

Q&A

NICD Learning from the Field with IRC

EMAP – Engaging Men in Accountable Practice

Have rigorous impact evaluations played a role in designing this approach?

Randomized control trials on the EMAP approach have been carried out in collaboration with the World Bank. The first one was carried out during a pilot project in the Ivory Coast Pilot in 2014. The second one was carried out in 2016/2017 in DRC with 1500 EMAP participants and 1500 participants in the control group. Among others, the trials resulted in reported attitude change and changes among gender roles in households.

Was it difficult to get your male colleagues on board? Any experience to share? Was there resistance?

There is resistance, often based on religion “that is not in religious books”. But as the results show, even religious leaders like Imams show changes in attitudes and behaviour and recommend the EMAP approach. Cultural customs or beliefs are also challenged during the sessions. This gives men the opportunity to explore different viewpoints, challenge each other and learn from each other. Dialogues in groups are very important. Change of behaviour among male colleagues is indeed needed. Change comes over time, testimonies and positive role models are important for this process. During the first cycle it is always difficult to get the men on board but after the first cycle other men hear about the positive change participants experience and therefore want to join, too. Men are happy to participate because this way they can show that they are a role model and it offers them a chance to be recognized. It also gives them some sort of leadership in the community. Some men are still meeting in groups after their EMAP cycle finished (some even 5 years later) because they enjoy the peer exchange and the positive change the project had on their lives.

Is there a focus on a specific age group among male participants?

Generally, men are among 20-50/55 years, but IRC teams in pilot countries are free to define the age group. Even men in their sixties have participated. EMAP Plus will be focusing on boys between the age of 10 and 19.

What are the key driving factors that explain the impact?

Testimonials are very useful. If the community sees positive change and impact in a family/person they look up to, they will adopt and are willing to change, too. Changes through EMAP experienced by men are improving their relationships with their partners, men of different ages are influencing each other, especially younger men look up to older men.

How are you implementing the trainings? Are you working with national or international IRC staff? How do you reach your target group?

Usually the national staff trains local community facilitators who then lead the sessions. In some cases, local partners are trained, and then lead the sessions. IRC is not leading the sessions.

Aren't you just curing the symptoms of the disease? Isn't it more effective to intervene earlier?

EMAP is a primary prevention program, that aims at preventing GBV happening in the first place. The disease is *gender inequality, which is a societal, system wide, global problem*. To cure

this, it is important to work on all levels. EMAP is partnering with other programs such as SASA! to create sustainable change. Violence should always be prevented before it happens, therefore it is important to increase gender equality. Men who participated in EMAP can serve as role models in their families and communities.

Thank you for your participation!

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