

Lessons from Scaling-up Adaptations of Program P Gender- Transformative Couples' Intervention to Reduce IPV in Bolivia, Lebanon and Rwanda

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Promundo

Who are we?



The intervention

Program P

- Promote men's involvement in prenatal and postnatal care
- Promote the equal division of household labor and caregiving
- Increase men's self-efficacy as care-givers
- Promote positive communication and reduce parental and family stress and violence

Recognize the diversity in family types and structures

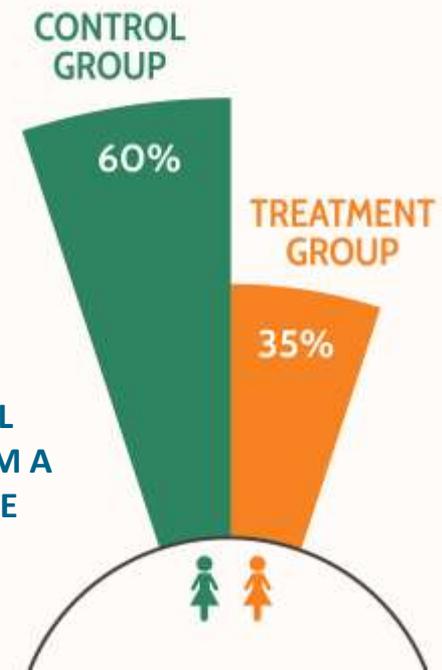


DID WOMEN LIVE FREE FROM SEXUAL VIOLENCE? Evidence from Rwanda

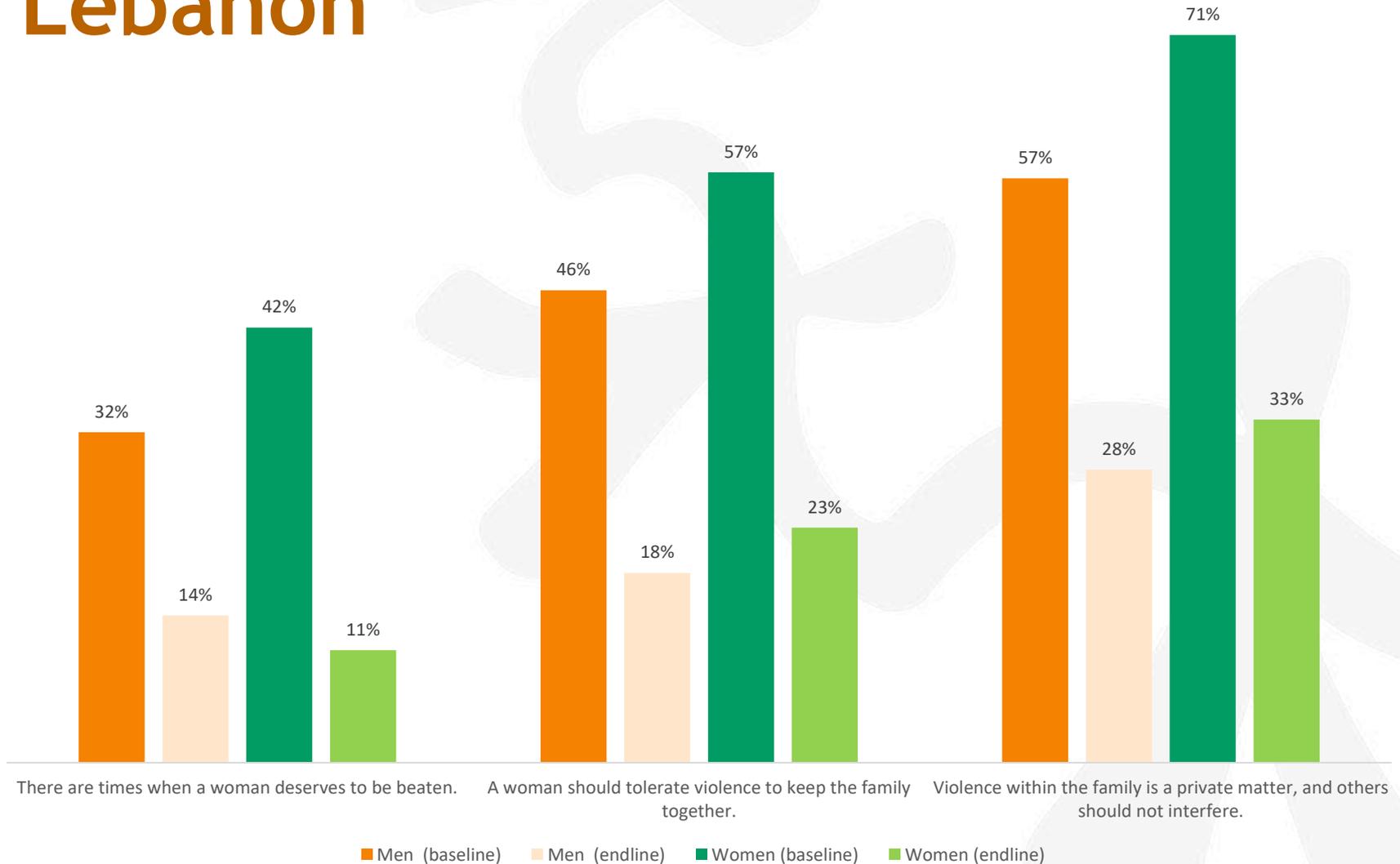
In follow up surveys, women in the intervention were 55% more likely to be living free from sexual violence than women who did not participate.



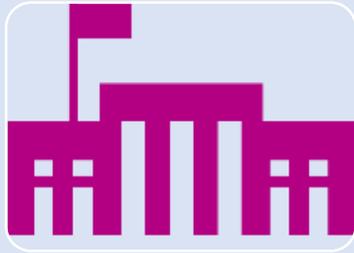
PERCENT WHO
REPORT SEXUAL
VIOLENCE FROM A
PARTNER IN THE
PAST YEAR



Evidence from Lebanon

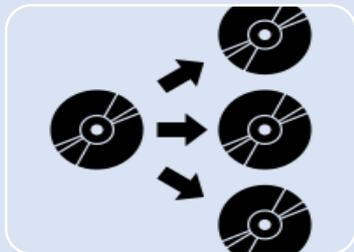


Achieving Impact At Scale



Vertical scaling up

Institutionalization through policy, legal, budgetary or other systems change



Horizontal scaling up

Expansion or replication by peers or other groups



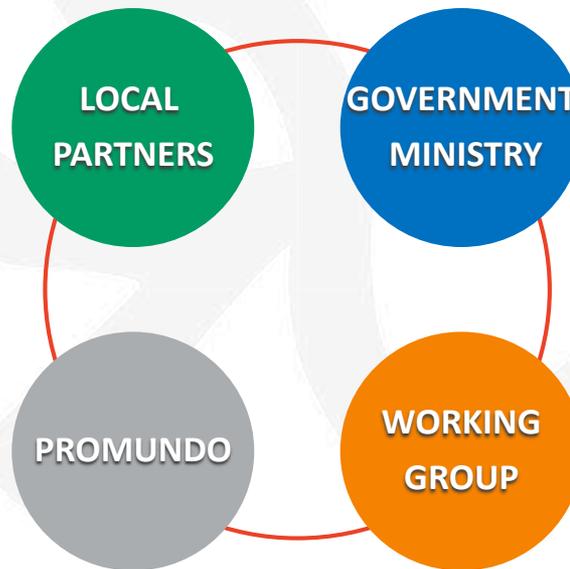
Spontaneous scaling up

Through activism or uptake by persuasion

Source: Bartel, D. PowerPoint. Planning workshop: Scaling Up Program P-ECD in Lebanon.

WORKING IN COLLABORATIVE TEAMS

Rwanda: Rwamrec
Lebanon: Abaad
Bolivia: Consejo de Salud Rural Andino



Examples from Rwanda Minister of Health and State Minister of Public and Primary Health

Multi-sectoral technical working group to inform the adaptation

Achieving Impact at Scale *in Rwanda*

The Bandedereho intervention was designed – with input from the Ministry of Health – to complement existing health system efforts to improve maternal and newborn health and child development, including men’s engagement.



- The intervention equips CHWs to promote the country’s desired child outcomes.
- Considering gender inequality as a social determinant of health, training CHWs on a gender-transformative approach works to positively impact all areas of their work.

Achieving Impact At Scale *in Lebanon*

Scale-Up Goal: Address parenting behaviors from inequitable and violent to gender-equitable, involved, inclusive, and non-violent.

How?: Work with the Ministry of Social Affairs to scale up vertically Program P-ECD across their Social Development Centers (SDCs) across the country.



Achieving Impact at Scale *in Bolivia*

Institutionalization at municipal level: Working with Unidades Educativas and Clinics in El Alto

- Targeted advocacy to ensure sustainability of implementation beyond project timeline

Trainings for health workers who are not directly implementing, but have interactions with participants

- Ongoing process evaluation to track the impact of the scale up and develop a guidance for other municipalities interested in institutionalizing Program P





El Alto, La Paz

LESSONS LEARNED

DESIGN



- Resist the urge to tinker with it too much
- Assessing time capacity of staff (both programmatic and implementing staff) to ensure supervision and quality control
- Creating a transition period to bring to scale
- Keep M+E as simple as possible and accessible language

PARTNERSHIPS



- Requires a strong local partner on the ground
- Partner for pilot and evaluation can be different than for partner for the government
- Look for alternative entry points for program (government partnerships i.e. Ministry of Health vs. Ministry of Gender)

FUNDING



- Be aware that there are shifts in cost at each stage
- Transition in scale might actually spike the cost to monitor that progress
- While possible to get multiple funders for the program need to be specific in the ask and not to deviate too much from the core

Challenges to scaling

- Compromises needed to intervention, but can be done in a way to maintain impacts and strengthen what does work
 - Drilling down to the core components of the program
- Loss of proprietary components and final decision-making power for program designers
- Context specific changes (i.e. government or other change) that impacts programs reach or buy in.
- Should the intervention be scaled?





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