



BANGLADESH: FATHERS CLUBS STUDY FINDINGS

ENGAGING MEN IN THE MNCH/SRHR CONTINUUM OF CARE

Strengthening Health Outcomes for Women and Children (SHOW) Project

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EXECUTIVE SUMMARY

As part of the gender-transformative, multi-country Strengthening Health Outcomes for Women and Children (SHOW) Project, Plan International implemented a male-engagement strategy in Bangladesh, Ghana, Haiti, Nigeria and Senegal from 2017–19 to promote positive masculinities and engage men in the continuum of Maternal, Newborn and Child Health (MNCH) care and in Sexual and Reproductive Health (SRH). In Bangladesh, Plan International established 320 Fathers Clubs and engaged 4,160 fathers in twenty reflective sessions to broaden their understanding on gender equality, enable them to question what it means to be a man and a father and to promote their equitable involvement at the household level and provide them with safe space where men can identify and reflect on challenges related to MNCH/SRH and develop solutions within the group.

This brief presents the results of Plan International’s 2019 qualitative study on the effects of Fathers Clubs intervention among the targeted men in Bangladesh. The study findings revealed positive change among Fathers Clubs participants who began to demonstrate more engagement in the continuum of care and positive masculinities supportive of women and girls’ empowerment. Reports of changed attitudes, cordial spousal communication, uptake of new, non-traditional household care activities, and abandonment of harmful behaviours were all documented by women, adolescent girls and boys, community leaders and by Fathers Clubs participants themselves.

In Bangladesh, positive changes included engagement in household work and childcare, increased attention to the maternal and child health, including support for vaccinations, reports of reduced verbal and physical violence towards intimate partners and children, combined with improved emotional control and communication and relationships with spouses and children, with examples of improved treatment of girls. Progress was notable in the area of decision-making, with noted improvement in consultation of women on household finances and asset disposal. Women and adolescent girls and boys overwhelmingly expressed the positive changes and knock-on effects of more engaged fathers and husbands.

Men demonstrated positive attitudes towards playing a more active role in the care and household work, though there were indications that these roles still fundamentally belong to women and that their support is considered “help”. Comments by some women registered the need for further progress, as well as concern with the change in gender roles. At the same time, community and family resistance to this shift in gender roles was remarked upon especially in the beginning, although participants widely reported their motivation to continue to see the rewards of this change far outweighed this deterrent. Men, women, adolescent girls and boys and community members all directly attributed these changes to Fathers Clubs and to the importance of sustained groups and networks for continuing to spread this way of living based on gender equality.

1. INTRODUCTION

As part of the gender-transformative Strengthening Health Outcomes for Women and Children (SHOW) Project, Plan International implemented a male-engagement strategy in Bangladesh from 2017–19 to promote positive masculinities and engage men in sexual and reproductive health rights (SRHR) and the continuum of maternal, newborn and child health (MNCH) care. This innovative approach consisted of a curriculum of 20 reflective discussion sessions facilitated by trained local male facilitators, supporting groups of husbands and male partners (Fathers Clubs) transform attitudes and behaviours that harm women and children and promote gender-equitable relationships between couples. In January 2019, Plan International led a qualitative study to assess the outcomes of the Fathers Clubs interventions. The study findings revealed positive change among Fathers Clubs participants who began to demonstrate more engagement in the continuum of care and positive masculinities supportive of women and girls' empowerment. This document presents the overall theory of change and gender equality strategy for the SHOW Project, a synopsis of the Fathers Clubs approach, as well as the main findings of the qualitative study.

1.1. SHOW PROJECT

The SHOW Project is a multi-country¹, multi-year (Jan 2016–Sept 2020) gender-transformative project funded by Global Affairs Canada, with a value of CAD 65 million. It is aligned with the UN's Every Woman Every Child global strategy to help drive progress towards reaching Sustainable Development Goals 3 and 5. SHOW's ultimate objective is to contribute to the reduction of maternal and child mortality amongst vulnerable women and children, including adolescent girls, in targeted remote, underserved regions of Bangladesh, Ghana, Haiti, Nigeria, and Senegal. In Bangladesh, the project is implemented in eight remote, underserved and marginalized areas of three target districts, namely six upazilas (sub-districts) in the Nilphamari district (Sadar, Saidpur, Kishoregonj, Jaldhaka, Domer and Dimla); one upazila in the Barguna district (Barguna Sadar); and, one upazila in the Khagrachori district (Panchori).

1.2. THEORY OF CHANGE

The SHOW project uses a three-pronged gender-transformative theory of change to improve the demand, supply and accountability of MNCH/SRHR services.

DEMAND

To improve the use of essential health services by women of reproductive age, adolescent girls, newborns and children under 5

To address the root causes of low demand for MNCH/SRHR services based on socio-economic and gender-related barriers

SUPPLY

To improve the knowledge and skills of health workers in MNCH/SRHR to make services gender responsive and adolescent-friendly

To strengthen health governance through gender equitable and inclusive health management committees and strengthen referrals to be safer and affordable

ACCOUNTABILITY

Reliable, timely and quality health information (including sex and age disaggregated data) through capacity building and an evidence-based culture that promotes informed and transparent decision-making and increased efficiency of clinic management and MNCH/SRH budgets

1.3. GENDER ANALYSIS – BANGLADESH

The patriarchal context in Bangladesh is extreme in its rigid gender hierarchy, characterized by control and public segregation of women and girls by men and senior family members. This is particularly the case for women and girls from lower-income and little or no educational backgrounds. The social status of females is measured by the ability to marry, bear children and care for family, and as such, there is strict control of female mobility, virginity, sexuality, reproduction, and of her general autonomy. The gender division of labour is rigid, with women almost exclusively responsible for domestic work and childcare resulting in their extreme time-poverty. Fathers due to societal norms and earning power holds the ultimate decision-making power over all major decisions, including those relating to family planning, access to MNCH/SRH services and the decision when to

1. Bangladesh, Ghana, Haiti, Nigeria and Senegal

marry their children (nationally, 65% of girls are married by age 18²). Women have little sovereignty over their reproductive lives – the early marriage of girls including pre-teens is highly prevalent and socially facilitated as a mechanism to control virginity and to protect family reputation. The preference for male children drives high birth rates including early childbearing (nationally, 31% of girls between 15–19 years have had their first child³) and discourages the use of family planning. Limited direct male involvement in MNCH is driven by poverty, as well as by norms that reify male authority and that consider male engagement in this female-regarded domain as a debasement of their power worthy of ridicule. Male violence against women and girls is commonplace and considered a private matter, and women who are further isolated by feelings of shame and inferiority, have few resources.

The SHOW baseline survey in the intervention areas asked about support from male family members during pregnancy, and during and after delivery, in terms of accessing family planning services, and breastfeeding. In the interventions in Bangladesh, 36.8 percent of adolescent girls, 36.1 percent of adult women, and 24.5 percent of men reported that the level of support provided to the women had been very good. When asked about the level of support in terms of delivery at the facility, 29.2 percent of adolescent girls, 32.1 percent of adult women, and 21.9 percent of men reported that the level of support was very good. 26.1 percent of adolescent girls, 30.7 percent of adult women, and 17.2 percent of men reported that a very good level of support was received by the women in terms of receiving PNC service within two days of delivery. For support in accessing FP methods, 18.3 percent of adolescent girls, 19.6 percent of adult women, and 22.5 percent of men responded that the support provided to the women was very good. The level of support was very good in the case of breastfeeding mothers, as responded by 28.7 percent of adolescent girls, 33.2 percent of adult women, and 19.8 percent of men. In Bangladesh, male support of women is the lowest for family planning⁴.

1.4. GENDER EQUALITY STRATEGY

From the outset, the SHOW project is implemented through strategic partnerships with the Government of Bangladesh's Ministry of Health and Family Welfare and the Ministry of Women and Children Affairs (MoWCA). The project formed a deeper collaboration with the Directorate General of Health Services (DGHS) and Directorate General of Family Planning (DGFP) to roll out several interventions. Male engagement



in gender equality has not been very pronounced in the government MNCH/SRHR programs, but the positive early results of the approach have generated government support and interest in developing their internal capacity on male engagement through collaboration with the SHOW project.

Based on the socio-ecological model, the SHOW Project's comprehensive Gender Equality Strategy has three inter-connected pillars targeting the structural and systemic norms upholding the gender inequalities. These pillars were further contextualized to address specific gender barriers as identified in the Bangladesh gender assessment.

As a gender-transformative project, SHOW integrates gender equality considerations into every aspect of its implementation as well as takes targeted gender-specific actions to address unequal power relationships and the root causes of inequalities in the target localities to improve the social status and condition of women and girls. The project's three intersecting gender-transformative strategies, tailored to Bangladesh's socio-cultural specificities, aimed to mutually reinforce each other are briefly described below:

- **Strategy 1 – Empowering women & girls:** Strengthening the individual and collective agency of women and adolescent girls by increasing their knowledge of their rights, about gender equality, MNCH/SRHR, building their leadership roles and capacities, networks and support structures, strengthening their economic capacities and decision-making power within and outside the family for the improved use of MNCH/SRHR services.

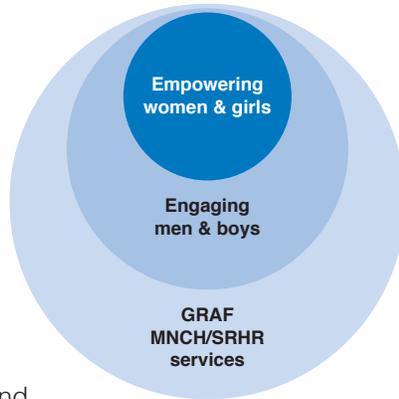
2. www.girlsnotbrides.org/child-marriage/bangladesh

3. *BDHS-2014*

4. *SHOW Project Baseline Report, Plan International July 2016*

- **Strategy 2 – Engaging men & boys:**

Increasing the engagement of men and boys in MNCH/SRHR by fostering positive masculinities through targeted male family members' engagement in reflective dialogues and action, Social Behavioural Change Communication (SBCC) related interventions, and engagement of male and female community influencers such as traditional and religious leaders.



- **Strategy 3 – MNCH/SRH services:**

Strengthening the delivery of Gender Responsive and Adolescent Friendly (GRAF) MNCH/SRH services through health system strengthening and capacity building of community and facility-based health providers.

The robust male engagement approach, under the gender equality strategy, was designed to address the root causes of gender inequalities and transform unequal gender power relations that act as barriers for women and adolescent girls to access MNCH/SRH services. Engaging men is one of the essential components for improving women's and girls' access to and use of MNCH/SRH services. Plan International defines 'men's engagement' in MNCH/SRHR as "the active participation of men in protecting and promoting the health and well-being of their partners and children"⁵. This definition is based on a vision of lasting change in attitudes, behaviour, and relationships, as well as more equitable gender relations. Therefore, recognizing the vital role of men in the health of women and children, the SHOW project's male-engagement approach aims to promote and increase the active participation of men and adolescent boys along the MNCH/SRHR continuum of care as partners and beneficiaries of gender equality.

2. THE FATHERS CLUBS APPROACH

The SHOW Project's Fathers Clubs approach was jointly conceptualized by Plan International Canada and Promundo US⁶. It enables groups of men to undergo a gender

transformative and extended reflective journey of unlearning harmful gender norms and adopting positive masculinities. The goal of Fathers Clubs is to promote the equitable and non-violent participation of men as partners in MNCH/SRHR. This approach comprised of three components, a) Development of the Fathers Clubs Manual, b) Training/mentoring of community-based male facilitators, and c) recruitment of self-selected male groups that are willing to undergo all sessions.

2.1. CONTENT

The Fathers Clubs Manual sets out 20 one-hour interactive gender-transformative sessions that take fathers through a six-unit journey (see below). Fathers are intended to gradually gain an understanding of how gender-inequitable norms negatively impact MNCH/SRH outcomes for women and children, as well as men themselves. The small groups, with 13 members average, become safe spaces where men can reflect and learn from their experiences and the experiences of others and begin to test out gender equitable behaviours and solutions to improve MNCH/SRHR. Clubs target adult men with female partners of reproductive-age. These, 20 sessions are grouped under six broad themes as presented below:

I. WELCOME

- Welcome
- Agreement
- Values Clarifications

II. UNPAID CARE WORK

- Hours in a day
- Who does care work?

III. MEN, GENDER & POWER

- Man box
- Gender stereotypes
- Persons & things

IV. PREGNANCY, DELIVERY & BEYOND

- Support to pregnant partner
- Delivery room role
- Pain alleviation
- Fathers and postnatal care
- Importance of breastfeeding

5. Comrie-Thomson L, Mavhu W, Makungu C, Nahar Q, Khan R, Davis J, Luchters S, Hamdani S, and Stillo E. (2015) Men Matter: Engaging Men in MNCH Outcomes. Toronto, Canada: Plan Canada. Page 10

6. Promundo is a global leader in advancing gender equality and preventing violence by engaging men and boys.

V. RELATIONSHIPS

- Who makes decisions?
- What is violence?
- Healthy relationships

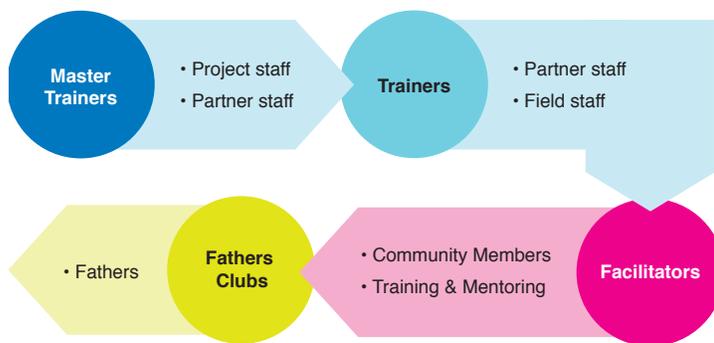
VI. PLANNING THE FUTURE

- Parents by accident or choice
- Your child's future
- Carlota's story
- Closing circle

The program takes a gender transformative approach by encouraging participants to question what it means to be a man or a woman in their society and what it means to be a father/spouse in the context of MNCH/SRHR. The purpose of these discussions is to motivate men to challenge inequitable gender norms and power imbalances in their personal lives, and ultimately to promote sustained change in gender relations and power dynamics to improve men's relationships with partners and children and their lives well beyond the MNCH continuum of care period. The sessions are interactive, promoting self-reflection, along with homework assignments to encourage discussions with partners, family members and peers.

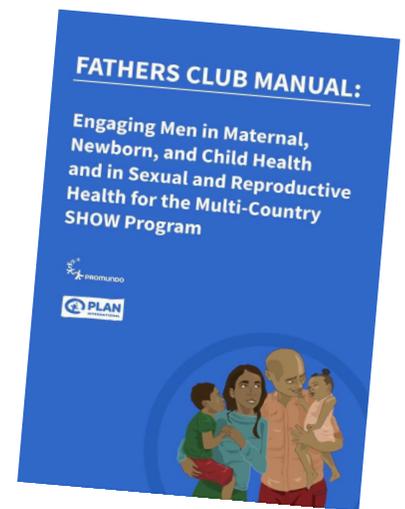
2.2. BANGLADESH TRAINING ROLL-OUT

In Bangladesh, like other countries, training to deliver the Fathers Clubs content was cascaded from master trainers to trainers, to community-based facilitators, and ultimately to the fathers in the target community (see infographic below).

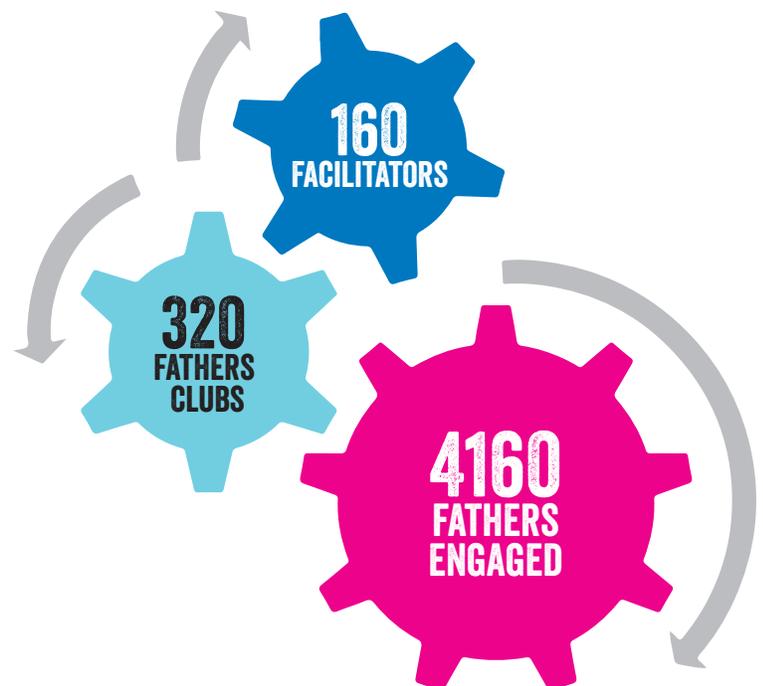


These sessions were organized at a common public venue where men usually gather in the target communities – in Bangladesh, these were often held at tea stall popular among local men, health facility, or place offered by community elder training focused on unlearning one's gender stereotypes, how to create a safe reflective space and how to engage participants in actively questioning and challenging inequitable gender norms and power imbalances.

The frequency of each Fathers Clubs delivery of individual sessions was determined based on the availability of the participating fathers, at a common public venue. These one-hour sessions were delivered weekly/ bi-weekly, with a check-in to help participants recall the previous session and a check-out to assign a take-home assignment. Facilitators were trained to use various techniques such as role-playing, group discussions, debates, homework and more to appeal to a diversity of men and different learning styles.



SHOW Bangladesh followed a phased approach for the establishment of Fathers Clubs and the preparation of facilitators. Training used teach-back methodologies for trainers to strengthen facilitation skills and develop a deeper understanding of the curriculum content and process, eventually training 160 Male Community Health Workers as facilitators in seven batches in Oct–Dec 2017. The project formed a total of **320 Fathers Clubs** in three target districts of Rangpur, Nilphamari, and Khagrachori that were run by **160 community based male facilitators**. The project succeeded in reaching out to **a total of 4,160 men**, who self-selected themselves for the Fathers Clubs sessions and received the full curriculum.



3. FATHERS CLUBS STUDY IN BANGLADESH

Plan International Canada in collaboration with Plan country offices and partners conducted a study to examine stakeholders' experiences of and perspectives on changes in fathers' household caregiving and activities in SHOW intervention communities. This qualitative study was conducted in February 2019 in four SHOW program countries, including in Bangladesh.

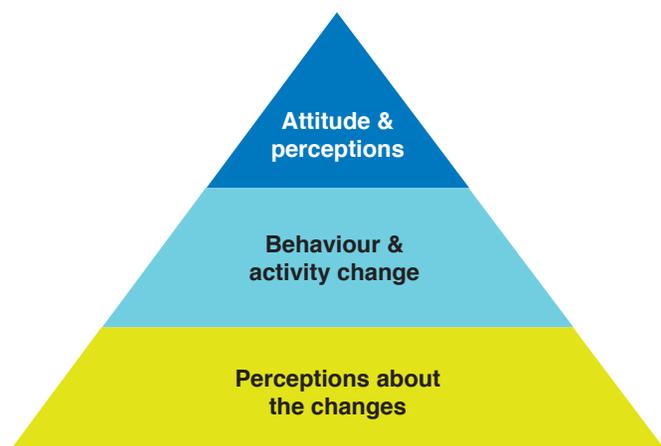
3.1. OBJECTIVES

This impact study has one following objective:

- To examine stakeholders' experiences of and perspectives on changes in fathers' household caregiving.

The research explored three domains of inquiry as follows:

- Attitudes and perceptions on the distribution of roles and responsibilities between women and men of household work and caregiving
- Behaviour/activity change of male participants in SHOW Father's Clubs
- Perceptions about the changes in behaviour and activities



3.2. RESEARCH METHODOLOGY

A qualitative research methodology, adapting tools based on the Promundo's IMAGES Survey⁷ and Helping Dads Care surveys⁸, was developed to reach Fathers Clubs participants (fathers), their family members (women, adolescent children) as well as community members (E.g., religious leaders,

community health workers, etc.). Field research was conducted in February 2019, wherein data collection methods include In-depth interviews and Focus Group Discussions. In-depth Interviews (IDI) were carried out with male members of the Fathers Clubs and community leaders to capture a deeper understanding of changes, if any, among men and allow greater privacy and confidentiality to improve the accuracy of collected data. The Focus Group Discussion Guides (FGD) were developed for women, adolescent girls and boys to get broader views from respondents and capture any shift, if any, around attitudes, behaviour, and perception around masculinities in the community and to triangulate data. Field researchers were trained from 12–14 February 2019. The training included key concepts on Gender Equality, child safeguarding and integration of Gender Equality and Child and Youth Safeguarding into the research methodology. Analysis of the data was deductive and participatory to test and align responses to the theory of change of the Fathers Clubs.

3.3. SAMPLE

This study used purposive sampling to identify and reach participants from the target groups. The following table presents the disaggregation of the respondents who were reached in three remote rural locations of Saidpur, Kishoregonj and Domar during 12–14 February 2019 in the northern Nilphamari district Bangladesh.

BANGLADESH SAMPLE SIZE	
Groups	Number of participants
Fathers Clubs members	12
Female partners	41
Adolescent Girls	14
Adolescent Boys	16
Community Leaders	9
Total	92

3.4. LIMITATIONS

There are a few limitations to the research process and methodology in Bangladesh. Data collection was only carried out in the Nilphamari (Rangpur Division in the North of the

7. *International Men and Gender Equality Survey, Promundo (promundoglobal.org/programs/international-men-and-gender-equality-survey-images/)*

8. *Helping Dads Care, Promundo (promundoglobal.org/wp-content/uploads/2018/06/Promundo-DMC-Helping-Men-Care-Report_FINAL.pdf)*



country) and not in the other two project intervention districts of Khagrachari (Chittagong Division) hilly area and Barguna (Barisal Division) coastal areas. The results from this study do not necessarily reflect the context or results in other project intervention areas.

4. RESEARCH FINDINGS – EFFECTS OF FATHERS CLUBS SESSIONS

This section presents the changes in male behaviours as reported by participants of the Fathers Clubs and also observed by their wives/partners, adolescent children, and community leaders. The analysis explored reported shifts in male behaviour towards positive masculinity while making relevant contrasts with the views of female partners. Moreover, the analysis examined what triggered change among men, the reaction of community members, and the perceived sustainability of changes in men's behaviours.

4.1. CHANGES AMONG MEN – POSITIVE MASCULINITIES

4.1.1. HOUSEHOLD WORK AND CHILDCARE

Women from across focus groups discussed the burden of care and domestic chores, and many indicated a reduction in this burden. Women observed that husbands were beginning to take up tasks that have traditionally belonged to women, including household chores such as sweeping, cooking, and preparing children for school. Women also reported their husbands spending more time on childcare, including walking children to school, purchasing food for them and treating girls and boys equally. Besides, many women observed that their husbands now also manage their chores like fetching water for their bath and taking food for dinner instead of being served. However, some comments also suggested that male involvement comes at times when women are not available to do the work themselves, as one woman explained: “I am pregnant that is why husband helps a lot.”

Both adolescent girls and boys agreed and were consistently enthusiastic about their respective fathers' active engagement in household work. Many also observed this had a positive effect on their mothers' happiness and mood and had made their households more peaceful and positive. Fathers themselves indicated that they are more engaged in performing domestic chores, emphasizing their support for childcare, including taking children to school, helping them with their studies, cooking and feeding them, as well as providing love and ensuring their overall health.

WOMAN, KISHOREGANJ

“Earlier, we had to work for 24 hours continuously, but now we become relaxed due to husband's engagement in household chores.”

ADOLESCENT GIRLS, SAIDPUR

“...after attending the Fathers Clubs sessions, he changes a lot, now helps my mother in various household tasks.”

FATHER, SAIDPUR

“There is no loss in changing myself. Rather, my relationship with the family is becoming better everyday.”

ADOLESCENT GIRL, DOMAR

“It feels so good when my father comes back from work and starts helping my mother.”

ADOLESCENT BOY, DOMAR

“I feel so good when I see my father helping my mother and it inspires me to help her as well.”

Community leaders across the three target areas sharing similar observations of changes among men during their customary household visits: they observed new domestic activities performed by fathers, including washing clothes, cleaning, and cooking. One community leader in Saidpur shared, “we are finding big change[s] in fathers' behaviours and attitudes [in taking up domestic chores].” Community leaders noted the positive effect of the increased sharing of responsibility for chores by men on improved relationships within the household and increased happiness and wellbeing. One community health worker shared their observation that the positive role modeling of Fathers Clubs members is spreading to other men in the community who have also started sharing domestic work.

Some community leaders also showed resistance towards the shift towards gender equality in household tasks. While many echoed messages around both parents being responsible for the cleaning of the house, washing clothes, helping children, and that men should, of course, support women during pregnancy, men's household work was often framed as a benevolent offer of support to provide relief for women – revealing a persistent belief that ultimately, responsibility for this workload lies with women. One community leader in Kishoreganj echoed this sentiment, stating that “[the] husband should do household chores for decreasing the working pressure of his wife.” Similarly, almost all women's groups, and several male participants, used language that revealed their belief that domestic work is the chief responsibility of women and that male participation is considered assistance. Several women mentioned that husbands help when their wife is sick, or when she cannot complete the household chores or is otherwise busy.

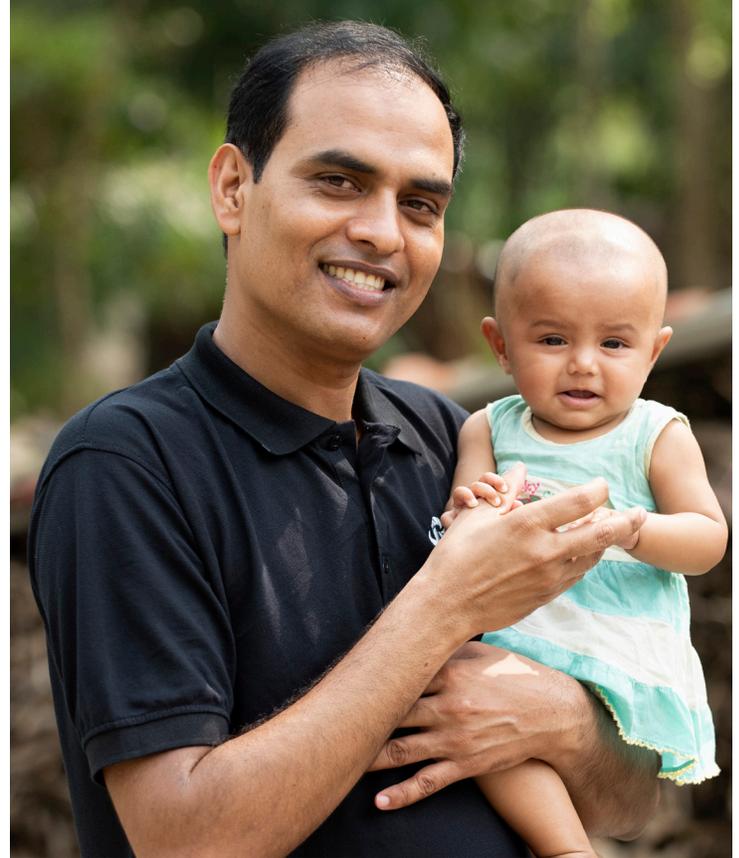
Attitudes that view domestic chores as the women's realm were evident, with resistance noted among women. Some women in the focus groups said that they still feel that the responsibility for household chores belongs to women, and while most participants felt positive about their husband's support at home, many felt that this support was not to be expected, and some expressed it as a 'bonus' rather than an obligation and some said they hesitated to ask for more. Women in one group generally agreed when one of them articulated the sentiment: “Household work is our responsibility.” Meanwhile, two men from the Fathers Clubs stated that their wives were initially embarrassed for them to take over household duties. One adolescent boy in Kishoreganj seemed to indicate that some of this resistance gradually dissipated, “Initially mothers hesitate to hand over the works to fathers, but they gradually accept it.”

It is evident that adolescent girls and boys also support the lessons on gender equality emanating from the Fathers Clubs. As one adolescent girl in Saidpur explained, her understanding of family and attitude toward responsibility has shifted as “Family is not only about mother. My father has equal responsibility as equal to my mother.”

Nonetheless, there seem to shift in attitudes specifically among members of Fathers Clubs on roles and responsibilities in the household. Most fathers who had taken part in Fathers Clubs felt that household work should be divided “equally” or “mutually” amongst husband and wife. This change has largely been welcomed by both women and adolescent children.

4.1.2. ACCESSING MNCH SERVICES

Women frequently mentioned that fathers were more likely to support their domestic workload at times when they are



sick or pregnant. Many also mentioned increased attention of fathers for the wellbeing of their children, including ensuring the vaccination of children. Community leaders noted an increased concern among fathers for the health care of their family members – most notably for the health and nutrition of women during pregnancy – and their active support. They also pointed to their increased awareness of maternal and child health issues. Fathers themselves indicated they now paid more attention to the health of their wives and children.

4.1.3. GENDER-BASED VIOLENCE

Respondents across all groups reported that improved behaviours included a reduction of violence. Women unanimously agreed that the foremost behaviour change amongst their husbands was a reduction in their temper and aggressive behaviour, and improvement in health treatment. Adolescent girls and boys corroborated the reduction in verbal and physical violence in the homes, as one girl said, “Father used to beat mother before but not now”; and another girl said, “he was a very ill-tempered person earlier but after participating [in] the male group session regularly he becomes patient and calm.” Both girls and boys also mentioned the emotional relief related to the reduction in parental violence, improved relationship, and non-violent communication, creating a calming influence and apparent release of tension between parents, as one adolescent boy said, “it feels good to see them [my parents] decide together when a problem arises.” Girls especially were vocal on the theme of violence reduction in the home, and one girl shared, “he was a very ill-tempered person earlier

but after participating the male group session regularly he becomes patient and calm.” Women also spoke of lessening of controlling behaviour by men, with one woman sharing that her husband used to prevent her from talking to neighbours and outsiders, but that he had stopped doing this.

Adolescent boys spoke of reduced quarreling not only within their own families but being noticeable among other households in their communities. Similarly, community leaders reported a notable reduction in “domestic turmoil” in the community, with some agreement that husbands used to behave roughly towards their wives because of simple problems, but that they have begun to demonstrate a level of care and respect towards their wives in these situations, as well as toward their children.

Men talked about the reduction of physical violence, as one man explained: “Earlier I quarreled and beat with my wife without any reason but now I always keep passions and talks to my wife very warmly after attending the male group session.” Men also talked about a reduction in feelings of anger, as well as their efforts to treat their spouses/partners with greater attention and care, as one man said, “previously I was often very angry with my family members, but now I feel that mutual help increases love.” Men also talked about spending more time with wives, listening and talking and involving them in decisions, as one man shared, “if any clash between husband and wife they are trying to resolve issues through discussion, not in front of children.”

4.1.4. DECISION MAKING

Greater openness to involve wives/partners in decision-making processes was widely noted. Respondents in all focus groups for women indicated and agreed that their husbands had made new efforts to involve them in decision-making processes, mainly through improved consultation before the decision. Women also observed there was now more frequent consultation and shared decision-making, particularly on the use of money and financial resources, such as how to invest money, and decisions on the purchase of household assets, such as land and livestock. Women commented on a



new tendency among their husbands to inform them of their business transactions, as one woman said: “We had bought a cow after selling the goat. My husband discussed with me and then planning together on using that money.” Men also spoke about listening to their wives and making joint decisions including ones that involve finances, as one man shared, “every decision has been taken after discussing with his wife and other family members.”

Both adolescent boys and girls shared observations of increasing shared decision making in their homes, as well as a general enthusiasm towards the shift in decision-making practices, as their fathers have started to consult them and their mothers, as one adolescent boy said, “Now my father consults with my mother before selling out domestic cows.” Similar views were also expressed by adolescent girl stating, “earlier my father never asks our family members while taking any decisions but now he talks with us and then takes final decisions.” However, they also suggested continuing efforts where these are more engaged in decision making, as one adolescent boy shared, “We want more effective participation in decision making.”

Moreover, a positive change in how household decisions are made was also observed by community leaders, who noted





that “husbands and wives” are making decisions together in their home, but the specific nature of these decisions was not discussed. Community leaders also expressed attitudes holding onto the patriarchal status quo, with one stating, “in case of decision making and mobility, the wife should take permission from their husband.”

4.2. THE EFFECT OF POSITIVE MASCULINITIES

All respondents gave consistent positive feedback on improved spousal and family relationships, stemming from changed behaviours of male heads of households that open space for communication, involvement, and closeness.

4.2.1. SPOUSAL RELATIONSHIPS

Men also described improved relationships with their wives/partners, with many indicating their wives were happy. One man shared that he now makes a point of eating meals with his wife, because “he is more in love with her”. Women from all groups said they were happy with the changes in their husband/partners’ behaviour; as talking about the effects of Fathers Clubs, one woman said, “We spend more fun time together,” and another said, “(my) husband loves me very much. My husband is the best.” Some also pointed to a room for further improvement, noting that they still desired more loving relationships. Nonetheless, women in focus groups generally agreed relationships with their husbands were more amicable. The improvement of spousal relationships was echoed by the observations of adolescent children, especially girls, who spoke of improved communication, bonding and

of support their fathers now provide to their mothers; as one girl said, “My parents are the closest person[s] of my life. Their relationship has improved, and they are happy. That is why I am happy too.” Community leaders likewise generally observed greater caring, love, understanding, and bonding between husbands and wives.

ADOLESCENT GIRL, DOMAR

“My father wants to give quality time to my mother, and they talk about our future and ask my mother if any decisions should be taken.”

FATHER, KISHOREGANJ

Paraphrase: He now only eats together with his wife, doesn't eat food without her because they're more in love.

COMMUNITY LEADER, SAIDPUR

“Yes! Changes have made a positive difference in relationships between husband and wife.”

WOMAN, DOMAR

Paraphrase: Husbands are more interested to spend more quality time with their wives.

4.2.2. FATHER-CHILD RELATIONSHIPS

There is resounding evidence of improved relationships between fathers and their adolescent children. While fathers said children are happier and spoke of increased attention to the education of their children, adolescent girls and boys emphasized their happiness with the newfound closeness and attentiveness in their relationships with their fathers; as one adolescent girls shared, “Earlier I used to be very sad because my father scolds me and my siblings very much. But now he tries to listen to us, and I feel very good about it.”

Boys emphasized the reduced distance between father-son relationships, which traditionally had to be mediated by the mother, saying they were less afraid to speak directly to their fathers now; as one boy shared, “now we can directly talk with my father without having to speak to my mother first.” Both girls and boys used the word “friendship” to describe the relationships with their fathers. Adolescent boys also said that the difference is that fathers spend time with and talk with their children.

Both adolescent girls and boys also noted the valuing of girls by their fathers. One adolescent girl in a focus group shared that her father spends more time with her than before,

while another shared that “my father now lets me eat a big portion of fish along with my brother.” An adolescent boy in Domar also stated that his father is now more affectionate towards his daughter, as “My father loves my sister more”; and another adolescent boy from this community spoke of the inspiration he drew from his father’s new behaviour: “I feel so good when I see my father helping my mother and it inspires me to help her as well”. Community leaders also noted improvements in father-child bonding and spoke of a decreased emotional distance between fathers and their children.

Respondents have reported a distinct improvement in the treatment of adolescent girls. Fathers repeatedly mentioned the need to treat girls and boys equally. In addition to the examples of more friendship and affection demonstrated by fathers for their daughters, there is some evidence from adolescent girls and boys of fathers supporting the ambitions of their daughters, and in taking a more decisive stance on their protection from child marriage. Adolescent boys talked of greater awareness and a less accepting attitude of their fathers towards child marriage and some fathers also said they knew of some child marriages that had been averted as a result of the changed behaviours of fathers. One adolescent girl in Saidpur was also quoted as attributing her father’s participation in a Fathers Clubs to her increased life opportunities, “My father did not want me to study after my school. But after Fathers Clubs, he has admitted me into college now.”

4.3. TRIGGERS OF CHANGE AMONG MEN

Male respondents identified that Fathers Clubs sessions has not only taught them about their roles and responsibility in their families but has also shifted their thinking patterns away from stereotypical gender roles. One father, while describing how the Fathers Clubs educated him about sharing household chores and responsibilities, said: “Fathers get to know why the household work should be divided between husband and wife.” Several men confirmed that they pass on the information received during bi-weekly sessions to their wives, children and other men. Men particularly referred to the “Man Box” session as one of the most informative sessions.

FATHER, SAIDPUR

“I liked it the way I was shown the information on female health in the Fathers Clubs and as a result I accepted it and changed myself.”

WOMEN, SAIDPUR

Paraphrase: Husbands share details about Fathers Clubs sessions.

COMMUNITY LEADER, KISHOREGANJ

“We are fond of happiness and want to lead happy life. Members of the male group session are now leading happy family life and people of the surroundings want to be happy like them.”

Women across the three groups have also shared that their husbands have learned a great deal of information, specifically citing (a) advantages of participating in domestic chores and (b) taking care of women’s and children’s health. Community leaders also observed men be appreciative of Fathers Clubs sessions. The men found Fathers Clubs sessions not only of value for themselves but also started sharing information on gender roles within their family and friends.

Men unanimously reported that Fathers Clubs sessions triggered changes in their understanding of gender roles and their behaviors and practices in the household. Men also reported that the curriculum helped them to change their behaviour and they started participating in household chores, and peer effect further reinforced men to adopt positive masculinities and become considerate towards their wives and children, as one man said, “I shared my stories of change with friends and it has contributed in changes within me as well”. One male respondent, while acknowledging the effects





of Fathers Clubs sessions, shared: “I liked the way I was shown the information on female health in the Fathers Clubs and as a result, I accepted it and changed myself.” Similarly, women across the three locations also confirmed that it was Fathers Clubs sessions that brought about the positive changes among their husbands.

Both adolescent girls and boys in all three locations confirmed that it was the Fathers Clubs sessions that has caused positive changes in the behaviour and practices of their fathers, as one girl shared, “my father is a member of the male group and his behaviour changes after attending the session.” Similarly, the community leaders at all three locations resoundingly confirmed that Fathers Clubs curriculum and sessions enabled men to change their behaviour and to perform non-traditional caregiving and domestic activities and share their positive experiences with other men in the community.

ADOLESCENT GIRL, DOMAR

“My father now serves food for us if my mother is tired. This change happens when my father started going to the male group session.”

COMMUNITY LEADER, KISHOREGANJ

“The fathers are acting as agents of change.”

FATHER, DOMAR

“Previously I knew nothing about woman’s work and health, now I have learned a lot by going to the Fathers Clubs.”

WOMAN, KISHOREGANJ

“I am very happy that my husband has changed because of the Fathers Clubs session. I don’t want anything else.”

All categories of research participants have not only confirmed that men have found the Fathers Clubs curriculum and sessions of value, but it has also triggered positive changes in men’s behaviour and practices in the household, as they have started participating doing household chores and become considerate towards their wives and children. Furthermore, the Fathers Clubs sessions have also encouraged members to take these messages with other men within the community, and thus ripple effects are spreading within the target communities. Several men spoke about this ripple effect, as one man shared, “the neighbors have adopted the changes by watching changes in my attitude towards my family,” another man said, “I share my learning (from Fathers Clubs) with my customers in the shop, which encourages them (to adopt these learning).” Similarly, another man while sharing how his elder brother proudly shared his change with the extended family members and encouraging them to follow, said, “See, how my younger brother’s family has developed better communication among themselves and what are we doing actually?” A community leader also endorsed how Fathers Clubs learning is spreading among men, shared, “the men (from Fathers Clubs) are acting as agents of change; they are helping others to learn the necessity of working in households and assisting wives in their work.”

4.4. SOCIAL SUPPORT AND STIGMA

Societal and familial judgments were repeatedly cited as a barrier to be intentionally overcome by men who choose to challenge the norms of traditional masculinity by committing to adopting egalitarian behaviours within their family relationships. As one man said, “earlier people of my surroundings taunted me but now they are also positive with the change.” It is interesting to note that men themselves spent less time overall discussing this challenge than their partners and children and even community leaders, perhaps revealing that it is a preoccupation of diminishing size.

Women and adolescent girls spoke the most about stigma, potentially revealing a heightened sensitivity to the treatment of fathers. Women in focus groups universally mentioned

teasing, social stigma, etc. flowing from reaction to the changes in male behavior, as one woman said, “[my] sister-in-law made fun when husband was helping me during pregnancy.” The positive changes even created tensions within the extended family as an adolescent girl reported her mother was questioned by an aunt “My husband doesn’t do any household chores, why your husband does it?” However, women also agreed that in the beginning, men faced resistance from across the board when trying out new behaviours and sharing learning. One woman said, “sometimes husband stops helping after listening to the taunts. But he realizes he should not stop helping the wife on his own.” Chief among those named as disapproving were in-laws and neighbours.

Almost all men reported facing resistance or ridicule from the community after they started taking part in the household chores, confirming rigid gender roles in the target communities. Some also reported resistance from the elders in the family, as one man said, “It is really difficult to make the older people understand about the misconception of household works to be women’s work.” Additionally, male community members did not approve of the new positive behavioural codes among the members of the Fathers Clubs, as one man said, “Some people taunted and called me ‘Bharua’ (a tease for a man helping wife in household chores),” another man said, “initially I heard bad comments from my neighbors but I didn’t care.” The Fathers Clubs member respondents were unanimous that such community disapproval did not hinder them from changing their behaviour and practices to actively get engage with their families and do household chores or taking care of children.

WOMEN, DOMAR

Paraphrase: Mother-in-law says, why would their son do daughter-in-law’s works?

FATHER, DOMAR

“No one mocks me for my works, even if they do, I don’t care.”

ADOLESCENT GIRL, SAIDPUR

“My father was stigmatized by the community people. But he explained to them that it’s necessary to help in the households.”

Adolescent girls and boys talked about mocking behaviour or family, neighbours, as well as community members who observed men doing traditionally female chores. Criticism targeting men from the Fathers Clubs centered on their uptake of socially-ascribed ‘feminine’ tasks, including domestic work and childcare tasks, as one adolescent talking

about the outside resistance shared, “community people call fathers ‘half ladies’ for doing household chores.” Both adolescent girls and boys have also reported that initially neighbors, extended family members, and even fathers’ friends did not accept change in their fathers’ practices, including doing household chores and taking care of children. One adolescent boy shared, “Often my father was taunted by others, but now he doesn’t care of the jokes”. Adolescents reported their fathers had to endure ridicule as they were labeled ‘half -ladies’, ‘ladies’, and ‘Bharua’ (a Bengali taunt for a caring husband). Nonetheless, their fathers remained focused and people gradually started to accept new gender roles, as one man said, “earlier people of my surroundings taunted me but now they are also positive with the change,” another man also said, “earlier the community people did tease but now they realize and support.”

Community leaders across three locations have also identified that initially, the community did not approve men taking part in the household chores and taking care of children and would ridicule them. One community leader also



indicated that because of earning livelihood responsibilities men spent long periods away from homes and do not get enough time to contribute to household chores.

Across the three locations, men, women, adolescents' girls/boys and community leaders all have confirmed men experienced disapproval and even ridicule from the community, particularly from their parents, aunts and siblings, when they adopted new gender roles and started doing house chores and taking care of children. It is also clear that men did endure the ridicule and disapproval but remained committed to their new-found gender roles, for the welfare and well-being of their wives and children.

4.5. SUSTAINABILITY OF CHANGE

Fathers Clubs members themselves expressed that seeing changes in other members had helped men to change. Family members and neighbours played a role in influencing some fathers, and some found commitment to improving their children's future to be a motivating factor. Fathers repeatedly indicated the "Man Box"⁹ activity as one that stayed with them. The modeling of positive behaviours as a factor influencing children is also a factor affecting sustainability. Mothers in several focus groups discussed the lasting impact of their partner's positive behaviour upon the behaviour of their children.

Fathers overwhelmingly expressed their belief that the adopted changes were there to stay, as one man stated: "I am very happy with my changing attitude and I do not want to go back to the previous days." Many respondents stated these changes will endure, as another man said, "the behavior changes will last long because we are practicing in our house and becoming habituated." Avoidance of negative dynamics from the past was one driver of sustainability. Some men said they did not want to return to their previous ways, and some also expressed wanting to live a good and peaceful life – something they found this new way of relating to the world as a man was helping them to do. Community leaders echoed this and said, "The wife is getting time for rest and is happy for this; the husband is also happy with changes, he doesn't want to go to the previous situation." Fathers also expressed the intention of making further progress, such as ensuring their wife/partner takes more decisions on her own and encouraging boys to take part in household chores when they grow up. The intent for intergenerational learning favours the sustainability of the changes adopted.



The rewards of positive masculinity as a driver of sustainability were observed. Men talked about learning from the past and discussed their increased confidence as a result of the proven positive effects of these new behaviours. Confidence was also mentioned by community leaders, who attributed this to regular Fathers Clubs sessions and the development of awareness. Men also expressed their desire and enthusiasm to share their knowledge with others in their community who could benefit. One adolescent boy commented on the role model effect and shared, "Fathers have been role models to the people living around"; while another boy said, "The project might be temporary, but the changes are permanent". One adolescent girl explained the role of children in ensuring that this positive change would remain, and shared: "our fathers' knowledge from these sessions will not be faded. Even if it fades out, we will make him remember."

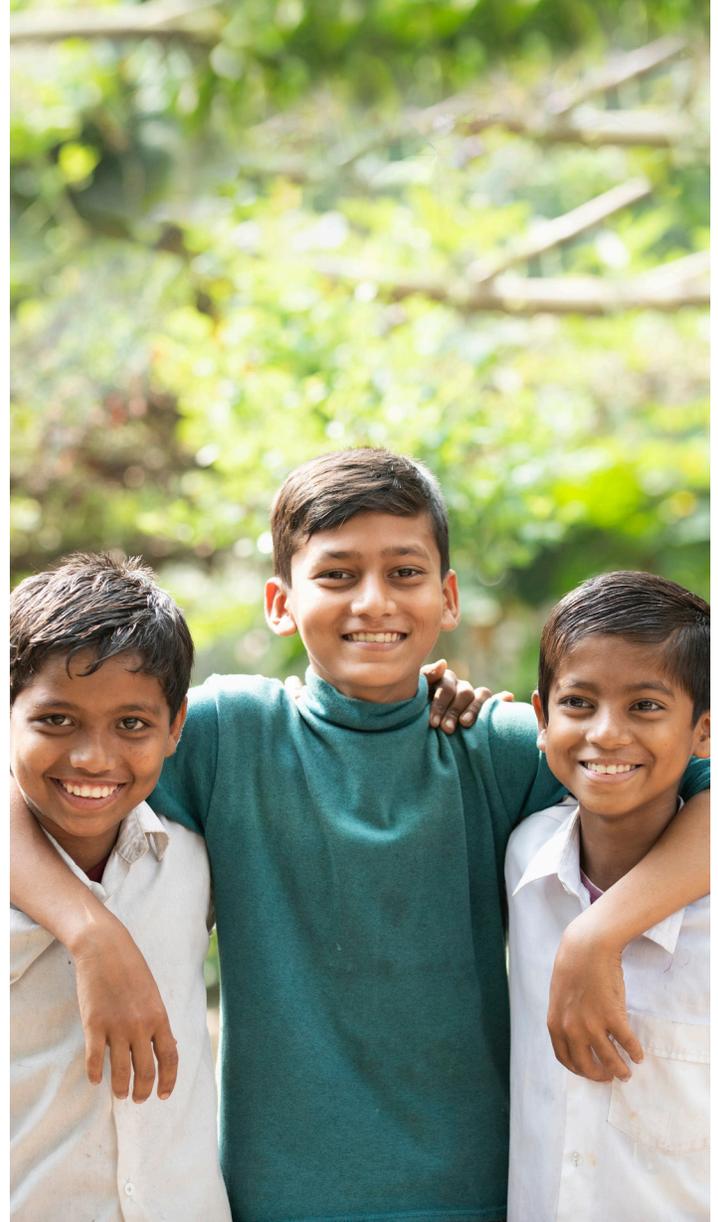
Community leaders talked about people "taking care of each other" in the community. They talked about the benefits of positive masculinity passing through the community like a ripple that would convince other men to change and that would help to sustain this way of being, as one community member shared, "We are fond of happiness and want to lead a happy life. Members of the male group session are now

9. It teaches men that by challenging society's expectations (stereotype male roles) of what it means to be a man and a father, fathers can become free of their "boxes" and able to decide for themselves how to be more involved, caring, and loving individuals.

leading happy family life and people of the surroundings want to be happy like them.”

5. CONCLUSIONS

The implementation of the Fathers Clubs in Bangladesh has demonstrated evidence of positive incremental behaviour change among many of its members. The individual and cumulative enactment of these behaviours deviate from and challenge the traditional social norms that perpetuate the rigid gender hierarchy that defines this context of unequal power relations. These reported behaviours challenged the unwritten rules that govern the domains of gender roles and responsibilities about housework and childcare, of decision-making on family assets and income, as well as the rules on how husbands and wives/partners, as well as fathers and their female and male children, are expected and permitted to interact. The reaction to these shifts in male behaviour has been overwhelmingly positive, resulting in reports of improved non-violent communication, closer spousal and family relationships and with examples that girls and women are being valued and that their rights are being considered, with some efforts towards their fulfillment, such as the abandonment of plans for child marriage, and supporting girls and women in their studies. The impact of positive role-modeling between fathers and sons and between men within the same community, is also noted. However, the rigidity of these norms is reflected in feedback about resistance to change, including the reluctance of women to place expectations upon their husbands/partners, and in their feedback that changes, although welcome, need to go further. Attribution of behaviour change to the participation in Fathers Clubs sessions was very direct.





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