not tell the difference between gender and sex, consenting and forced sex. We explained this to him that you may not force your wife to have sex when she’s asleep. This is not permissible. After taking the course, he realizes this is no good.”

Facilitator, retired, aged 60, focus group discussion

“From non-consent to forced [sex]: if she doesn’t want it but you deliberately do it, then it becomes violence. It’s when a young guy comes home after a drinking spree, feeling great, the wife vents her suppressed feelings, ‘where have you been boozing the last few days?’... Highly intoxicated, he deliberately forces her even though she doesn’t want it. This happened to me incidentally. Now I have changed. I know my [past] behaviour and correct it. Now our marital relations are good.”

Club member, retired, aged 57, in-depth interview

“In general not only myself but many others think a wife has to serve her husband, in every way, whether she agrees or not, it makes no dif...
I am an impulsive guy, [I think] that if I want it, my wife has to consent right away, if she doesn’t, I scold her. Since I think we are married and I never thought she might be tired. After taking the course I understand, she works the whole day, she’s tired, I don’t insist.”

Club member, retired, aged 52, in-depth interview

“Now if you have your wife’s consent, it creates a feeling of happiness. If your wife lets you because she wants to please you but actually she is tired, she doesn’t want it but doesn’t want to refuse outright, then it’s reluctant. It doesn’t make you happy. If you force her because you think as a husband you have the right to do it when your wife is tired, then it is sexual violence.”

Club member, retired, aged 64, in-depth interview

“Before I just forced her [to have sex]. Since I was young and inconsiderate, I was ‘a bit too much’ to my wife. Whenever I return home from drinking bouts, I think if I want it my wife has to do it. Now I have changed, I would ask my wife whether she would like it or not. I realize that her attitude is different. I feel happier.”

Club member, farmer, aged 52, in-depth interview

These quotes show that many of the men are experiencing how much better it is for them, for their wives and for their relationships to have consensual, non-violent, respectful, understanding sexual relationships with their wives. This transformation indicates that the intervention successfully challenged the commonly held belief that consent to marriage is also consent to sexual intercourse and as long as the marriage is valid, men’s assumed sexual rights cannot be revoked (Gammeltoft & Nguyen 2014).

Self-reflection on violence against women and girls and prevention within families and neighbourhoods

There is evidence that transformation within participants themselves, as well as within their relationships and families, also extended more broadly to the community. It also contributed towards a long-term goal of sustained social change because participants realized that they could be positive role models in their extended families and communities. Club members and facilitators became aware of how an individual and his family can be agents of change in relation to violence against women and girls. They realized that the way they treat their wives, children, daughters-in-law and grandchildren is linked to whether perpetuating problematic norms or changing them to something more positive for everyone. This is an important finding, noting how participants embraced the intervention’s messages and learned skills, sharing them through role modelling and direct engagement with others.

“This course has brought about real change to me. For example, now I realize the rights of women cannot remain unequal [to those of men]. I’m 52, my grandchild is two. The way I treat my children, my wife, my grandchild and my daughter-in-law has changed. I have a certain regard for them. I can’t simply treat them in whatever way I want, just because I’m their father, husband or their grandfather.”

Club member, farmer, aged 52, in-depth interview

In this quote, it can again be seen how changes in violent behaviour grow out of changes in understanding gender and gender equality.

The acknowledgement of various forms of mental abuse and the opportunity to reflect on how to have happy relationships at home and across the community has led to a broader change in behaviour considered to be “more civilized”, according to one middle-aged club member.

“A number of club members said that they have changed their behaviour, like no more smoking in meeting rooms or at public places [and] no swearing or using coarse language in the presence of children at home to set good examples. At public festivals, most people before didn’t show much respect to the elderly. There have been changes in the behaviour of club members. For example at the ceremony to mark the Day of National Unity, we make sure that senior citizens be seated first, we don’t mind standing.”

Club member, farmer, aged 52, in-depth interview
Handling domestic violence cases

The intervention helped participants realize the complexity of preventing and combating violence against women and girls, particularly through addressing the origins and deep-rooted causes of this violence.

“As I understood it previously, preventing and combating violence against women and girls consists of: 1) warning/admonishing against it – that is to prevent it from happening; and 2) combating it, once it has occurred, by using personal authority or local authority to stop the violence. But this is not so. Now I’ve learned that to prevent and combat this [we] have to tackle the root [causes], that is we need to think through it. The way I think of prevention before is like cutting grass blades [without removing the roots].”

Club member, retired, aged 61, in-depth interview

“I have dealt with cases related to DV in the home. I used to do it one way, but now with new ideas and skills from the programme I do it differently. Before [participating in the intervention project], I did not know how to look for the causes leading to these situations and how to handle them to find long-term solutions. Then, it was just like bringing water over to extinguish the fire.”

Club member, retired, aged 57, in-depth interview

All facilitators and club members who participated in this study indicated that they have acquired new knowledge and skills and gained self-confidence in handling incidents of violence against women and girls in their residential area.

“For all club members, and especially young (unmarried) men, they have obtained the self-confidence to handle violence against women and girls in real-life situations.

“Before when handling cases of domestic violence, I just followed my own reasoning [in tackling it]. I couldn’t figure out the logic behind it. After learning these lessons, my thinking has changed. When I invited others to attend these sessions, I talked to them [about the problem], they found it interesting.”

Club member, retired, aged 61, in-depth interview

“After having joined the club, I realized that raising voices only cannot protect women and girls from violence. In doing so, we need to learn protection methods. I still remember the eighth lesson. When a victim of violence against women and girls seeks help from you, you have to believe her, because the victim only seeks help and intervention when she can no longer suffer the abusive situation. As a service provider, you have to protect their confidentiality. You should never let the perpetrator know the location of the stay-away shelter.”

Club member, student, aged 26, in-depth interview

“To deal with violence against women and girls incidents, you should be patient, keep calm in explaining to both concerned parties.”

Club member, civil servant, aged 25, in-depth interview

“The first thing you need to do in the situation of violence against women and girls is you have to separate the couple so that you can stop the violence right away.”

Club member, student, aged 23, in-depth interview

“My next door neighbour has four daughters. The husband comes home and beats his wife and his daughters every day. He accuses his wife of having affairs. My house has become a kind of temporary shelter for her as she tries to escape from her abusive husband. Soon after I joined the club, I reported the case to the local police. The police came and talked to the husband. Since then, he has been less violent to his family members.”

Facilitator, factory worker, aged 27, focus group discussion
The young club member’s approach is proactive and to the point; it holds the perpetrator accountable for his violent behaviour and moves the victim to a safe place.

However, as seen in the quotations below, some of the older facilitators were much more cautious and conciliatory in their approach, opting to maintain the status quo without taking concrete action against the perpetrator. This is not surprising given the fact that most of them are party members and ex-officials who generally follow orthodox policies about the “Happy Family and Happy Village” model4 [Gia đình văn hoá, Làng văn hoá] stressing the importance of the primacy of the family as the “cell” of society (Schuler et al. 2014).

The tendency to opt for a conciliatory approach in cases of violence against women and girls underpins the moral responsibility and social obligations assigned to women as wives, mothers and daughters to endure hardship to maintain a façade of domestic harmony. But this conciliatory option leads to ineffective responses to cases of violence against women and girls and perpetuates a culture of acceptance or normalization of such violence. It also puts women at risk of continued or escalating violence.

Holding onto the idea of conciliation in the case of domestic violence indicates a deeply ingrained acceptance of violence against women and girls and a culture of blaming the victim. These issues need to continue to be challenged in order to facilitate further transformation.

“I was also asked by the ward police to attend meetings with families having [a] violence problem. The police raised the legal aspects of the problem, the Women’s Union also said this is a violation of the law, blah blah. In my opinion, this approach does not take into account the good side of humans. I use a different approach. I evoke the responsibility of the husband, of the father in the family. I would say that recently your family has this problem, it’s a normal thing in life, caused by tensions leading to family frictions. But the husband is still the pillar of the family. If he has a few drinks, the wife should avoid him, stay away instead of pouring oil on fire, saying to him, ‘Ah, you’re drunk again.’ This could only make him angrier. We need the cooperation of the wife as well.”

Facilitator, retired, aged 60, focus group discussion

“They are a young couple: husband 37 years old, wife 35, with two kids. He beat her. Her father came and raised hell. I was attending a meeting of the residential cluster, heard the noise and came over. The wife’s father wanted to call the police. I said: ‘You want to report to the police, go ahead. Now just think, do you want them to make peace with each other, or do you want them to break up, with their children separated from each other?’ Having heard me, he left.”

Club member, retired, aged 61, in-depth interview

Overall, it is very encouraging to see how participants have adopted the intervention’s principles of respectful, non-violent relationships and non-acceptance of violence. They have put this transformation in attitudes into action through changes in their behaviour within their relationships, families, and even more broadly their communities. This social diffusion of the positive changes from the intervention is particularly inspiring.

4 The “Happy Village” policy is a legal document set under Circular No.12 12/2011/TT-BVHTTDL “Happy Family and Happy Village” on 10 October 2011 by the Ministry of Culture, Sports and Tourism (MoCST) where families are rewarded based on a set of criteria stipulated in the circular (enacted in 2011). The criteria have been used to assess families residing in the community. Accordingly, families are expected to have “no domestic violence” and “maintain cultural values of traditional families” where women are expected to keep family happiness. On the basis of its assessment, the leadership determines whether the family should be considered a “Happy Family” and awards it a Happy Family certificate. This certificate is necessary for the family’s reputation among the community and carries strong spiritual values for Vietnamese people. Instances of domestic violence can lead to the family losing this certificate. As a result, women may refrain from reporting cases of domestic violence as they fear the consequences of their family losing the Happy Family certificate and becoming victims of social stigma and prejudice.
Gender roles and norms

Participants’ ability to recognize patriarchal gender norms in their daily lives (especially within their families) improved over the course of the intervention. Several participants also reported finding these norms and expectations on women to be unjust, and noted the related risk for increasing violence against women and girls. This understanding led men to have more respect and appreciation for and less impatience with women and the work – especially the unpaid work within families – that they do. These ideas were translated into practice by men who reported being less demanding and helping more around the home.

All club members and facilitators discussed changes in their perceptions of the social roles expected of males and females in the family and in society as being unjust and now saw them as rooted in traditional patriarchal notions. For example, one participant became aware of the injustice of patriarchal norms and noticed how these norms manifested in his own life and relationship with his wife:

“Our experience is that after learning this [training], I can see more clearly that we have prejudices, we must change certain ideas. This I only speak for myself. I used to think men are the stronger sex, but I also know that women are at a disadvantage. We think that men express their views strongly. And maybe the wife sees this as quite natural. But if we think in terms of relations between humans, then it is wrong. That’s why I treat my wife in less a patriarchal manner. I must respect her because she endures more hardships than me. Imagine while I’m sitting here enjoying my coffee, my wife is at home taking care of two of our grandchildren; she doesn’t utter a word of complaint. I now realize that she loves me so much. I’m so highly privileged. Why didn’t I change my ways long before? I used to live in the countryside, the way of living then was very feudal. Meals were served only to my father, the rest of the family eat in the kitchen. My father was a doctor of traditional medicine. People highly regard his lifestyle, maybe we see it as a good tradition, as the Chinese call it, a fine family tradition. But actually it’s egotism, egotism of the regime, patriarchy, when it serves us, we see it as happiness, but it is the happiness that we men may gain at the expense of others that is not fair at all.”

Club member, retired, aged 61, in-depth interview

Another young club member shared his experience, highlighting how patriarchal gender norms are internalized at an early age but that they can also be changed:

“The traditional belief is that men should deal with important and big things, and as men, they cannot become dependent on their wife economically, and cannot do women things. I think this belief is the most prevalent. For instance when I was at the 11th grade, we had a small gathering at a classmate’s house. Because his mother was busy selling groceries in the local market, his father came home from work and did the cooking. Another classmate of mine who was there made a remark that what kind of man he [the father] is. Only men wearing skirts would do the cooking. A 16-year-old boy already thought that way. He should have joined the club so that he would have changed his attitudes to [the] gender division of housework. In my opinion, it is wrong to think that women should stay home and take care of the children, and men should be the pillar of the house and the breadwinner.”

Club member, student, aged 26, in-depth interview

From the intervention, facilitators and club members have realized the disadvantages women suffer because of socially constructed, patriarchal gender roles. As a result, all of them said they have changed their thinking about the gendered division of housework. They now share the view that it is not fair to let women take charge of household chores alone. All focus group participants said that since participating in the intervention, they themselves engage directly or more actively (for those who always help out) in domestic chores and share the household burden with female household members such as mothers, wives and sisters.

“I used to go drinking heavily after work, now I cut this down. Before if I got home and dinner was not ready, I got irritated. Now I do housework myself, taking care of the children, doing the laundry. I used to think women’s work is confined to the kitchen, now I realize their true value [valuing women and the work that women do].”

Club member, farmer, aged 60, in-depth interview
“After participating in the project, I help my wife with house chores like cleaning the house. I help her when she’s tired. I myself do the laundry, just wouldn’t let her do it for me.”

Facilitator, farmer, aged 54, focus group discussion

It is desirable that men share ownership with women of the responsibilities of household work and childcare instead of believing that they are only helping. However, this step is still a positive move toward transformation in masculinities toward gender equality, and shows that the ideas promoted by the intervention are likely to ultimately prevent violence against women and girls. It is worth noting that participants do not live in isolation and attitudes in their neighbourhoods or communities would influence them. Therefore, it is particularly encouraging that participants said that they themselves don’t mind or aren’t concerned about social gossip or pressure with regard to doing domestic work, which is considered part of women’s work.

“The chores people think I would never do, I just do them quite naturally, like doing the laundry. My daughter-in-law [and] my wife are out working, I do the housework, the whole lot. It’s sharing the workload with other family members, [if I have to do] a bit more [it] is also OK. I never complain, like saying: why [does] a man like me [have] to do the laundry like this? There is solidarity, there’s no ordering people around, like pointing your finger in this peasant household at dinner time, or saying ... ‘just bring the food!’ For me, I clean the dishes and bowls and bring the tray, my wife sweeps the floor so we can sit down [and eat], my daughter-in-law serves the food, shouting: ‘one, two three, let’s eat!’ I myself help out, I don’t just wait to be served.”

Club member, farmer, aged 52, in-depth interview

A more considerate attitude and behaviour toward women – in the family, workplace and community – was expressed by several club members.

“My house is located on the sidewalk. My wife makes her living running a beef noodle stall. Local residents drop by our stall everyday for breakfast. They saw me helping out at the stall, doing the dishes, serving customers, cleaning the floor, and taking my wife to the market. They see all these things that I do. They gave me a nick name as Mr. Nhứt vợ [My Wife is Number One] [smiles].”

Club member, retired, aged 61, in-depth interview

“I help my mother with daily chores, like cooking. I cheer her up when things get rough. Before I was indifferent, didn’t care, kept things to myself. [Now] I treat my female colleagues at the workplace with more consideration... no teasing, no [outbursts of] short temper.”

Club member, professional, aged 28, in-depth interview

Another example, in a rural community where traditions favouring men over women still prevail but are beginning to change, a representative of the Women’s Union commune branch observed:

“Before it was rare to see men going to the market. Nowadays, you see newly married young men going to the market, or taking their wives there [on their motorbikes]. I’m glad to see gradual progress around me.”

Female, DNWU commune representative, key informant interview 5

All club members and facilitators discussed a change in perception around gender constructions and attitudes and behaviour. There seem to be broader changes in gender roles, so this intervention is well-timed to build on and support such changes.

5 The age of key informants is not included here as it is considered identifiable information.
Some club members came to realize that various forms of violence against women and girls are not examples of random victimization, but are associated with inequality between women and men. Furthermore, participants gained insight into Vietnamese perceptions of traditional gender roles which perpetuate or entrench that inequality. This is an important finding given that gender inequality and problematic constructions of gender – for example, hierarchical, rigid roles and harmful masculinities that promote aggression, control of women and sexual prowess – are a core factor that drives violence against women and girls.

“"This course has brought about real change to me. For example, now I realize the rights of women cannot remain unequal [to those of men]. I’m 52, my grandchild is two; the way I treat my children, my wife, my grandchild and my daughter-in-law has changed, I have a certain regard for them. I can’t simply treat them in whatever way I want just because I’m their father, their grandfather.”

Club member, farmer, aged 52, in-depth interview

Married and middle-aged facilitators and club members said that they have changed in the way they parent their sons and daughters and that they now engage more emotionally with their grown-up children. They listen to what their children have to say rather than just scolding them or punishing them for what they perceive as wrong behaviours. They realize that this new attitude brings about an atmosphere of trust conducive to more “heart to heart” dialogues with their children, enabling them to understand their children’s concerns and help them deal with them.

“"One learns these things gradually. I apply [what I learned] in my own family. Early in the morning I told my children – all married – if the wife gets up early, then the husband [should look after] the kids; if grandma is busy preparing breakfast then grandpa should take on babysitting, etc. That’s how I show them the way, turning on the green light... in the old days you couldn’t do that, [now] you have to start the reform yourself.”

Club member, retired, aged 61, in-depth interview

Family relationships and parenting skills

Family relationships and the home were typically the first places in which participants implemented changes resulting from the intervention. Specifically, these men came to see the value of their families and the importance of being positive role models to influence their children’s attitudes and ideas of relationships. They reported engaging in a range of positive parenting practices including emotional engagement and demonstrating love and care, less harsh discipline, and improved communication and conflict resolution.

Club members and facilitators described being more conscious of role modelling equitable and supportive practices in their homes so that their children can see and learn these new ways. It is interesting to note that many of these changes also link to the changes in gender-equitable attitudes and practices discussed earlier. This illustrates how pervasive they are in daily life and how gender norms are transmitted intergenerationally.

“Before when I taught my children at home, I used to beat them. Now I no longer have these fits of anger.”

Facilitator, retired, aged 55, focus group discussion

“I’m myself very hot-tempered. When something happens in the family [that I don’t like], I often raise my voice and use coarse language with my wife and my children, even after they are grown up and go to university. You know I have a loud voice. I never use a microphone when I speak in the meeting halls. But after taking the course, I realize that my hot-tempered behaviour affects the children, it makes them feel inferior to their peers, lose their self-confidence. I’ve learned a valuable lesson from this course: never again scold my children, never shout at them. Honestly, I’ve changed recently.”

Club member, retired, aged 62, in-depth interview

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6 In Viet Nam, “turning on the green light” means to give permission for something to happen.
“Before I used to swear at my children. If my wife or my children did something I didn’t like, I got into a rage. Now I don’t get angry, we have a happy family.”

Club member, retired, aged 63, in-depth interview

Learning to identify various forms of emotional abuse together and strengthening open communication skills, the participants tended to appreciate family life more and were motivated to contribute to family happiness. These quotes also describe an important improvement in non-violent communication and conflict-resolution skills among club members. Participants shared that these changes in attitudes and behaviour in their relationships have led to more fulfilling or happier relationships. Indeed, as the next quotes illustrate, several participants gained a deep appreciation for their families and family life as a result of their experiences in the intervention.

“I also told my children that no matter how busy they are, they must keep their family ties in mind. When my married children come home, the whole family [goes] out to have breakfast or coffee together, or we go out and buy food to cook a family dinner. This is to show we parents really care for our children. I’m myself very proud [because] my children love each other.”

Club member, retired, aged 57, in-depth interview

“Before I used to think that money is the most important thing in life. I thought that way because my family was very poor. I saw my friends who were able to do a lot of things because they had the means. I felt pity for myself, I was determined to make money at all costs. I even dropped out for three years. But I went back to school, realizing that in order to make money you must acquire knowledge. Now I realize that having money is just a means [to get on] in life. Family happiness is the main thing. If you have money but your life is unhappy, then it’s [financial] success but not [full] achievement.”

Club member, student, aged 26, in-depth interview

The change in the thinking and practice of parenting among married and middle-aged facilitators and club members underlines a shift in valuing family relationships and gender related perceptions. In addition, elderly men who are respected by community people can spread a message to different generations, especially within their own extended families. One quotation referred to the fact that change takes time; interventions should be carried out over a longer period in a consistent manner rather than just a burst of one-off activity.

**Promoting volunteerism**

There were many layers of volunteerism in this intervention. Volunteerism was defined by the intervention as any form of formal or informal behaviour or activities for the general public good where monetary compensation or reward is not expected. In this case, volunteerism relates more specifically to preventing violence against women and girls and responding supportively to cases of violence against women and girls. All of the facilitators and club members were volunteers and throughout the intervention, club members were linked to volunteerism opportunities that focused on violence against women and girls advocacy and activism. They were also supported to develop and implement their own volunteerism activities.

As described above under “Understanding violence against women and girls”, club facilitators and members were also inspired to take action and also improve the way they responded to cases of violence against women and girls. This can also be seen as an important form of volunteerism linked to the male advocate intervention. Furthermore, there were club members who, on a volunteer basis, shared their learning experiences with other residents who did not participate in the intervention session, indicating that some level of the intervention messages and skills went beyond the direct beneficiary group to others.

“When you know about it, you explain it, your neighbors will listen, they pass it on to their children. That’s why I see this programme fits well with a progressive society. Life is peaceful now in our neighborhood. At home, there is no quarreling, no swearing among family members.”

Club member, retired, aged 61, in-depth interview
A large majority of respondents had participated in community-based activities held by mass organizations such as those organized by the Farmer’s Union or the Women’s Union prior to participating in this male advocate intervention. Indeed, participation in community events among members of such organizations is strong, as individuals strive to be respected community members, fulfilling important duties and working to be in good standing in the organizations and the community. At the early stage of the male advocate intervention, many club members’ participation was motivated by the same sense of civic responsibility and community norms and pressure to engage in community events or groups.

“Before, somehow I overlooked the problem of violence against women and girls. Now I have to get myself involved; if I cannot do it alone, I [try to] coordinate with the [mass] organizations.”

Facilitator, retired, aged 55, focus group discussion

While they may have originally joined the intervention based on a sense of social obligation, participants reported that they found the intervention’s contents interesting and decided to continue until the end based on personal motivation and the value derived from participation, for example, gaining a clearer understanding about violence against women and girls and what to do about it in their communities.

Mobilization efforts should also take into account that although people’s initial attitudes might be negative regarding the length of the programme, they usually change their minds if their initial experience in the intervention programme is interesting and valuable. Also, since transformation is a gradual process, people need consistent support over a period of time. These themes are discussed more below in reflections on lessons learned from intervention implementation.

Lessons learned from implementation

Rather than a formal external assessment of the implementation of the male advocate intervention, this section presents and discusses feedback from club members and facilitators.

Acceptability

Overall, study participants reported that the intervention was both enjoyable and interesting, as well as useful and necessary, even though it required a lot of their time.

“I was attracted to it. I never missed a class. I was very enthusiastic [and] acquired lots of skills and knowledge.”

Facilitator, factory worker, aged 27, focus group discussion

For most middle-aged club members, their participation in mass organization activities in general (e.g. for the Farmers’ Union and the Women’s Union) and in those related to this project in particular can be seen as a form of volunteerism to serve the community. Several members mentioned the personal benefit of such participation as well as broader benefits in addressing community social problems and needs. Furthermore, there is value in working with existing mass organizations because they are well established with a wide reach.

“I take part in it, it’s like doing voluntary work, I have earned merits for myself.”

Club member, retired, aged 61, in-depth interview

“When participating in these activities, they see it as doing charitable work, accumulating merits for themselves.”

Club member, retired, aged 60, in-depth interview

“When the [male advocate] project began, the Women’s Union asked us to participate because they could not find a lay person all of a sudden. No citizens took part so they had to call on cadres [like us].”

Facilitator, retired, aged 60, focus group discussion
“To tell the truth, at the beginning I told them, ‘let me try out for a while first’, saying ‘it’s too long, I couldn’t really do it’. But once I got involved with the real contents, I found them interesting.”

Club member, retired, aged 57, in-depth interview

Furthermore, facilitators and club members agreed that this male advocate violence against women and girls prevention intervention is practical and beneficial to their essential work [as public officials] and their family life, to the security of residential areas, and in line with government policy, as illustrated by the following remarks:

“From a macro-perspective, the programme fits in with the Marriage and Family Law [and] the Domestic Violence Prevention and Control Law. This is a good supplement [value added].”

Facilitator, retired, aged 72, focus group discussion

“This subject is relevant to the people in our residential area, relevant with regard to the knowledge of the problem and how to deal with it. After learning this, we will pass it on to our fellow residents. In our area, [these incidents] occur quite often, given the difficult economic situation. Most residents are low-paid workers living from hand to mouth, having a low level of education. Life’s hardships lead to frequent conflict, especially among young couples with one or two children.”

Club member, retired, aged 57, in-depth interview

In the view of a Women’s Union representative at the commune level, focusing on the role of men in prevention of violence against women and girls has received little attention in previous violence prevention programmes, so this intervention was welcome.

The quotation also illustrates that patriarchal norms are a core problem underlying violence against women and girls.

“The project receives strong popular support since it focuses on men. These are the ones who needed to be advocated. The model is worth the effort to set up and run. We should bear in mind that this is an agricultural commune, where cultural traits from the feudal era still persist strongly. A husband slapping his wife is seen as quite normal and if she reacts, his mother or grandmother simply drown her out verbally. There are three to five incidents every week.”

Female, WU commune representative, key informant interview

One club member pointed out the potential waste of human resources caused by violence against women and girls and stressed the importance of mobilizing local people in violence against women and girls prevention activities. Indeed, while work to respond to violence against women and girls is fairly common, even in low-resource contexts, primary prevention is relatively new and it is encouraging to see participants recognize the value of prevention work.

“First, the family is spared of a heavy [economic] burden. For example, if a wife is battered, she has to go to the hospital and stay there for a week. The society also suffers. It’s not just only you. Even though you have the money, you pay the doctor, but the doctor spends time on you, thus keeping him from helping others.”

Club member, retired, aged 60, in-depth interview

Participants and community members described that the participation of community leaders in the intervention reflected very positively on it, and showed that it was valued and accepted by local leaders. Facilitators observed that since the time the male advocate project was implemented, there have been positive developments regarding the social order in the intervention communities.
“At meetings of the residential cluster, we incorporated violence against women and girls in the agenda. Seeing the local leadership participating in the project, residents followed their example. Nowadays, it’s peaceful in the residential cluster. There is no drinking problem among young males.”

Facilitator, farmer, aged 54, focus group discussion

**Participatory methodology**

Club facilitators and participants were enthusiastic about the way club activities were facilitated. In their view, this approach enhanced the effectiveness of the intervention. In particular, participants and facilitators appreciated the participatory learning methodology of the intervention sessions, which created a favourable environment which allowed group members to exchange ideas and share experiences.

“This project is concrete. Each participant presents his own view, followed by discussions [and] then a solution is put forward. This way of learning and [role] playing is more effective.”

Club member, civil servant, aged 57, in-depth interview

Furthermore, participants appreciated the non-hierarchical structure of the intervention sessions. Fellow community members were facilitators but took an egalitarian approach where all participants were encouraged to share their views on the topics in each session. This is an important aspect of the intervention where respectful, open communication and egalitarian relationships within the intervention sessions are part of the experiential learning. They also demonstrate the kinds of intimate and family and community relations that this intervention is seeking to promote. Also, being able to freely engage in discussion and debate on the topics helped participants retain ideas and skills, and change their mindsets better than if they had been subjected to a didactic lecture only.

“This project is concrete. Each participant presents his own view, followed by discussions [and] then a solution is put forward. This way of learning and [role] playing is more effective.”

Club member, retired, aged 57, in-depth interview

In addition to the participatory learning methodology, many facilitators and club members highly valued the inclusion of relaxation activities and games in the intervention sessions or meetings. They noted that they were essential to their learning in the intervention. Through the participatory learning methodology of the sessions as well as very specific activities and games, participants were given multiple, experiential learning opportunities that were both enjoyable and effective.

“In previous training courses, the trainer just gave us a pile of documents and introduced the contents, it [was] up to us to apply what we see fit. That way of learning is not easy for trainees. Those who manage to grasp [what has been taught] keep it for themselves. The present way of learning in groups, each putting forth his own opinions, is excellent.”

Club member, retired, aged 57, in-depth interview

In all the in-depth interviews for this study, none of the club members complained about the games. Criticism of these games was voiced at one focus group discussion by some senior facilitators of an urban ward. At another focus group discussion with senior
facilitators of the semi-urban commune, all participants showed their appreciation of these games. Games involving movement were used. It is recommended to show some flexibility with them and offer different versions for club members who are older, or simply encourage club members to do what they can but not expect perfect execution of every game.

“Should cut down routines such as moving around and dancing in circle because this is not appropriate. If this normally takes 15 minutes, make it just 10 minutes for older members. Let them do, for example, [a] simple warming-up exercise. For older people, there’s no need for long [sessions], it should be succinct.”
Facilitator, retired, aged 67, focus group discussion

Both facilitators and club members affirmed that from the intervention they learned not only positive relationship-building skills but also the skills to work in groups, to make presentations in public, to have an analytical mentality, and to be more confident and proactive in community activities. Thus, the intervention appears to have contributed positive impacts in personal and community development. A key informant observed:

“From barefoot farmers, thanks to the club activities, they have become a kind of lecturer capable of transferring knowledge to others, they can make a presentation in front of a crowd. Their conscientiousness and participation is heartfelt and admirable.”
Female, WU commune representative, key informant interview

The participatory approach, along with having community members as facilitators, meant that members were learning from one another and enjoyed the interaction with their friends and peers from the community. Participants also felt that the learning promoted through this style of intervention would be more sustainable.

Facilitator manual

Also related to the generational gap, some male senior citizens tended to be uneasy when dealing with “delicate” subjects such as sexual relations and sexual and reproductive health. As noted by participants, it is not recommended to remove these subjects because they are essential to the intervention and clearly prompted important changes among participants (e.g. reduction in coercive sex in marital relationships). However, perhaps the older age group needs more time to discuss these topics with a slow and gradual approach.

“I remember in lesson 11 or 12, when they mentioned the case when the wife doesn’t want [to have sex] but the husband still tries [forced sex], it caused an uproar among the participants. In reality, this thing does exist, it’s the deeply hidden core of the problem. However, since the participants in this course are all senior citizens, these lessons are a little crude.”
Club member, retired, aged 57, in-depth interview

“Take, for example, the part about family planning, if you are a doctor, this is OK, but then you are not a doctor. For example, they show the male organ to illustrate [a point] and also the female reproductive parts. Lessons are necessary but we can change the examples to avoid strong aversion [from the participants]. In our culture, one should not be too crude when speaking about these things. I think these texts were written by foreigners. When offering a Vietnamese version, one should present it in a figurative way. For me, it’s no problem because I have been around. But these senior people have never left their homes [travelling much], this is a big shock, they will not come back.”
Club member, civil servant, aged 57, in-depth interview

These illustrations were in the appendices of the facilitator guides and meant to be for the facilitator’s information only, and not for distribution to the participants. It should be noted that both Vietnamese and international experts were deeply involved in the process of developing the intervention manual. The national team worked hard on this and used existing graphics from other intervention guides. In addition, other similar intervention materials had previously
been accepted by parent clubs in other components of the larger UN Women and DNWU-supported violence against women and girls prevention programme.\(^7\)

Some facilitators thought that the contents of the teaching materials and the way they are written is not really suited for Viet Nam’s cultural and linguistic backgrounds.

“The handouts are prepared and aiming at a large number of people, but sometimes their level is too advanced, making it difficult [for the general public] to understand. They should be made simple for a general public.”

*Club member, civil servant, aged 57, in-depth interview*

“Up to now, I’m not satisfied with the materials. The reason is that they were written by foreigners and translated by some of our ladies. We should ‘Vietnamize’ these materials. We have read and made suggestions but the wording is still not OK. Still using sentences in passive forms as in English, instead of using active forms in Vietnamese. That’s why we, as facilitators have to study them [the materials] beforehand and interpret them in our own way. It often takes us two to three days to prepare.”

*Facilitator, retired, aged 67, focus group discussion*

The development of an intervention is a long-term and complex process. More work is needed to further strengthen the intervention manual so that it stays close to core effective approaches, skills and topics, while remaining appropriate, relevant and accessible to the context and the actual users of the manual (intended to be the facilitators and not the participants).

The above quote also reveals the amount of time facilitators spent preparing for each class session, which is typical in the first round of facilitating an intervention. It seems that facilitation is a demanding task and that good, thorough preparation for sessions is essential. This time commitment must be made clear from the beginning.

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**Mobilization and recruitment**

Informing communities about the intervention, getting their buy-in and getting eligible people to commit to participating in the intervention is essential. But these processes are often overlooked. This intervention capitalized on existing mechanisms to implement the project and deliver the sessions directly through core cadres\(^8\) in the community. Even so, these people had to be motivated and encouraged to join the project. Most facilitators and club members already had local experiences with mass organizations’ activities by the time they joined the project.

“Generally speaking, the way it is organized is optimal because core cadres are usually people who are better suited for these activities than ordinary citizens. Nowadays, core cadres on assignments have to set [an] example to mobilize the citizens. For example, the secretary would give his opinions to explain [and] clarify [the problems]. Since the programme is organized by the local authorities, the residents will follow. They listen to the secretary and the head of the residential cluster, same thing with the [Fatherland] Front. Therefore it would be easier for us to intervene if there is a conflict.”

*Facilitator, retired, aged 55, focus group discussion*

The personal background of the participants in this project reflects that local authorities wanted to see a successful outcome of the project as part of their political duty. The strategy is based on the premise that since the intervention is organized by the local authorities, it is capable of mobilizing the participation of local residents. Participation relied on a particular group of residents: core cadres at community level. These are people who share a high sense of responsibility. They are relatively well-educated, financially comfortable and have enough time to engage in the project activities, as illustrated by the following quotes:

“Anyway, since we have worked at the community level, therefore we take our responsibility seriously. We are able to interact with the authorities and other organizations.”

*Club member, retired, aged 55, in-depth interview*

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\(^7\) Parent clubs were organized in project areas under Group Activity 4: Develop and apply “Safe community – Friendly School – Equal Family” of the overall project’s Pillar 3: Mobilizing community members (DEPOCEN 2016).

\(^8\) In the political context of Viet Nam, core cadres are persons or groups who are the mainstay of an organization or social movement.
The facilitators and club members were selected from a list of core cadres by the authorities from higher up in the Women’s Union. This selection has obvious advantages. These core cadres enjoy certain respectability in their community owing to their social position and on account of their seniority in age and experience. Given adequate training, they could become agents of change by engaging directly and or indirectly with other social groups in efforts to prevent violence against women and girls.

By focusing on the group of core cadres, mobilization and recruitment was achieved quickly, allowing the implementation phase of the intervention to commence; therefore, both time and resources were saved by taking this approach. However, there were some limitations to approach as well. Most club members were senior local cadres; there was a notable absence of younger community members who are not necessarily core cadres.

Recruiting participants from other social groups, such as low-income working young men, would take more time and effort because these men are mainly preoccupied with earning their livelihood, and thus might have little time and energy left for other activities. It should be mentioned that from individual interviews and group discussions, respondents generally agreed that young men with little education and working at the low end of the labor market constitute a group that should be targeted in future implementation of the male advocate intervention. According to study participants, these young men usually are ill-equipped to deal with interpersonal problems exacerbated by livelihood hardships – a situation that easily fuels acts of violence. However, it is not easy to recruit members of this group to join the project and the highest-risk members of a community are often the most difficult to reach, as indicated in the following remarks:

“A key informant at the district-level commented on the discrepancy:

“They are core cadres, their level of knowledge is OK, that’s why they get good results in the training.”
Facilitator, retired, aged 67, focus group discussion

“They are better off economically because they all receive pensions.”
Club member, retired, aged 61, in-depth interview

“The most violent guys are the ones most difficult to invite over.”
Club member, retired, aged 55, in-depth interview

A key informant at the district-level commented on the discrepancy:

“Most club members are older people. This makes it ineffective. Because older people are less inclined to cause violence, we should focus on young people.”
Facilitator, retired, aged 60, focus group discussion

“WU came and asked us [to join the project]. We agreed just for fun, having no clue how long it would last. Never thought it dragged on a whole year.”
Facilitator, retired, aged 60, focus group discussion

“Those [local residents] who are knowledgeable get more benefits, their perceptions get sharper. Those who are ignorant only sink deeper, like slipping through the net.”
Female, WU district representative, key informant interview

It is important to consider this issue and find ways to engage these young working men in future projects. It is possible that a different kind of intervention – such as the Creating Futures/Stepping Stones intervention model (Gibbs et al. 2017; Jewkes et al. 2014; Misselhorn et al. 2014) – is needed to engage these men.

It should also be pointed out that the commune authorities in Da Nang drew up the list of facilitators and participants in a top-down manner without consulting at the grassroots level. This created uncertainty among would-be facilitators who were unsure about the objectives of the training course when local organization representatives approached and asked them to join the project.
Findings from focus group discussions specifically reveal that facilitators were not fully informed of the subject or the time commitment during recruitment.

“At the beginning of the training course, potential facilitators should have been informed of the training objectives so that they would have taken it seriously and listened [to the lessons] attentively. For some participants, they did not know that they would be selected to become the facilitators of the local club activities later, so they did not take notes in detail.”

Facilitator, retired, aged 67, focus group discussion

There was also an important suggestion to explain the nature of the intervention in more detail during recruitment. It was also suggested to frame the issue positively for both potential facilitators and potential club members because “violence against women and girls prevention” elicited anxiety and misconceptions. It did not necessarily motivate them to join, whereas focusing on individual, family and community benefits and harmony may be more effective. Some participants said when they first heard the term “violence against women and girls prevention” they hesitated because they were afraid of getting into trouble, thinking that prevention is direct intervention in incidents of violence against women and girls.

“I think when making advocacy against violence against women and girls, we should use an indirect approach, place it in other contexts to make it more attractive to the public. That is to incorporate it in the forms of selling a story, contextualizing it in order to attract the participation of [local residents]. Simply mentioning prevention and combating violence against women and girls just will not work.”

Facilitator, retired, aged 55, focus group discussion

An alternative name should be found for a future project – something more engaging and appealing, positively framed. Furthermore, mobilization and recruitment efforts need to engage potential members over time to build interest in and enthusiasm for the intervention. It seems that a lack of a participatory and consultative approach in recruitment led to a low attendance of club members, especially among the young ones, as described below:

“There were meetings with only five to six people showing up. The facilitators were disappointed. Young people stayed away, or they might just come but left quickly. A guy from the Veterans Association came but didn’t join the class and quickly left. Someone from the Fatherland Front came and vented his frustrations by asking thorny questions, kind of challenging the facilitators.”

Facilitator, retired, aged 55, focus group discussion

This comment suggests the need for more capacity-building among facilitators which includes both pre-service and in-service training as well as ongoing mentoring, support and supervision. Specifically, skills are needed to deal with challenging participants and questions and to engage diverse participants. Implementing organizations should also consider how best to schedule the sessions so that participants are easily able to attend. As discussed in the earlier section on “acceptability”, participants found the intervention enjoyable and even participants who were skeptical at first returned to sessions because they found them useful and enjoyable.
Having seniority and a good social position alone does not mean that educating young adults on preventing violence against women and girls will be easy. Some facilitators and club members expressed concern about the generational gap factors such as lack of empathy, and differences in social and economic backgrounds that might hinder young working men’s participation. It is possible that the age gap also presented a traditional hierarchy that can be a challenge in a participatory intervention approach.

“We are in our 60s, 70s or 80s. Our empathy is not the same as the empathy of young people. Young people of the 20 to 30 age group communicate with each other more easily. You and I are about the same age, we can talk with each other easily. But if you talk to someone who’s much younger, the dialogue is difficult. People of the same generation have more empathy for one another. If we let the senior citizens deal with them [the young adults], just politely nod: ‘yes, yes,’ [we’ll do as you say]. But behind your back, they still behave as before.”

Club member, retired, aged 57, in-depth interview

This intervention was conceptualized to engage specifically with men because men’s active involvement in the prevention of violence against women and girls is key and because in earlier formative community engagements for the broader violence against women and girls programme, community members expressed a wish for a space specifically for men only where they would feel more comfortable to engage on these topics. However, both facilitators and club members said that the absence of women at club meetings was regrettable.

“After taking part in the club’s activities for some time, we men became so bored, we wish there would be women there to interact [with]. In the club activities, sometimes the opinions expressed by men are too subjective [one sided]. The participants showed little regard for them. Women come to the meetings on time, they do not fool around like men.”

Club member, retired, aged 61, in-depth interview

All respondents expressed the view that the attendance of women would make discussions more exciting and more comprehensive, especially bringing in the women’s perspectives. Indeed, the approach of working with men and women together is recognized as an important strategy in interventions for the effective primary prevention of violence against women and girls (DNWU, 2016; Raising Voices, 2015).

Management and planning

The efficiency of the intervention has a lot to do with the coordinating efforts of the DNWU. As a DNWU official puts it: “This is a political obligation incumbent on the local authorities, hence the concentrated efforts.” As the coordinating agency, DNWU was able to engage the active participation of the local authorities at various levels in developing and implementing the project, in particular local officials who were also representatives of the Da Nang Committee for the Advancement of Women.

Facilitators and club members expressed their appreciation of the high sense of responsibility and devotion of project staff. Since this was a small-scale project, it was possible for DNWU to coordinate its implementation directly with two Women’s Union branches and local authorities at the commune/ward level where the pilot club model was carried out, thus bypassing district-level bureaucracy and saving time in the process. As a representative of local authorities puts it:

“If the project had to go through the district level, it would be fragmented and cost time. Then the commune would have to report to various levels [of authorities]. The way it was organized was very efficient because it only had to report to DNWU.”

Female, People’s Committee commune representative, key informant interview

It should be noted that bypassing Women’s Union authorities at the district level does not mean that these authorities were not kept abreast of community-based violence against women and girls activities. For example, in the male advocate project, district Women’s Union representatives were invited to attend some of the community activities, although they played no part in planning and implementing the project.
The project was implemented at two sites under the direct guidance of DNWU, bypassing the district authorities and the Women’s Union. This implementation plan led to restrictions in engaging other departments and agencies to lend support to the project locally. All three representatives of the district authorities and the Women’s Union shared the opinion that the project would benefit more if the district authorities are implementing partners, which would potentially result in higher participation rates, wider dissemination and linkages across programmes which may improve the impact and sustainability of the intervention. These recommendations should be considered along with the potential weaknesses of a top-down approach discussed earlier.

“If the district is involved, district [authorities] will link it up with the district programme, there will be no overlapping. If the district chairman sends out invitations, other local bodies may feel it is mandatory to get involved; if they would not take part in it, they might be reprimanded by the district chairman. If DNWU sends out the invite, they may take it as optional. They may come if they find it interesting. If they do not attend, DNWU cannot reprimand them.”

Male, People’s Committee district representative, key informant interview

Some facilitators expressed their concern about the process of project implementation.

“The local [party] chapter doesn’t know, the secretary doesn’t know, the cluster heads don’t know. When we receive the invite, we just go, partly because we are already working at the grassroots. If the party doesn’t grasp the problem, how can we take action?”

Facilitator, retired, aged 67, focus group discussion

The rather harsh reactions of some facilitators might have something to do with the way the project was designed in bypassing the usual administrative hierarchy, which they regarded as “abnormal” and “unusual”. It should be noted that local authorities were consulted and signed agreements to form these male advocate clubs; however, this may not have been clear to all stakeholders, which lead to some confusion and uncertainty.

“From the beginning, I saw there was something abnormal or unusual in the way this was organized. Why not engage the [local] government right at the start, since this is a Women’s Union thing. Lots of official documents but real action from [local] government was very little. The voice of the local party chapter was absent. This is an activity having a foreign element. Now you leave me to my own devices. What if the police come and make enquiry? How am I to respond to that? If something unfortunate happens, if they suspect me and resort to party discipline, then I’ll be damned.”

Facilitator, retired, aged 72, focus group discussion

10 In the Vietnamese political system, the Communist Party of Vietnam is the ruling political party and has centralized control over the state, military and media. At local levels, the party plays a strong role in directing activities of the local authorities and communities. Activities with international organizations are carefully reviewed and approved by the government before being implemented. In the case of a project with overseas development assistance funding, as the implementing partner, the Da Nang Women’s Union is responsible for submitting and get approval from the city level to start the project. This project was approved by the city and the commune/ward People’s Committee before it started. There was no requirement that it needed the approval from the local party.
These remarks indicate that the invitations to join the intervention were sent directly by the precinct authorities to prospective facilitators without properly informing the head of the residential cluster or the party cell’s secretary. This facilitator expressed concern that this “short cut” approach might cause difficulties for them in their grassroots work because these officials were not aware of their activities and thus might not facilitate their work. This situation is illustrated by the following example:

“I see that there is no synchronization yet. We can do well at the low level, but fail at the middle and higher levels. For example there is a ‘green project’ in Da Nang. The authorities in Phuoc Ninh ward urge residents to separate their garbage. Each household is given three baskets with different colours. The residents oblige but when the female collectors come along, they just dump everything into the truck. Same thing happens with this project. We explain nicely and they [the trainees] learn well, but when they go back in the larger community, these same people go back to their old chaotic ways. There must be change in the subconsciousness of the leadership, in the law provisions. There is a need for synchronization. Piecemeal action like this is wasteful and goes back to zero."

Facilitator, retired, aged 60, focus group discussion

All these facilitators’ comments suggest that there were misunderstandings. The situation was far more complex than understood, with political undertones and requiring efforts and adjustments to mobilize communities, participants and authorities at multiple levels. This should be taken into account in planning future activities as part of the larger UN Women programme on violence against women and girls prevention. This feedback also points to the need for making facilitators aware of the many other components of the UN Women programme so that they can see how their work is part of a bigger whole.

The facilitators’ comments indicate that they are aware of and interested in the bigger picture, and express their desire to make this work successful and sustainable on a large scale. This bigger picture also links to the ecological framework which suggests that violence against women and girls is influenced by a complex array of interconnected factors across individual, relationship, community and macro-social levels (Fulu et al. 2013, Heise 1998) and thus, prevention efforts must also span across these levels in order to effect deep and sustainable change.

The location or venue for intervention meetings should be carefully considered in order to promote accessibility to participants. Intervention sessions were held centrally at the [offices of] the People’s Committee. This made participation more difficult given how spread out the rural commune is, as a facilitator put it:

"The commune has 15 hamlets while the club activities [were] concentrated in a certain area. When the project is put into practice, the participants were not able to make contact because they belong to different hamlets, making their attendance at regular meetings difficult. To hold activities at the Cultural House or at private homes would create more closeness, this may draw residents to come; in rural areas, there are few entertainment opportunities as compared with the city. But here, community cohesion is greater."

Facilitator, farmer, aged 63, focus group discussion

**Transformation takes time**

All study participants shared a view that the process of change is complex and a product of many influences. All realized that changing perceptions toward gender equality is the key to eliminate violence against women and girls. In addition, some of the facilitator leaders identified a group of club members who they considered to have made “slow progress.” During interviews, however, it became clear that even this group experienced important shifts in their thinking.

It must be remembered that this intervention tackled deeply entrenched social norms, such as gender inequality and harmful conceptions of masculinities and the violent behaviour that grows out of them. These kinds of interventions are complex and aim to spark meaningful and sustained change among participants and encourage continued growth and transformation among them as they continue to think about, discuss, and change practices beyond the life of the intervention, which follow-up studies should
investigate. Most effective primary prevention interventions to date have shown outcomes that illustrate gradual change after intensive intervention efforts (e.g. Abramsky et al. 2014, Jewkes et al. 2008 and Pronyk et al. 2006). Therefore, these findings of slow transformation are not unique to this intervention or the Vietnamese context but are important to note, especially for strengthening and scaling up ongoing interventions, as well as for planning and future research.

“I appreciate [the part about] the shifts in people’s perceptions. People change their perception; such an act [violent behaviour] comes from perception, once you have the [right] perception, you can control such an act or slowly get rid of it. Taking part in this programme helps discard the negative things, it helps make life better.”

Club member, student, aged 26, in-depth interview

Some participants noted the importance of sustaining the positive changes borne out of the experiences of the intervention. They described how practising changes in behaviour can eventually result in important changes in social norms.

“We [should] try to turn this into a habit. Once it becomes a habit, it will endure, and eventually become a natural behaviour.”

Club member, retired, aged 55, in-depth interview

All facilitators and club members saw it as their responsibility to continue to meet as a group and to share and transfer the knowledge they have acquired from the intervention to a larger number of people in their own community who did not participate directly in the intervention sessions or meetings.

“We have to go on meeting regularly to exchange [experiences]. We are professed club members. We are cadres. Then we have to fulfil our duties as members of the club whose objective is to spread advocacy [against violence against women and girls] among the populace.”

Club member, civil servant, aged 57, in-depth interview

Both facilitators and club members reported that through their volunteerism activities in the community, the male advocate project has had a ripple effect resulting, in their opinions, in reducing the prevalence of physical violence against women and girls. However, several participants noted that more is needed to truly drive widespread, sustainable change across the community to fully prevent all forms of violence against women and girls. Indeed, several facilitators and members emphasized the importance of continuing education, transformation and advocacy efforts, not only for local residents but also for themselves in order to sustain the changes that resulted from and during the intervention.
All male advocate intervention facilitators and club members described experiencing several important changes in their understanding, attitudes and practices related to violence against women and girls, gender roles and norms, families and parenting, and volunteerism. The findings are briefly summarized in the table below:

<table>
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<th>Theme</th>
<th>Changes</th>
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| Perception and understanding of violence   | • Understanding different forms of VAWG, especially emotional, economic and sexual intimate partner violence  
  against women and girls (VAWG)            | • Understanding different forms of VAWG, especially emotional, economic and sexual intimate partner violence  
  • Reduction in emotional and sexual intimate partner violence behaviour resulting in greater personal and relationship happiness  
  • Better control of temper and use of non-violent communication and conflict resolution skills  
  • Improved handling of DV cases (including greater confidence to confront it) focused on women’s safety and holding perpetrators responsible; however, some of the older participants continued to believe in a conciliatory approach which is likely to be ineffective in that it perpetuates acceptance or normalization of such violence, and puts women at risk of continued or escalating violence  
  • Understanding that preventing VAWG is complex and successful approaches must address the underlying causes of it |
| Gender roles and norms                     | • Awareness of patriarchal norms, how these manifest in their daily lives, and that they are unjust and increase VAWG  
  • Regarding and treating women as fellow human beings rather than inferior or weaker  
  • Understanding how much unpaid work – primarily housework and childcare – women do  
  • Increase in respect for, and acknowledgement and appreciation of women’s work  
  • Being less impatient and demanding of women  
  • Helping with work in and around the house with a realisation of the value of sharing all labour, regardless of peer or community backlash  
  • Putting changes in understanding, attitude and behaviour into action in the family and home |
| Family relationships and parenting skills  | • Prioritizing family and doing things to demonstrate and grow love, care, and connectedness  
  • Role modelling equitable, non-violent relationships  
  • Increase in emotional engagement (e.g. listening and having open discussions) with children which led to building trust and understanding  
  • Less harsh emotional and physical discipline (including corporal punishment)  
  • Improved communication and conflict resolution |
| Volunteerism                               | • A clearer understanding of VAWG and ideas of what to do about it  
  • Realising the potential to be agents of change through role modelling in their families and communities through their own changed attitudes and behaviours, as well as actively encouraging others to think about and try to do things differently  
  • Addressing DV cases in the community  
  • Finding volunteerism to be personally rewarding |
It is particularly encouraging to see changes in attitudes and understanding, and, most notably in behaviours and practices. It is also interesting that participants linked their transformation in understanding and attitudes with behavioural changes; they attributed this change largely to their experiences and learning in the male advocate intervention.

Indeed, the promise of the impact of this intervention should be considered in the context of the theory of change. Engaging men and boys is generally accepted as an important and effective strategy in sustainable prevention of violence against women and girls, particularly within a multifaceted intervention approach that seeks to transform the problematic or harmful social norms underlying violence against women and girls (DFID 2012, Edstrom & Shahrokh, 2016, Fulu et al. 2014, Heise 1998, ICAI 2015; Jewkes 2002 and Santos 2015). These social norms include: acceptance and widespread use of multiple forms of violence; and patriarchal constructions of gender and hegemonic masculinities (Fulu et al. 2014; Jewkes 2002). Additional key risk factors include lack of healthy relationship-building skills, poor mental health (e.g. depression and substance use) and poor help-seeking (Fulu et al. 2014).

The theory of change for the male advocate intervention sought to address and transform these problematic social norms and risk factors among a critical group – namely, men – and equip them to have healthy, non-violent interpersonal relationships and gender-equitable attitudes and behaviours. The experience with this intervention suggests that engaging men was successful and working with older men was the most feasible because they had the most time available and strong obligations to participate, related to their roles as senior cadres. These men were also held in high esteem in the community and thus could be a critical group to influence change across the community.

However, engaging younger men and also potentially women was noted as needed to expand the impact of this intervention. A larger impact on social norms would be facilitated through social diffusion, whereby the initial direct beneficiaries were supported to contribute to a larger enabling environment through volunteerism that demonstrated and advocated for transformation in their communities. It is clear from the qualitative data that the men involved in the male advocate intervention experienced the hypothesized transformations and in various ways transmitted these changes to their families and wider communities. However, it should be noted that there was no data to support conclusions on mental health and help-seeking, suggesting a possible area for further exploration or to strengthen a potential intervention.

In addition to these important findings and their encouraging alignment with the theory of change, it is also important to consider the lessons learned from implementation. Participants all enthusiastically reported how much they personally enjoyed the intervention and found it interesting, useful and relevant to their daily lives, and also saw its alignment with national policies on violence against women and girls. It was also encouraging to see local leaders and mass organizations – most notably DNWU as the implementing organization – supporting and driving this intervention.

The participatory learning methodology – a key approach in other effective violence against women and girls prevention interventions globally (Abramsky et al. 2014; Jewkes et al. 2008; Pronyk et al. 2006) – was identified by participants as central to their transformation. The non-hierarchical, comfortable atmosphere of the club meetings allowed for participants to exchange ideas and share experiences freely in order to learn from each other. In addition, the integration of games and relaxation activities helped to relieve tension and keep everyone engaged in the session, although some older men did not always enjoy the movement games. This method helped to keep participants interested, made sessions enjoyable, and made it easier to learn and remember as well as apply what they were learning outside of the group. This intervention approach also facilitated skills development because participants gained confidence in public speaking, critical thinking and proactive community involvement.

Implementing this intervention through a mass organization such as DNWU and core cadres meant that mobilization and recruitment was efficient with good levels of participation. This perhaps in part owed to individuals’ sense of social obligation and commitment to be in good standing with the organization in their communities. Furthermore, with the endorsement of a mass organization, the intervention enjoyed almost instant credibility among many cadres. However, some participants were wary at first because the traditional government engagement procedures and signs were not clear.
This strategy has both strengths (already mentioned) and weaknesses. One drawback is that some groups of men may be missed, especially younger men. Furthermore, there was some confusion among facilitators about the nature of the support from mass organizations and local authorities. Thus greater coordination and partnership across authority levels and organizations would be helpful to address this and could potentially increase the reach of the intervention.

An important reflection on what was shared by several participants is that transformation takes time. Indeed, some participants still held on to problematic attitudes and practices, seeing gender equality as a threat and advocating for leniency in DV cases. Nevertheless, the overwhelming trend was toward positive change. That is an important development. The social norms addressed in this intervention are deeply ingrained in individuals and societies, so it is not surprising that changing them requires an intensive effort as well as ongoing multistakeholder support and activism. Most effective interventions have been those that are implemented consistently over a long period (e.g. SASA! [Abramsky et al. 2014], Stepping Stones [Jewkes et al. 2008], SHARE [Wagman et al. 2012] and IMAGE [Pronyk et al. 2008].

It is worth discussing that facilitators, recruited from communities, need to go through their own transformation process similar to participants, both before and during the process of implementing the intervention. Therefore, it is essential to allow the time to facilitate this transformation so that facilitators fully understand and embrace the intervention principles, values and skills. Not only will they be facilitating such a process for others but they will also be seen as role models in their daily lives because of their role as facilitator. Just as it is recommended for participants, facilitators too need ongoing support and nurturing through their personal transformation.

The encouraging strides made during this intervention is evidenced in the reports and reflections of intervention participants and facilitators as well as local key stakeholders. This suggests that the intervention warrants further rigorous evaluation to understand the level of its effectiveness in sustainably transforming problematic social norms and eliminating violence against women and girls. This would also inform scale-up strategies. Such evaluations and future scale-up should consider the multicomponent, whole community model because it is crucial for allied interventions to be implemented across the ecological model and across sectors in order to achieve lasting success: safe and vibrant homes, schools, communities and societies for all community members, and especially for women and girls.

**Implications of findings for strengthening the intervention**

<table>
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<tr>
<th>Findings in report</th>
<th>Implications for intervention</th>
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| After a year-long intervention, some participants still had problematic patriarchal attitudes while others were at different stages of positive transformation. | • Continued interventions in communities should be implemented. Although this intervention has made good progress, patriarchal attitudes are deeply entrenched and take time to change.  
• Consider how to engage men who hold particularly strong gender-in equitable and patriarchal attitudes and equip facilitators with the skills to engage these men and inspire their transformation.  
• Conduct more rigorous research to understand specific changes driven by specific components and to measure behavioural change. |
| Participants realized that people learn these things and then put new ideas into practice gradually | • Plan for relatively long interventions implemented over a substantial period of time. Change and transformation is gradual so people need consistent and regular support over a period of time, so do not plan once-off or brief interventions.  
• Include activities that give participants opportunities to put their learning and new skills into practice.  
• Communication campaigns are unlikely to work.  
• Engage in deep and ongoing work with facilitators to support their transformation and capacity, as they will pass this on to club members. |
<table>
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<tr>
<th>Findings in report</th>
<th>Implications for intervention</th>
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<tbody>
<tr>
<td>Facilitators and club members were initially put off by the length of the</td>
<td>• Do not compromise the duration of the intervention but rather focus on strategies to pique participants’ interest and then get them to attend sessions.</td>
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<td>intervention, but once they began they enjoyed the sessions and found them</td>
<td>• Plan for a labour and time-intensive intervention approach including motivating facilitators and club members to participate in the full intervention because all of the leading evidence suggests that these types of interventions are most effective.</td>
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<td>valuable.</td>
<td>• Future research should investigate what components and length of an intervention are best to achieve lasting change.</td>
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<td>Participants enjoyed and learned better from a participatory approach in the</td>
<td>• Maintain the participatory learning approach.</td>
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<td>intervention sessions</td>
<td>• Build facilitators’ capacity to guide participatory intervention sessions, particularly through participatory training and supervision sessions.</td>
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<td>The majority of participants were core cadres, mostly senior and retired males.</td>
<td>• Engage young, middle-aged and older men in this intervention to support cross-cutting social norm transformation and build a critical mass within communities to drive large-scale, sustainable transformation.</td>
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<td></td>
<td>• Develop strategies and restructure the intervention in order to engage working men, potentially by exploring other relevant intervention models that integrate livelihoods strengthening into a primary prevention intervention, such as the Creating Futures/Stepping Stones programme.</td>
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<tr>
<td>The younger members have more appropriate ideas about how to handle DV cases</td>
<td>• Implement more capacity-building among senior members and especially among facilitators to ensure that they fully understand, embrace, promote and model appropriate practices.</td>
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<td>(and holding perpetrators responsible and keeping women safe as a priority)</td>
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<td>compared to the older members.</td>
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<td>Some male, senior citizens tend to be uneasy when dealing with “delicate”</td>
<td>• Do not remove these subjects. They are essential to the intervention and prompted important changes among participants. Instead, allow more time for older participants to discuss these topics in a slow and gradual manner.</td>
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<td>subjects such as sexual relations and reproductive health</td>
<td>• Build facilitators’ capacity and comfort in dealing with these topics, especially within groups that may initially be shocked or resistant to them.</td>
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<td>Findings in report</td>
<td>Implications for intervention</td>
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| Some facilitators are aware of and interested in “the bigger picture” related to making this work successful and sustainable on a large scale | • Invest in concerted efforts to effectively mobilize authorities, communities and participants in a more comprehensive approach because VAWG is complex and interwoven with other concerns  
• Ensure that facilitators understand the full VAWG prevention approach, including the rationale for the particular intervention, that guide other interventions or efforts that will be implemented alongside the intervention or at other levels. |
| The term “VAWG prevention”, as part of the name of the male advocate clubs, caused anxiety to some participants who were afraid of getting into trouble and thought prevention meant direct intervention in VAWG incidents | • Find a new name for the project that is more engaging, interesting and positively framed rather than on VAWG, focusing on benefits and values, such as happy relationships and safer homes and communities. The name should also be cool, interesting and optimistic to attract attention and interest and inspire pride in members. A name that links to a happy and harmonious family in order to have a strong society would be recommended – because the intervention is about promoting these things and citizens may be very motivated to join something that will help them to have a happy and harmonious family and be seen to be contributing to a stronger society. This could be developed with the facilitators and club members group who participated in the pilot. |
| Some facilitators were not fully informed of the subject or the time commitment | • Prepare facilitators for the demanding task including clarifying the time commitment – requiring participation in ongoing training and mentoring; engaging in substantial preparation time before each session; conducting continued mobilization of participants; and facilitating actual sessions. |
| The absence of women at male club meetings was regretted by some facilitators | • Consider ways in which to have male-only, female-only, and combined intervention groups  
• The approach of getting men and women together is recognized as an important strategy in effective primary prevention of VAWG. Mixed-gender groups may allow participants to share their views with the other gender, and that this will enable them to learn about and understand each other better. Implementing in mixed-gender settings provides a space for boys and young men and girls and young women to model respect for one another. Single-gender groups may allow for more of a focus on teaching men to be empathetic and responsive, while also confronting the reality that it is primarily men who perpetrate violence. |
CONCLUSION

This male advocate intervention lead by the Da Nang Women’s Union with support from UN Women Viet Nam and the P4P regional joint programme constitutes an innovative effort to mobilize men through club activities at the community level for the prevention of violence against women and girls.

The intervention succeeded in initiating important transformations with regard to perceptions, attitudes and practices of gender equality and strengthening understanding and non-acceptance of different forms of violence against women and girls and how to prevent it from happening.

Furthermore, there is evidence that participants implemented changes in their families through improved relationships with their wives and children as well as in their communities through various forms of volunteerism.

The male advocate intervention was not implemented in isolation so these findings must be considered within the context of a broader multicomponent programme. This qualitative endline study was not able to attribute specific changes to the male advocate intervention impact. Nevertheless, the valuable lessons learned from the pilot implementation offer important insights into strengthening various aspects of the intervention for future implementation. The encouraging findings suggest that this intervention model could be strengthened, scaled up and further evaluated.
Appendix 1: Inquiry guide for intervention participant in-depth interviews

**Aim:** To document the experiences, changes, and recommendations of 20 participants (direct beneficiaries) in the Project intervention and explore the skills and ideas learned during the workshop and how they will influence participants’ future choices, attitudes and behaviour.

**Description:** Participants will explore and discuss what they have learned during the workshop and most importantly how change has or has not come about.

**Process:** Explain that we want to discuss their experiences, thoughts and opinions about a number of different things:

- Their experiences of the Project intervention – personal change and transformation and how to sustain the changes and what they see as their future now that they have gone through the program
- Involvement in community volunteerism and activism and how the intervention has impacted their community
- Ideas on strengthening the intervention and implementation

We want to know what new thoughts and ideas you learned as well as the skills you developed. To do this we will talk about your Past, your Program experience, your Present and your future. Let us take some time together to reflect on what you have experienced, what challenged you, what you gained, and ways in which you think this program can be improved in the future.

Please know that no answers are right or wrong. It is important that you talk honestly and openly. No person will be identified and your village location will not be named in any report.

**PAST**

*In these questions we want to explore historically (ie. before the intervention) how their lives were, and that of their family and community.*

**BEFORE**

Can you tell me about your life and your community before the Project? What were the things that made you happy / proud about it? What were the things that made you sad/unhappy about it?

**PRESENT – PROGRAM EXPERIENCE**

*These questions are designed to facilitate a reflection on the project program specifically.*

1. Can you tell me what your thoughts / concerns / expectations were about the project coming to your community?
2. How did you feel when you first came to the workshop?
3. What was it like to participate in the workshop sessions?
4. What did you like about the Project?
5. What didn’t you like about the Project?
6. What was new or surprising to you during the Project activities?
7. What was the most difficult or challenging thing about Project activities?
8. What was the best or most exciting or inspiring thing about Project activities?
9. Would you like to see this program continue and go to other communities? Why or why not?
10. If you could think of any way(s) to improve the Project what would it/they be and why?

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CHANGES

In order to understand the impacts of the project program these questions are designed to explore the ways that their participation in the program has resulted in changes.

1. In what ways have you and your life changed because of your participation in and experience of Project? Please tell us a story to describe some of these changes.

2. What new skills have you learned from the Project?
   a. In what ways have these skills helped you to deal with difficult things / conflict / relationships?
   b. How have these skills affected your relationships?
   c. What skills would you have liked to learn more about?
   d. Are there skills that you learned but haven’t used? What are they? And why haven’t you used them?
   e. In your opinion, what was the best way to learn a new skill?

3. If there are any, how do you plan to sustain or grow these changes and new skills now?

4. How have people in your family, in the community responded to these changes? Any differences between men and women in their response, attitudes to you?

5. In what ways do you think your future choices, attitudes, behaviours will be influenced by what you learned through Project?

6. Have you noticed any changes in your community because of or related to Project? Please describe them.
   a. When you think about your community before Project and now, how would you describe the differences (if there are any)?
   b. How do you think these changes in the community can be sustained and grown?

7. What do you see as the future of your community now after Project?

VOLUNTEERISM and ACTIVISM

1. In Project everyone was encouraged to become involved in community activism to prevention VAWG – what kinds of activities did you participate in?
   a. What was it like to be involved in this kind of activism or advocacy?
   b. In your opinion, what were the outcomes or impact of this activism or advocacy?
   c. Would you participate in VAWG related activism or advocacy in the future – why or why not?
   d. Would you organize and lead any VAWG related activism or advocacy in the future – why or why not and what are your ideas?
   e. What is the best way to encourage people like you in your community to become involved in this kind of activism or advocacy?

2. In Project everyone was encouraged to devise and implement the community project to contribute in some way to strengthening the community.
   a. What did you do?
   b. What were the outcomes of your project?
   c. What was your experience of doing a project like this?
   d. Do you plan to continue with the project or doing a new project? Why or why not and what is your plan/idea?
   e. What kind of community projects do you think are best for your community?

3. From your observation, are people engaging more in public activities now since the Project?
   a. If not, why? What factors did hinder people from public engagement activities? How to get people involved more?
   b. If yes, could you please provide some examples that you have noticed in your community? Are there any differences between women and men in their participation?

Do you think people in the community are helping each other more now than before Project? Can you give examples of this? Why do you think people are happier to help each other out now than before? What are the benefits of this to the community?
Appendix 2: Inquiry guide for intervention facilitator focus group discussions

Aim: To document the experiences, changes, and recommendations of intervention facilitators of the Project intervention and how the skills and ideas learned by facilitating the workshops will influence future choices, attitudes and behaviours.

Description: Facilitators will explore and discuss what they have taught during the workshop and most importantly what changes have or have not come about for them personally as well as those they have witnessed among intervention participants and the communities within which the intervention was implemented.

Process: Explain that we want to discuss their experiences, thoughts and opinions about a number of different things:

• Theme 1: Their experiences of the Project intervention and how they think the intervention and/or the intervention plan can be strengthened
• Theme 2: How the intervention has impacted on their life and what they see for their future now that they have had this experience
• Theme 3: How the intervention has impacted on the lives of (a) intervention participants (b) intervention participants’ families and friends (if known), and (c) intervention communities

We want to know what new thoughts and ideas you taught as well as the skills you developed. Let us take some time together to reflect on what you have experienced, what challenged you, what you gained, and ways in which you think this program can be improved in the future.

Please know that no answers are right or wrong. It is important that you talk honestly and openly. No person will identify you.

Can we all agree to keep what is discussed in this group confidential – that means you will not tell others what particular individuals say here (stress this to all focus group participants before proceeding with thematic questions).

THEME 1: EXPERIENCES OF PROJECT INTERVENTION AND HOW IT CAN BE STRENGTHENED
1. Let us start by you telling me about yourselves including your age, if you have children, are married, what you do for work, or do you involve in any community services etc.
2. Can you tell me about how you came to be a facilitator in Project?
   a. How were you selected?
   b. Who selected you?
   c. What training/s did you undertake to become a facilitator?
3. Why did you agree to become a facilitator in Project?
4. What did you expect from being involved in Project?
5. What were your concerns, if any, about facilitating in Project?
6. How did you feel when you first came to facilitate the Project workshop?
7. What was it like to conduct the Project workshop sessions? Did you facilitate all the modules? Why/Why not?
8. What made you keep facilitating the workshops?
9. What was your understanding of the purpose/aim of Project?
10. What did you like about the Project program?
11. What didn’t you like about the Project program?
12. What was new or something surprising about the workshop?
13. What was the most difficult or challenging thing about running the workshops?
14. What was the most difficult or challenging thing for participants in the workshops?
15. What was the best or most exciting or inspiring thing about the workshop for you and for others?
16. Which do you think were the most important modules and why?
17. Which modules do you think were the most thought provoking / interesting / challenging to the communities and why?
18. Interventions such as Project are meant to grow continuously so let us spend some time thinking about, discussing, and sharing ideas about how different aspects of the programme could be strengthened:
   a. In what ways can the actual programme in terms of the content covered (or content that you think is missing or should be added) and/or the methods used in the workshop sessions (e.g., participatory discussions, games, and learning) can be strengthened (e.g., changed or improved)?
   b. In what ways can the implementation plan of the intervention (e.g., meeting times, meeting frequency) be strengthened?
   c. In what ways can the selection and training for facilitators be strengthened?
   d. In what ways can the support and supervision of facilitators be strengthened?

THEME 2: PERSONAL CHANGE AND TRANSFORMATION
1. Now I would like to reflect on how your life has changed as a result of your involvement in Project as a facilitator. Remember this is confidential.
2. In what ways has being involved in facilitating Project changed your life personally? Can you share a story or two that details that change for me? (Likely that they will only reflect on positive changes so if appropriate probe gently to see if there were any negative changes)
3. How have others such as family, friends, or others in the community responded / reacted to these changes? Any differences between men and women in their response, attitudes?
4. In what ways are you now involved in helping others or volunteering or doing activism or advocacy for VAWG prevention that you weren’t before? Can you give examples of this? (note: can include general community service/improvement or specific to VAWG prevention or gender equality)
   a. Why do you think you do this now? What are the benefits of this to your community and yourself?
5. In what ways do you think your future choices, attitudes, behaviours will be influenced by your experience as a facilitator in Project?
6. What support do you need to ensure that you can sustain / action these choices/attitudes/behaviours?
7. What do you see as your future now after facilitating Project trainings?

THEME 3: PARTICIPANT AND COMMUNITY CHANGES
1. While you have experienced changes in your life while facilitating Project, you were also helping the participants in your groups to go through transformation. Now let us discuss what kinds of changes you noticed among the participants in the groups where you were the facilitator. Can you describe any behaviour or stories that illustrate the kinds of changes that you noticed?
2. Did any of the participants discuss how other people in their lives (such as family or friends) reacted to these changes?
3. When you think about the communities where you have facilitated, how would you describe the differences (if there are any) before and now, after, Project?
   a. Probe especially about gender relations, masculinity, VAWG, relationships, and community volunteerism or activism
4. Why do you think people participated in Project?
5. What made it difficult for people to be involved in the whole of Project?
6. What is your hope for your community in relation to gender equality, social cohesion and the improvements since Project?
Appendix 3: Informed consent for intervention participants

Partners for Prevention is a UNDP, UNFPA, UN Women and UNV regional joint programme for the prevention of violence against women and girls in Asia and the Pacific. The Da Nang Women’s Union, UN Women, UNV and UNFPA with the support of P4P are implementing a prevention of VAWG project in Da Nang, Viet Nam. The interview for which you are being asked to participate in, is a part of an endline evaluation of the male advocate intervention to prevent VAWG in Da Nang in December 2016.

The overall objective of this study is to document the experiences, changes, and recommendations of direct beneficiaries in the Project intervention and explore the skills and ideas learned during the workshop and how they will influence participants’ future choices, attitudes and behaviour. Participants will explore and discuss what they have learned during the workshop and most importantly how change has or has not come about.

Our discussion will be tape recorded to help us accurately capture your insights in your own words; however, your name will not be recorded on the tape. The tapes will only be heard by the study team for the purpose of this study. Though direct quotes from you may be used in the final report, your name and other identifying information will be kept anonymous. If you feel uncomfortable with the recorder, you may ask that it be turned off at any time. You also have the right to withdraw from the study at any time. In the event you choose to withdraw from the study all information you provide (including tapes) will be destroyed and omitted from the final report.

By signing below, I acknowledge that I have read and understand the above information. I am aware that I can discontinue my participation in the study at any time.

Signature__________________________________        Date______________________________________

You are encouraged to ask questions or raise concerns at any time about the nature of the study or the methods I am using. Please contact me at any time at the e-mail address or telephone number listed below:

Contact details of 1) the Lead Researcher who is based in Hanoi, and 2) the UNV project coordination officer who is based in Da Nang, Viet Nam.
Appendix 4: Informed consent for intervention facilitators

Partners for Prevention is a UNDP, UNFPA, UN Women and UNV regional joint programme for the prevention of violence against women and girls in Asia and the Pacific. The Da Nang Women’s Union, UN Women, UNV and UNFPA with the support of P4P are implementing a prevention of VAWG project in Da Nang, Viet Nam. The interview for which you are being asked to participate in, is a part of an endline evaluation of the male advocate intervention to prevent VAWG in Da Nang in December 2016.

The overall objective of this study is to collect qualitative endline data about the changes and transformation inspired by the intervention and recommendations for intervention strengthening from the perspectives of intervention participants and facilitators. Facilitators will explore and discuss what they have taught during the workshop and most importantly what changes have or have not come about for them personally as well as those they have witnessed among intervention participants and the communities within which the intervention was implemented.

I will take notes of our discussion. Though direct quotes from you may be used in the final report, your name and other identifying information will be kept anonymous. You also have the right to withdraw from the study at any time. In the event you choose to withdraw from the study all information you provide will be omitted from the final report.

By signing below, I acknowledge that I have read and understand the above information. I am aware that I can discontinue my participation in the study at any time.

Signature__________________________________        Date______________________________________

You are encouraged to ask questions or raise concerns at any time about the nature of the study or the methods I am using. Please contact me at any time at the e-mail address or telephone number listed below:

Contact details of 1) the Lead Researcher who is based in Hanoi, and 2) the UNV project coordination officer who is based in Da Nang, Viet Nam.
Appendix 5: Research approval from the Hanoi School of Public Health Institutional Review Board for Protection of Human Subjects

MINISTRY OF HEALTH
HANOI SCHOOL OF PUBLIC HEALTH

SOCIALIST REPUBLIC OF VIETNAM
Independence – Freedom - Happiness

No.: 536/2016/YTCC-HD3
Subject: Ethical Approval

DECIION
On Ethical approval for research involving human subject participation

THE CHAIR OF THE ETHICAL REVIEW BOARD FOR BIOMEDICAL RESEARCH
HANOI SCHOOL OF PUBLIC HEALTH

- Based on Decision No. 560/QD-YTCC by the Dean of Hanoi School of Public Health on Establishment of The Institutional Ethical Review Board of Hanoi School of Public Health; 16 May 2016;
- Based on decision No. 651/QD-YTCC by the Dean of Hanoi School of Public Health on the Issuing Regulation of the Institutional Ethical Review Board of Hanoi School of Public Health; 26 May 2015;
- After reviewing research ethics application No.016-336/DD-YTCC submitted by Dr. Nguyen Thi Thu Huong dated December 16, 2016

DECIED

Article 1. Grant ethical approval for ethnographic study project:
- Project Title: End line evaluation of male advocacy intervention to prevent VAWG in Da Nang, Vietnam.
- Principle Investigator: Nguyen Thi Thu Huong, PhD - University of Social Sciences and Humanities, Vietnam National University of Hanoi
- Sponsor: United Nations Development Program (UNDP)
- Research site: Da Nang city in Vietnam
- Project time: from 23/11/2016 to 28/02/2017
- Data collection time: from 09/01/2017 to 16/01/2017
- Review process: Expedited review

Article 2. This decision is effective from 27/12/2016 to 28/02/2017

Article 3. Principle Investigator should notify the Institutional Ethical Review Board of Hanoi School of Public Health (IRB of HSPH) immediately of any adverse effects arising from this study (e.g. unexpected adverse outcomes, unexpected community/subject risk factors or complaints, etc.). Active research projects are subject to random audit by the IRB of HSPH.

CHAIR OF
INSTITUTIONAL ETHICAL REVIEW BOARD
(Signature and full name)

Ha Van Nhu

SECRETARY
(Signature and full name)

Nguyen Thi Minh Thanh
### Appendix 6: A directory of available violence against women and girls services and the Da Nang Committee for the Advancement of Women

<table>
<thead>
<tr>
<th>No</th>
<th>Organization</th>
<th>Implemented by</th>
<th>Type of Services</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>In Da Nang City</strong></td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>
| 1 | Da Nang Committee for the Advancement of Women (CFAW) | Da Nang People’s Committee (Department of Planning and Investment of Da Nang) | General management | - Da Nang People’s Committee: 05113893777  
- Dept. Planning & Investment: 05113822217 05113822230 |
<p>| 2 | Da Nang Public Security |  | Security issues | 05113822300 |
| 3 | Department of Labor, Invalid and Social Affairs of Da Nang |  | Social protection policies | 05113827616 |
| 4 | Center for Legal Aid and Counselling on Marriages involving Foreign Elements | Da Nang Women’s Union | Legal aid | 05113892558 |
| 5 | Da Nang Women’s Employment Service Center | Da Nang Women’s Union | Economic empowerment | 05113832896 |
| 6 | Center for Legal Assistance and Counselling | Department of Justice of Da Nang | Legal aids | 05113727514, 05113727515 |
| 7 | Da Nang Department of Health |  | Health care services | 05113821206 |
| <strong>Hoa Vang District</strong> | | | | |
| 1 | CFAW (district level) | Hoa Vang People’s Committee | General management | 05113846172 |
| 2 | Public Security of Hoa Vang |  | Security issues | 05113674193 |
| 3 | Hoa Vang Women’s Union |  | Monitoring | 05113846145 |
| 4 | Hoa Vang Health care center |  | Health care services | 05113789123 |</p>
<table>
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<tr>
<th>No</th>
<th>Organization</th>
<th>Implemented by</th>
<th>Type of Services</th>
<th>Contact</th>
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<tbody>
<tr>
<td>5</td>
<td>Hoa Phong People’s Committee</td>
<td></td>
<td>General management</td>
<td>05113846426</td>
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</table>
| 6  | Hoa Phong Public Security                        |                        | Security issues   | - Mr Dang (Head of Public Security forces): 0909509591  
                                |                        |                   | - Mr Son (Vice Head of Public Security forces): 0905510829 |
| 7  | Hoa Phong Women’s Union                          |                        | Monitoring        | - Ms. Thuong (Head of WU): 0934310988  
                                |                        |                   | - Ms. Linh (Vice Head of WU): 0905909062  |
| 8  | Hoa Phong Health care station                    |                        | Health care services | 05113780051                 |
| 9  | Hoa Khuong People’s Committee                    |                        | General management | 05113784248                 |
| 10 | Hoa Khuong Public Security                       |                        | Security issues   | Mr Hoa (Head of public security forces): 0905171218  |
| 11 | Hoa Khuong Women’s Union                         |                        | Monitoring        | 05113784386  
<pre><code>                            |                        |                   | Ms Van (Head of WU): 0936976245  |
</code></pre>
<p>| 12 | Hoa Khuong Health care station                   |                        | Health care services | 05112245392                 |
| 1  | CEFAW                                            | Hai Chau People’s Committees | General management | 05113827970, 05113561188  |
| 2  | Hai Chau Public Security                         |                        | Security issues   | 05113821372                 |
| 3  | Hai Chau Women’s Union                           |                        | Monitoring        | 05113821428                 |
| 4  | Hai Chau Health care center                      |                        | Health care services | 05113895192, 05113895006  |</p>
<table>
<thead>
<tr>
<th>No</th>
<th>Organization</th>
<th>Implemented by</th>
<th>Type of Services</th>
<th>Contact</th>
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<td>Hoa Cuong Bac Public Security</td>
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<td>7</td>
<td>Hoa Cuong Bac Women’s Union</td>
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<td>Monitoring</td>
<td>-Ms Ngoc (Head of WU): 0913438646</td>
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<td>- Ms Thuy (Vice Head of WU): 0944430185</td>
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<td>8</td>
<td>Hoa Cuong Bac Health care station</td>
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<td>Health care services</td>
<td>05113244836</td>
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</table>
Appendix 7: References


EMERGE (2015). Lessons in Good Practice from Work with Men and Boys for Gender Equality, EMERGE Practice Brief, Promundo-US, Sonke Gender Justice and Institute of Development Studies, Brighton: IDS.


olence and HIV-risk behaviours in Durban, South Africa: study protocol for a cluster randomized control trial, and baseline characteristics. *BMC Public Health*, 17(1), 336.


The Duc, D, Cam, H, Trung, LH & Kanthoul, L (2012). “Teach the wife when she first arrives.” Trajectories and pathways into violent and non-violent masculinities in Hue City and Phu Xuyen district, Viet Nam. Hanoi: UNFPA, UN Women, Partners for Prevention.


