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The Faith-Based Promotion of Gender Equality:
An Assessment of the
World Relief Families for Life Program
in Burundi

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An abstract of
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Abstract

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By Maddison L. Hall

Background: Gender is an important social determinant of health affecting people of all genders. In recent decades, development actors, including faith-based organizations, have given increased attention to gender and gender inequality. World Relief, a faith-based organization, began implementing the Families for Life (FFL) program in Burundi in 2014. FFL is a couples-based program designed to promote healthy relationship dynamics and gender equality using faith-based and secular messaging.

Methods: World Relief completed a survey of FFL program leaders and participants in Burundi in 2019 to assess measures of support for gender equality and healthy relationship dynamics. Data from this survey were used to produce between-group comparative analyses to assess leaders' and participants' support for gender equality using four metrics. Two sample T-Tests were used for comparisons by leader and participant status and by alcohol consumption, paired T-tests were used for comparisons by sex, and one-way analyses of variance were used for comparison by age and educational attainment. Additionally, qualitative thematic document analysis of the FFL program manual was completed to describe the religious, faith-based, and spiritual messaging used to promote gender equality.

Results: FFL leaders and participants exhibited moderate to high support for gender equitable norms and practices on the four measures of gender equality. There were no differences between leaders' and participants' responses on the measures. Males tended to have more support for gender equitable norms and joint decision-making. Leaders and participants who did not consume alcohol had higher support for gender equitable norms. There were no clear patterns relating to age or educational attainment. Analysis of the program manual revealed a mixture of religious and secular messaging to promote gender equality, with some religious messaging offering interpretations of scriptural texts more oriented with gender equality.

Conclusion: The cross-sectional nature of the survey data prevents conclusions about causation. However, the results appear to be promising for program implementation and provide program staff with evidence upon which to base program design, adaptations, and expansion. The qualitative analysis highlights the abilities of faith-based organizations to employ religious beliefs to encourage gender equality or healthy relationship dynamics and counter inequitable beliefs.

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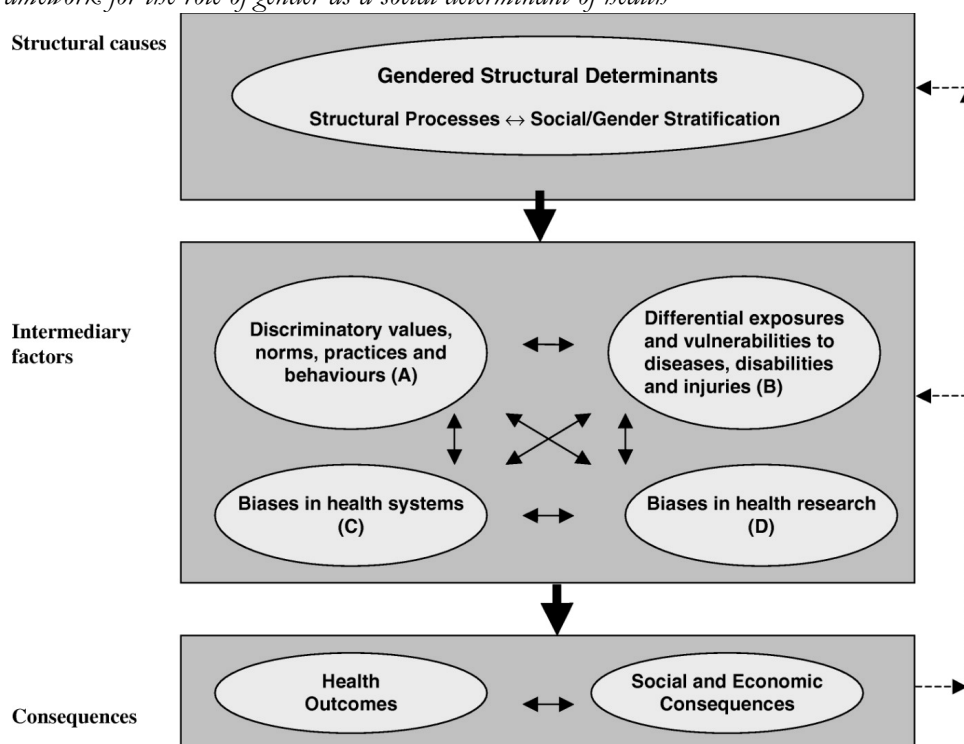
Chapter 1: Introduction

Introduction and Rationale

The pursuit of gender equality has been increasingly prioritized and has taken on a variety of forms in the global development context. The fifth goal of the Sustainable Development Goals (SDGs), which serve as a guiding agenda for development through 2030 under the auspices of the United Nations (UN), is to “achieve gender equality and empower all women and girls” (United Nations General Assembly [UNGA], 2015). Gender equality also held a place among the Millennium Development Goals (MDGs), the predecessor to the SDGs, which sought to promote gender equality as its third goal (UNGA, 2000, 2002).

Underlying this pursuit is the desire to address the myriad of negative outcomes associated with gender inequality at the individual, interpersonal, community, and societal levels. There is strong evidence that gender inequality directly impacts individual and community health, and it can negatively impact the health of people of all genders. Gender inequality has a direct relationship with gender’s role as a key social determinant of health. Sen, Östlin, and George’s (2007) framework describing gender as a social determinant of health, presented below, identifies the factors that lead to negative gendered health outcomes (Figure 1). These four intermediary factors – discriminatory values, differential exposures and vulnerabilities, health systems bias, and health research bias – are symptoms of gender inequality, as determined by structural determinants, and also serve to reinforce gender inequality.

Figure 1. Framework for the role of gender as a social determinant of health



Note. Reprinted from Unequal, Unfair, Ineffective and Inefficient. *Gender Inequity in Health: Why it exists and how we can change it*, by G. Sen, P. Ostlin, & A. George, 2007, p. 11, Women and Gender Equity Knowledge Network.

Gender inequality also impacts other aspects of life and society interlinked with health.

Recent efforts have demonstrated the high economic costs of gender inequality. Globally, bias and gender norms can prevent economic productivity at the individual level by limiting employment opportunities and restricting access to education (Wodon & de la Brière, 2018). Women are most affected by gender inequality in the economic sphere. Gender inequality also affects economic productivity at the national level. Economic growth potential is undermined at the national level when women are prevented from accessing employment opportunities and contributing to the economy (Wodon & de la Brière, 2018).

Addressing gender inequality requires understanding the intersecting sociocultural structures that inform beliefs about gender and how those beliefs are reproduced and perpetuated in societies. Feminist theorists and scholars have long posited that gender is a socially and culturally constructed

aspect of society (Butler, 1999; West & Zimmerman, 1987). Religion is one such social structure that informs beliefs about gender and gender equality (Woodhead, 2007, 2012). Religion and the interpretation of religious beliefs can also serve to perpetuate beliefs about gender roles, which dictate how people of certain genders are expected to act or perform in accordance with their gender (West & Zimmerman, 1987).

Given the growing body of evidence about the negative effects of gender inequality, a variety of actors in the development sphere have undertaken efforts to promote gender equality through programming and policy advocacy. This includes faith-based organizations (FBOs), which play a key, but little studied, role in global development (Heist & Cnaan, 2016). The United Nations Population Fund (UNFPA) has recognized FBOs as critical partners in the pursuit of gender equality, and a number of international FBOs have undertaken strategies and programming aimed at promoting gender equality (Catholic Relief Services [CRS], 2013; Karam, 2014; World Vision Australia, 2014). However, there is little information detailing the approaches of these FBOs, specifically as it relates to integrating gender equality into messaging about religion, faith, and spirituality.

Problem Statement

While much is known about the role gender inequality plays in affecting individuals and societies, the global development community is still working to identify the most successful methods to promote gender equitable practices. Early efforts to promote gender equality focused almost exclusively on women and girls, but more recent efforts have worked to include men and boys in gender equality programming (Greene & Levack, 2010). Yet, there is still a lack of robust inclusion of men and boys in gender equality programming for health promotion (Gibbs et al., 2012). A number of efforts that have included men and boys, often referred to under the umbrella of engaging men and boys in gender equality (EMBGE), have proven to be successful in improving

gender equality (Fulu et al., 2014; International Center for Research on Women [ICRW] and Instituto Promundo, 2016). One approach to involving men and boys in gender equality is couple-based programming (Greene & Levack, 2010).

World Relief, like other international organizations in the development sphere, has designed programs to address gender equality in the countries in which it works (World Relief, 2019c). One of their programs, Families for Life (FFL), is designed to shape beliefs and practices relating to gender equality (World Relief Program Resource Team, n.d., 2017). The program utilizes scriptural text and interpretations to encourage positive behaviors and address misconceptions about gender and relationships. FFL is an example of programming involving men in the pursuit of gender equality; the program is designed for heterosexual couples and promotes positive relationship dynamics aligned with principles of gender equality. Couples are involved in a series of interactive, educational lessons led by another couple from their community (World Relief Program Resource Team, 2017).

World Relief is a Christian FBO, and the organization centers their work on the local church (World Relief, 2016a). The FFL program takes place through World Relief's Church Empowerment Zone (CEZ) model, which has goals of promoting community transformation through development and faith (Albano, 2017; World Relief Program Resource Team, 2017). Through the assets-based CEZ model, World Relief works with community and church leaders to cultivate community-level buy-in for a menu of programming focused on community transformation (Albano, 2017). Each program, including FFL, integrates religion, faith, and spirituality. The FFL program is motivated through religious teaching, and each lesson integrates Biblical messaging directly into teachings on gender equality and relationship dynamics (World Relief Program Resource Team, 2017).

World Relief has implemented the FFL program in a number of countries, including India, Haiti, the Democratic Republic of Congo, Malawi, Indonesia (Papua), and Burundi (World Relief Program Resource Team, 2017). While all of these programs are implemented under the same

guiding principles of the FFL program, each country team contextualizes the information presented to be both relevant and culturally appropriate. Country implementation teams also develop and implement a monitoring and evaluation plan based on the overarching Logical Framework for FFL (World Relief Program Resource Team, n.d., 2017). As such, implementation varies across programs, and country-level evaluations are necessary to determine the effect of the program.

World Relief Burundi began implementing FFL in Kibuye Health District in Gitega Province in Burundi in 2014. In 2019, World Relief Burundi collected survey data from a sample of FFL program participant couples and lead couples.¹ The primary purpose of this survey was to use the information gathered to both improve the program and demonstrate the program's effects to key stakeholders in Burundi and the United States. World Relief also hopes to use this survey to address a gap in knowledge about the effectiveness of the FFL program in Burundi. Finally, World Relief recently received a grant from the John Templeton Foundation to expand Families for Life Programming to two additional health districts in Gitega Province, Ryansoro and Giheta, for the purpose of voluntary family planning promotion (Carl, 2019). The analysis of survey data will contribute to decision-making about program expansion.

Purpose Statement

The purpose of the quantitative analysis is to provide a cross-sectional description of a couples-based program aimed at improving support for gender equitable norms and three dimensions of relationship health in communities in Burundi. The analysis is bifurcated into a description of participant couples and lead couples to account for the additional training and support lead couples receive. Gaining a better understanding of the FFL program will provide World Relief with important information to guide decisions about implementation, and it will also

¹ Lead couples receive additional training to facilitate FFL. Participant couples are those couples who attended FFL sessions.

contribute to the body of knowledge about gender equality programming. The purpose of the qualitative thematic analysis is to describe the use of religious, faith-based, or spiritual messaging in the administration of gender equality programming. This analysis will provide insight into the approach of FBOs in promoting gender equality.

Research Questions

1. What are the attitudes of FFL program participants and leaders toward gender equality and relationship violence?
2. How do FFL program participants and leaders describe their relationships in the dimensions of joint decision-making and communication?
3. How is religious, faith-based, or spiritual messaging used to support teachings about gender equality and relationship dynamics in the FFL program manual?

Specific Aims

1. Assess FFL program participants' and leaders' reported attitudes toward gender equality, as measured using the Gender Equitable Men Scale (GEM Scale), and relationship violence, as measured using the Acceptance of Violence Index.
2. Assess FFL program participants' and leaders' perspectives on joint decision-making, as measured by the Participation in Decision-Making Index, and communication, as measured by the Couples' Communication Index.
3. Identify the presence of any independent variable(s) that significantly affects FFL program participants' or leaders' views on gender equality or relationship dimensions. Variables for consideration include respondent sex, educational attainment, alcohol consumption, and age.
4. Perform thematic analysis of the FFL program manual to identify and describe how religious, faith-based, or spiritual messaging is used to promote gender equality and healthy relationship dynamics.

Significance Statement

This study contributes to the production of knowledge that is useful at both the micro- and macro-level. From a micro-level perspective, the quantitative analysis completed here will supply a baseline for reference for World Relief to use in on-going program planning and evaluation. Products created as a result of the analysis will be utilized to inform stakeholder presentations, program adaptations in the field, and decision-making for program expansion. From a macro-level perspective, this study provides insight into the potential value programs like FFL can add to efforts to promote gender equality and health relationships.

This study also demonstrates the use of faith-based programming to address gender inequality in a society in which religion is pervasive and influential. It provides context and evidence to describe the broader role of FBOs in promoting gender equality as an aspect of faith-based development work. The qualitative analysis contributes to the development of knowledge around the types of religious messaging FBOs use when administering gender equality programming.

Definition of Terms

ANOVA	Analysis of variance
CAFOD	Catholic Agency for Overseas Development
CEZ	Church Empowerment Zone
CGCQ	Couples' Gender-Based Communication Questionnaire
CNC	Church Network Committee
DHS	Demographic and Health Surveys
DPT	Dyadic Power Theory
EMBGE	Engaging men and boys in gender equality
ESV	English Standard Version
FBO	Faith-based organization
FFL	Families for Life
FPC	Finite population correction
FY	Fiscal year
GBV	Gender-based violence
GEM Scale	Gender Equitable Men Scale
GII	Gender Inequality Index
HDI	Human Development Index
IDS	Institute of Development Studies
IGWG	Interagency Gender Working Group
IHDI	Inequality-adjusted Human Development Index
IPV	Intimate partner violence
NAE	National Association of Evangelicals
NGO	Non-governmental organization
NRA	Non-response adjustment
NRR	Non-response rate
RELATE	Relationship Evaluation Questionnaire
RHS	Reproductive Health Surveys
RWAMREC	Rwanda Men's Resource Center
RWN	Rwanda Women's Network
SDG	Sustainable Development Goal
SGBV	Sexual and gender-based violence
SRES	Sex-Role Egalitarianism Scale
SRPS	Sexual Relationship Power Scale
UN	United Nations
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development
WHO	World Health Organization

Chapter 2: Literature Review

Given the multifaceted nature of the program assessment, this literature review includes three key sections. First, I present relevant literature relating to the promotion and measurement of gender equality. Second, I review the role of religion and FBOs in development, with a particular focus on gender and gender equality. Finally, I include key context about World Relief, the FFL program, and Burundi.

Promoting and Measuring Gender Equality

As the pursuit of gender equality has risen to the top of the global development agenda, a variety of approaches to promoting gender equality have emerged. Some actors, like the UN, are driven by a women-centered view of gender equality promotion, even referring to the UN entity associated with gender equality as UN Women. In this view, gender equality is focused on allowing women and girls to reach the same level of status in society as men and boys (UN Women, 2017). The 2030 Agenda for Sustainable Development identifies gender inequality as a barrier to women and girls, and SDG 5 centers the empowerment of women and girls (UNGA, 2015). This approach is associated with global activism around the Beijing Declaration, which sought to address gender equality by improving the lives of women and girls (UN, 2014). This has led to gender equality programming and policies targeted almost exclusively at women and girls (Gibbs et al., 2012; Greene & Levack, 2010). It is also critical to note that global gender equality work is largely still structured within a binary view of gender and often fails to incorporate the needs of trans, intersex, and nonbinary populations in the pursuit of gender equality (Browne, 2019; Mason, 2018).

Engaging Men and Boys in Gender Equality

Recognizing the role men and boys play in gender equality, organizations have shifted their approach to better engage men and boys in these programs. This approach, referred to as engaging men and boys in gender equality (EMBGE), stems from the recognition that men and boys both

play a key role in promoting gender equality and also suffer from negative consequences relating to gender inequality (ICRW & Instituto Promundo, 2016). Some approaches utilize a gender-specific approach, focusing exclusively on men and boys to promote positive shifts in gender norms (Greene & Levack, 2010). Others take a combined approach to achieve gender transformation, working with men and boys and women and girls within the same program. Gender synchronization is a term created by the Interagency Gender Working Group (IGWG) to refer to programs that reach “both men and boys and women and girls of all sexual orientations and gender identities” (Greene & Levack, 2010). This approach is in opposition to the historical approach of focusing gender transformative programs exclusively on men or women.

Couples-Based Gender Equality Programming

Group-based and couples programming have had promising results in promoting gender equality (Fulu et al., 2014). Couples-based gender equality programming, or couples programming, works with a relationship dyad to promote positive outcomes related to gender equality. When implemented well, couples programming is an example of a gender synchronized approach to gender equality (Greene & Levack, 2010). A number of organizations in sub-Saharan Africa have taken on couples programming to shift attitudes and behaviors relating to health, gender equality, joint decision-making, communication, and intimate partner violence (IPV).

The Rwanda Men’s Resource Center (RWAMREC), under the MenCare+ program coordinated by Promundo and Rutgers University, implemented *Bandebereho* (“Role Model”), a “gender-transformative couples’ intervention” (Doyle et al., 2018). The program recruited men and their female partners to participate in a 15-session educational program focused on gender, decision-making, fatherhood, IPV, and other topics. In a two-arm multi-site randomized controlled trial of the program, fewer women in the intervention arm reported experiencing violence from their

partners than women in the control arm. Joint decision-making was also more common in the intervention arm than the control arm (Doyle et al., 2018).

SASA!, a community mobilization intervention created by Raising Voices in Uganda, was found to have an effect on gender inequality in relationship dynamics (Kyegombe et al., 2014). The intervention was evaluated through a cluster randomized control trial in eight communities in Kampala, Uganda. In these communities, both men and women in the intervention arms reported improved joint decision-making, open communication, distribution of household work, and appreciation for their partner's work. Men reported these positive changes in their relationship with a stronger effect than women. This positive change was not universal, and the evaluation identified several barriers to successful behavior change including fear and partial adoption of practices. Qualitative data from the evaluation highlight religion and religious beliefs as factors impeding the successful implementation of SASA! in some communities. The SASA! intervention engaged religious leaders in its implementation, but was not implemented by a FBO (Kyegombe et al., 2014). The SASA! approach has now been adapted for use in over 20 countries (Raising Voices, n.d.).

Building on successful elements of SASA! and other program experience, CARE Rwanda, RWAMREC, and Rwanda Women's Network (RWN) designed and implemented the Indashyikirwa ("Agents of Change") program, which focused on reducing IPV and increasing support for women who had experienced violence in selected communities in seven districts of the country (Dunkle et al., 2019; Stern, 2018). One of the pillar activities of the program was intensive participatory training with couples. The couples programming consisted of 21 sessions in a five-month period and provided training on power, gender equality, violence prevention techniques, and gender roles. In an early process evaluation of the program, participants deemed couple's programming to be acceptable and even appreciated (Stern & Nyiratunga, 2017). The program experienced initial challenges with men dominating sessions, but with continued training the program saw improvements in gender-

balanced participation (Stern & Nyiratunga, 2017). Indashyikirwa was implemented as a community randomized control trial where intervention communities received the violence prevention activities, while control communities only received the existing Village Savings and Loan program from CARE Rwanda (Dunkle et al., 2019; Stern, 2018). Results of the impact evaluation revealed that women who participated in Indashyikirwa had reduced experiences of physical and sexual IPV both 12 and 24 months after the program. Couples in the program also reported improved communication, better relationship quality, and reduced acceptance of wife beating (Dunkle et al., 2019).

In South Africa, researchers engaged male-female relational dyads in gender equality programming designed to reduce HIV risk and incidence (Minnis et al., 2015). The study was delivered as a cluster-randomized field experiment to compare three different intervention arms. The first intervention arm engaged women alone in a Women's Health CoOp, the second intervention arm engaged members of heterosexual couples in gender-separate programming (Men's Health CoOp or Women's Health CoOp), and the third intervention arm engaged members of couples in a joined program (Couples Health CoOp). All intervention arms met for the same amount of time over the course of two sessions and covered the same topical content, although in slightly altered formats. The study identified only modest effects in all three intervention arms, with each arm experiencing success in improving relational power balances and perceptions of equity in different ways. Findings from this study highlight the need for both gender-separate and combined couples programming (Minnis et al., 2015).

Couples programming has also been used to augment existing gender-specific programming. In Cote D'Ivoire, a women's economic empowerment initiative added "gender dialogue groups" as a supplement to its women-focused program (Gupta et al., 2013). The gender dialogue groups were evaluated in a two-armed pilot randomized control trial. Both treatment and control communities received women's economic empowerment activities, while only the treatment communities received

the gender dialogue group programming. Within the gender dialogue groups, women and their male partners participated in dialogue sessions focused on addressing gender equity within the household. The evaluation did not find statistically significant differences in women's reported experiences of violence, but acceptance of violence against wives was significantly reduced in the treatment arm (Gupta et al., 2013).

Gender equality may also be included as a component of existing couples programming. For example, Project Connect, an HIV prevention intervention for couples in Johannesburg, South Africa, incorporated objectives relating to gender and improved communication into their HIV prevention messaging (Pettifor et al., 2014). In a small pilot study of the intervention, couples reported improved communication and attributed a reduction in relationship violence to their new communication skills. However, it is important to note this pilot was conducted as a feasibility study and did not statistically evaluate the success of the program (Pettifor et al., 2014).

Couples programming for gender equality is not without criticism. The approach is not always considered to be gender transformative. Many couples-based programs limit their focus to the improvement of relationships as opposed to shifting individual beliefs and practices about gender (Greene & Levack, 2010). Additionally, just as global development organizations have lagged in incorporating gender diversity in gender equality programs, couples programming is most often focused on monogamous, heterosexual relationships, which can emphasize and reinforce heterosexual norms (Browne, 2019; Greene & Levack, 2010).

Metrics of Gender Equality and Relationship Dynamics

The measurement of gender equality, including aspects of relationship dynamics related to gender equality, presents a variety of challenges. However, global actors have designed a variety of metrics to measure beliefs and practices relating to gender equality. In the context of this assessment, four metrics of gender equality and relationship dynamics are most relevant for

discussion: support for gender equitable norms, acceptance of violence, joint decision-making, and couples' communication.

Support for Gender Equitable Norms. Gender inequality is perpetuated in part through the reproduction of inequitable gender norms in society (Sen et al., 2007). Inequitable gender norms are differential social expectations or roles imposed on women and men (Barker et al., 2007; Scott et al., 2014). Assessments of individual and community support for equitable gender norms are useful in describing local context, designing programs, and measuring the progress of programs designed to support gender equality (Singh et al., 2013). While measuring support for gender equitable norms does present challenges, developing metrics to capture support for gender equality is critical for programs and policies that designate improved gender equality as an intended outcome, and there are several widely accepted measurement tools in use. One of the most commonly used is the Gender Equitable Men Scale (GEM Scale); this is also the measure of support for gender equality used in the FFL survey (World Relief Program Resource Team, 2017). Researchers at Promundo and Horizons developed the GEM Scale using qualitative research with young men in Brazil (Pulerwitz & Barker, 2007). While this scale was originally designed to be used with young men, it has been tested and is now used with men and women across wide age groups (ages 10 to 59) (Singh et al., 2013). The scale includes two subscales: the first measures support for inequitable norms and the second measures support for equitable norms (Nanda, 2011). Questions on the GEM Scale assess feelings relating to sexual relationships, acceptance of violence, homophobia, domestic or household labor, and reproductive health (Adamou & Bisgrove, 2017a; Nanda, 2011).

Items on the GEM Scale are adapted or removed to best suit cultural contexts, which has led to widespread use of adaptations of the scale in describing local context and measuring program impact on gender equity (Adamou & Bisgrove, 2017a; Nanda, 2011; Singh et al., 2013). In Uganda, researchers validated the GEM Scale amongst two age groups (ages 10 to 14 and ages 15 to 24),

uncovering high support for gender inequitable norms (Vu et al., 2017). The inequitable gender norms subscale was also tested and found to be a statistically valid measure of gender norms in Tanzania and Ghana (Shattuck et al., 2013). The GEM Scale can be and has been used to explore associations between beliefs around gender and associated behaviors. Data from the International Men and Gender Equality Survey (IMAGES), a six-country survey incorporating adapted versions of the GEM Scale, found that men with higher support for gender equity drank alcohol less frequently, were better educated, and had increased communication with their sexual partners (Barker et al., 2011).

While the GEM Scale is widely used at present, several older or less-used measures of support for gender equitable norms also exist. The Sex-Role Egalitarianism Scale (SRES) measures the acceptance of women exhibiting traditionally masculine behaviors or traits, and vice versa (King et al., 1994). The Compendium of Gender Scales developed for C-Change includes three scales relating to support for equitable gender norms, one of which is the GEM Scale (Nanda, 2011). The Gender Beliefs Scale assess respondents' beliefs about gender roles to determine if the beliefs are more traditional or progressive. The Gender Norm Attitudes Scale also seeks to identify egalitarian attitudes toward gender norms for men and women (Nanda, 2011).

Acceptance of Violence. Like the pursuit of gender equality, the perpetration of gender-based violence (GBV) has become a global health priority, and organizations have taken on integrated approaches to address GBV and gender equality (Chibber & Krishnan, 2011; Dahlberg & Krug, 2002; World Health Organization [WHO], 2009). The promotion of gender equality is considered an integral piece of GBV prevention, as GBV is both a symptom and cause of gender inequality (WHO, 2009). Furthermore, an analysis of longitudinal, representative population survey data from 44 countries demonstrated that support for norms that justify violence against wives is predictive of levels of partner violence (Heise & Kotsadam, 2015). As such, many gender equality

programs incorporate violence prevention messaging in their programs and include measures evaluating the acceptance of GBV and IPV, the most common type of GBV, as metrics of support for gender equality (WHO, 2009).

Many of the measures assessing support for gender equitable norms, including the GEM Scale, also incorporate items relating to acceptance of violence. Two additional measures in the Compendium of Gender Scales are used to measure acceptance of violence. The Sexual Relationship Power Scale (SRPS) measures power in sexual relationships to describe relationship control (Nanda, 2011). It includes items relating to sexual, physical, and IPV. The Gender Relations Scale, which uses some items from the GEM Scale and SRPS, is also designed as a measure of power in sexual relationships and includes items relating to IPV (Nanda, 2011).

The FFL survey utilizes a standardized set of acceptance of violence questions employed in Demographic and Health Surveys (DHS) (World Relief Program Resource Team, 2017). The DHS Program utilizes these questions, grouped under the title of “Attitude towards Wife Beating,” as one measure of women’s empowerment (Croft et al., 2018). The questions ascertain whether the respondent believes a husband is justified in hitting his wife in a set of five different scenarios (Croft et al., 2018). Analysis of these questions in sub-Saharan Africa has revealed high levels of acceptance of violence across the region (Asaolu et al., 2018). This series of questions from DHS is widely relied upon for statistical exploration of women’s empowerment and acceptance of violence and has been used to develop additional measures and indices of empowerment (Ewerling et al., 2017). Cross-sectional analysis of these DHS questions from ten countries reveal that men’s acceptance of violence is significantly positively associated with the perpetration of violence in five countries (Bangladesh, Bolivia, Malawi, Rwanda, and Zimbabwe) (Hindin et al., 2008).

Joint Decision Making. The inability for women to participate in decision-making at the household and institutional level has been identified as a key obstacle to achieving gender equality

(Burkevica et al., 2015; Hillenbrand et al., 2015; O’Neil & Domingo, 2015). Existing gender inequality and restrictive gender norms are also understood to limit women’s decision-making power in their own lives, in the lives of their families, and in the public domain (Kabeer, 2005). Thus, women’s participation in decision-making at the private and public levels is a commonly used indicator of women’s empowerment and agency, which both contribute toward gender equity and equality. In fact, the ability to participate in decision-making or make decisions about one’s own life is often incorporated into definitions of agency and empowerment (Ibrahim & Alkire, 2007). Ibrahim and Alkire (2007) propose separating decision-making at the private level into two indicators. One of these indicators measures power over personal decision-making, indicating the individual’s control over their everyday life, and the other, more commonly used, indicator measures participation in household decision-making. Researchers collecting data on household decision-making have used this indicator to describe intra-household power dynamics and empowerment. Participation in household decision-making has been demonstrated as a key factor for an individual’s wellbeing (Ibrahim & Alkire, 2007).

Participation in household decision-making appears as an indicator in a number of descriptive surveys and in program monitoring and evaluation (Croft et al., 2018; Hillenbrand et al., 2015; Ibrahim & Alkire, 2007). It is one of the most commonly used metrics of women’s empowerment included in DHS country surveys (Croft et al., 2018; Ibrahim & Alkire, 2007). Like acceptance of violence, the measures of household decision-making appear amongst the women’s empowerment questions of the DHS (Croft et al., 2018). The group of three questions, which ascertains a woman’s participation in decisions in three different domains, facilitates the construction of an index, which MEASURE Evaluation considers “the most direct measure of women’s empowerment” (Adamou & Bisgrove, 2017b; Croft et al., 2018). The FFL survey utilizes the household decision-making index from the DHS, which is considered to be an internationally

comparable metric (Hillenbrand et al., 2015; Ibrahim & Alkire, 2007; World Relief Program Resource Team, 2017). There are a variety of other scales and indices ascertaining women's participation in decision-making. These measures, including the Household Decision-Making Scale in the Compendium of Gender Scales, follow a similar format but vary in the different domains of decision-making included; for example, some scales choose to leave out questions about household purchases (Ibrahim & Alkire, 2007; Nanda, 2011).

However, there are a number of concerns with the measurement of participation in decision-making and the use of this measurement as an indicator of women's power, agency, or empowerment. First, it does not capture if the individual could influence the decision if they wanted to. Further, it assumes that the domains of decision-making are domains that carry importance to the household, ignoring the possibility of delegation of unwanted tasks (Ibrahim & Alkire, 2007). For example, data indicating women exert control in traditionally female domains, like decisions about household food consumption or childcare, may not be useful in describing women's empowerment. Additionally, the notion of joint decision-making can be a challenging concept to explain and can be interpreted in various ways (Hillenbrand et al., 2015). In some contexts where it is not considered socially acceptable for women to participate in decision-making, women may be disinclined to accurately describe their participation in decision-making at the household level so they do not disrupt social expectations (Doss et al., 2014). Measures of household decision-making may also over-emphasize the importance of the husband-wife relationship in determining empowerment, as these questions are framed solely in the context of the husband-wife relationship (Hillenbrand et al., 2015).

Couples' Communication. Couples' communication is a less studied and utilized indicator of women's empowerment (Malhotra et al., 2002). If communication is included as an indicator of empowerment, it is often limited to women's ability to negotiate decision-making around

contraceptive use and engaging in sexual relationships (Hillenbrand et al., 2015; Malhotra et al., 2002). However, despite limited focus on couples' communication as a measure of empowerment or equality, it is still an important metric to consider in gender equality programs. This is especially true of couples programming that seeks to improve communication as a method to reduce violence, equalize decision-making, and improve relationship quality. Couples' communication has been demonstrated to be significantly associated with relationship satisfaction, intimacy, and sexual satisfaction (Yoo et al., 2014). Additionally, shifts in communication patterns can indicate progress toward shared power and decision-making (Hillenbrand et al., 2015). Communication patterns are strong indicators of power relations, and social scientists' exploration of Dyadic Power Theory (DPT) highlight the role of power in shaping communication in relational dyads (Dunbar, 2004). An individual's perception of their own power, which is influenced by relational factors, shapes their communication styles and patterns of communication in a relational dyad or couple. Thus, power imbalances in a couple can shape the couple's communication patterns, including communication about decision-making (Dunbar, 2004).

Due to the limited focus on couples' communication as a measure of empowerment and equality, there is not a standard or most commonly used measure of couples' communication. Many of the measures in existence focus on contraceptive behavior and sexual relationships, as discussed above. For example, the Couple Communication on Sex Scale, included in the Compendium of Gender Scales, focuses on measuring couple's communication as it relates to their sexual relationship (Nanda, 2011). This could be a limiting measure of couple's communication, as it only focuses on communication in one domain; however, understanding communication patterns in the context of sex, an interaction highly influenced by power relations, may be extremely illuminating of power balances or imbalances. Other measures, like the GEM Scale and the Gender Relations Scale,

include singular items relating to communication about condom use and contraception (Nanda, 2011).

The Relationship Evaluation Questionnaire (RELATE), developed by social sciences researchers and educators, provides an inventory of questions that can be used with individuals and couples to evaluate different relational domains (Busby et al., 2001). In use with couples, the inventory allows couples to rate themselves and their partners on items relating to communication styles, which can be analyzed to identify whether these styles are predominantly positive or negative (Busby et al., 2001; Yoo et al., 2014). While RELATE covers a variety of topics, researchers have utilized isolated sections of the questionnaire to assess certain relationship domains (Yoo et al., 2014). Like RELATE, the Couples' Gender-Based Communication Questionnaire (CGCQ) allows individuals to assess their own and their partner's communication styles (Eckstein & Goldman, 2001). Both the RELATE and CGCQ questionnaires were designed to be utilized in research and as preliminary step in couple's counselling and have not been used widely in monitoring or evaluation.

The FFL survey utilizes a series of communication questions developed for the World Health Organization (WHO) Survey on Women's Health and Life Events (García-Moreno et al., 2005; World Relief Program Resource Team, 2017). These questions were designed to be asked of women participating in the survey (García-Moreno et al., 2005). The set of four questions allows the respondent to determine whether they have discussions with their partner about daily occurrences and feelings (García-Moreno et al., 2005).

Religion, Gender, and Faith-Based Organizations

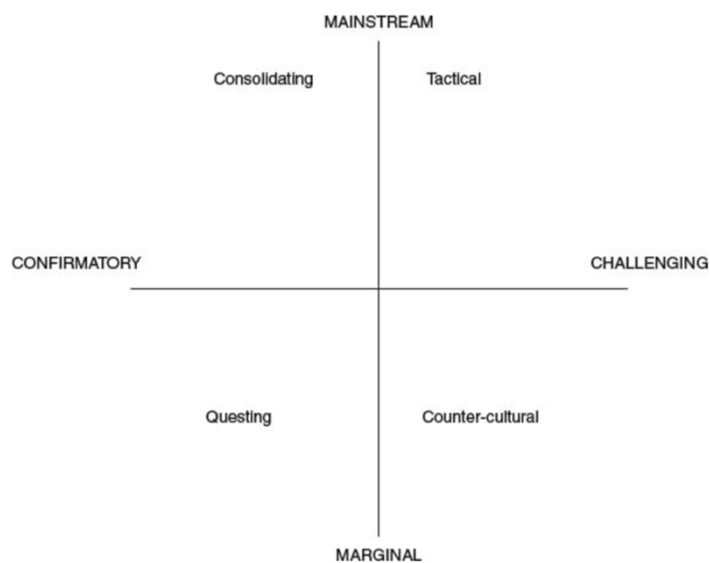
Religion plays a critically influential role in shaping culture and society by influencing beliefs, values, norms, and behaviors. Religion contributes to the development of beliefs about gender, and religious beliefs, interpretations, and practices can perpetuate and alter gendered realities in societies and cultures (Sen et al., 2007). The relationship between religion and gender is multi-faceted and

behaves in different ways based on religious tradition, interpretation, and social, cultural, and historical context. Religion may perpetuate gender inequality through restrictive interpretations or beliefs, but religion may also subvert traditional gender hierarchies (Woodhead, 2007, 2012). Both faith-based and secular actors have recognized the role religion plays in enhancing or restricting gender equality, and FBOs have incorporated gender equality programming into their broader portfolio of global development work.

The Relationship between Religion and Gender

Religious scholar Linda Woodhead (2007, 2012) proffers a depiction of the relationship between religion and gender that captures the variety of ways in which these two structures interact. She argues that religion and gender are structures that “serve to represent, embody and distribute power within society,” and these two power structures are interrelated in ways that cannot be separated. Religion is both situated in relation to existing gendered power structures and religion is also mobilized as a strategy in relation to existing gendered power structures. Religion is situated in relation to gender on a continuum from mainstream, or integrated within existing power structures, to marginal, or existing outside dominant interpretations. Religion’s strategy exists along an intersecting continuum from confirmatory, reinforcing existing power distributions, to challenging, resisting or changing existing distributions or order. Woodhead (2007, 2012) depicts these continuums in a diagram, which produces four categorizations of the relationship between religion and gender (Figure 2). Religion may be consolidating, reproducing and validating gendered norms. It may also be tactical, both supporting existing gendered structures and also providing avenues to subvert these structures. Religion could play a questing role, existing outside gendered power structures but also facilitating access to existing gendered power. Finally, counter-cultural religion exists outside gendered power structures and is also used to disrupt gendered power structures (Woodhead, 2007, 2012).

Figure 2. Religion's positioning in relation to gender



Note. Reprinted from "Gender Differences in Religious Practice and Significance," by L. Woodhead, 2007, in *The SAGE Handbook of the Sociology of Religion*, edited by J. A. Beckford & N. J. Demerath III, SAGE Publications Ltd. Copyright 2007 by SAGE Publications Ltd.

Critical analysis of religions and religious actors can facilitate greater understanding of the interplay between religion and gender. Birgit Heller (2001) produces an analytical approach to explicate both historical and current manifestations of gender equality in religion. To describe a religion's approach to gender equality, she proposes analyzing women's status and roles in a religious tradition; the cultural images, ideas, stereotypes, and norms, about women in a religious tradition; and how women, as religious subjects, reproduce and transform the discourses of their religious tradition (Casanova, 2009; Heller, 2001). While this approach embodies a woman-centered view of gender equality, it does allow more nuanced analysis of religious belief and practice. This analysis can illuminate the role of religion in constructing and perpetuating beliefs about gender and, as a consequence, how those beliefs could affect gender equality or inequality.

The depictions of the relationship between religion and gender makes clear that there cannot exist one, unified perspective, approach, or portrayal of gender in any of the world's religions; however, many secular actors have not always, and still do not, recognize this variation. Instead,

secular actors tend to reduce religious perspectives on gender to conservative, fundamentalist approaches that would be considered gender inequitable or unequal. Certainly, there do exist examples of religious actors or traditions imposing restrictive gender norms or resisting movements towards gender equality. Recent global movements to address gender equality have spurred debate in religious communities, with more conservative sects of Catholicism, Hinduism, and Islam pushing against the questioning of traditional gender norms in favor of biologic destiny (Joy, 2006).

However, reducing any one religious tradition to essentialist, fundamentalist interpretations of that tradition ignores the vast variation of beliefs amongst religious actors and individuals practicing religion (Casanova, 2009). It also has implications for religious actors, including FBOs, engaging in work around gender, which will be explored in a later section of this literature review.

Faith-Based Organizations as Global Development Actors

While there is some variation in applications of the term “faith-based organization,” this review relies upon the widespread definition from Clarke and Jennings (2008): a faith-based organization is “any organization that derives inspiration and guidance for its activities from the teachings and principles of the faith or from a particular interpretation or school of thought within the faith.” This definition is centered on faith as opposed to religion, which broadens its applicability and recognizes the nuanced relationships between religious tradition and faith practice (Clarke & Jennings, 2008).

Religious actors and FBOs have long played a role in global development. The Muslim practices of *zakat*, *sadaqa*, and *qard hasan*, which all originate in the Qu’ran, represent some of the earliest forms of religious charitable giving to promote human and economic development; these practices compel Islamic communities to provide financial support to the destitute (*zakat*), and encourage them to voluntarily support charity (*sadaqa* and *qard hasan*) (Atia, 2011). Within Christian traditions, some of the earlier representations of religion in global development can be traced to

international mission work (Heist & Cnaan, 2016). Religious institutions in the United States began sending missionaries on international assignments in the early 1800s. Though missionaries' primary focus was to evangelize to their host communities, they ultimately became involved in promoting health, education, and economic development. Religious institutions and FBOs have continued to engage with these topics in the realm of global development, and data from the National Center on Charitable Statistics indicate that 59 percent of international development organizations registered in the United States are faith-based (Heist & Cnaan, 2016). Religious actors from a variety of traditions have also played influential parts in facilitating peacebuilding and conflict resolution (Berger, 2003).

However, the role of FBOs in development has not been without criticism and contention, and secular development actors have questioned whether FBOs can, or should, be labeled as development actors. Spirituality and religion have historically been viewed as "taboo" in development theory and practice, and publications devoted to development rarely included more than passing reference to religion in the late 20th century (Ver Beek, 2000). Some scholars have traced this ignorance of religion in development to two beliefs: that the importance of religion would reduce as societies develop and secularize, and that religion is an obstacle to development because it opposes egalitarianism (Deneulin & Rakodi, 2011; Tomalin, 2011).

The longstanding view that religion's importance would wane and society would secularize has received less attention as religion has maintained its status as a critical influence in society (Deneulin & Rakodi, 2011). The societal influence of religion is particularly apparent in sub-Saharan Africa, where religious beliefs have remained resilient and religion continues to carry public importance (Ter Haar & Ellis, 2006). Because of the public importance of religion, religion can also carry power to pursue developmental aims. Ter Haar and Ellis (2006) explain the role religion can play in promoting peacebuilding and conflict resolution, good governance, wealth creation, education, and health in the context of development in Africa. Meaningful engagement with religion,

including religious actors and institutions, can further the development agenda (Deneulin & Rakodi, 2011; Ter Haar & Ellis, 2006).

While secular development actors are now recognizing the power of religion's influence, many continue to hold skeptical views of the role of FBOs in promoting development. Because of this, some secular actors have purposefully excluded FBOs and religious non-governmental organizations (NGOs) from their work (Berger, 2003). This skepticism is often rooted in misunderstanding and even in prejudiced assumptions about religious beliefs and practices (Marshall, 2018; Ter Haar & Ellis, 2006). It may also stem from what secular development actors perceive as restrictive religious beliefs at odds with development principles (Deneulin & Rakodi, 2011; Ter Haar & Ellis, 2006; Tomalin, 2011). Some scholars have even called partnerships between multi-lateral organizations, like the WHO, and FBOs paradoxical, as multi-lateral organizations were developed from secular principles of the enlightenment (Grills, 2009). Partnerships with FBOs also raise concerns around proselytization and evangelism for many secular actors. This concern is based largely in historic perceptions of missions-based evangelism, but recent evidence indicates that most religiously-affiliated development organizations place a primary focus on service delivery as opposed to proselytization (Heist & Cnaan, 2016). Finally, while religious actors have worked to promote peace, the role of religion in recent conflicts cannot be ignored in the context of global development, as conflicts like civil war and humanitarian emergencies are considered a key obstacle to development (Berger, 2003; Heist & Cnaan, 2016).

Despite the apparent power of religion in pursuing development and the longstanding, though disputed, role FBOs have played in global development, there is still little systematic analysis of the influence and impact religion and FBOs have had on global development (Heist & Cnaan, 2016). Though limited, there have been some attempts to gather and generate evidence of the role of religious organizations in promoting development. Some scholars have focused on understanding

the role of faith in promoting development within a certain sector. A 2015 review of the role of faith-based health care found that there was little evidence available on faith-based health care outside of sub-Saharan Africa and Christian organizations. Even using these criterion, there was little robust or systematic evidence available to evaluate the influence of faith-based health care providers and the authors recommended further research (Olivier et al., 2015). Other research has focused on understanding faith-based development at a national level. For example, Olarinmoye (2012) presents a robust landscaping of FBOs in Nigeria, including their reach, focus, funding, faith association, and obstacles constraining success.

Faith-Based Organizations and Gender Equality Programming

Development actors have also begun acknowledging the role religion plays in gender equality. The teachings of nearly all of the world's religions present a perspective on the role of women and gender equality, and religious actors, institutions, and leaders continue to engage in debate and teaching around key issues affecting gender equality (UNFPA, 2016). Some secular organizations and institutions, like the World Bank, UNFPA, and the United Nations Development Programme (UNDP), have explicitly recognized the importance of working with FBOs on gender programming (Karam, 2014; United Nations Development Programme [UNDP], 2014; World Bank, 2019). To coordinate the faith-based efforts throughout its agencies, the UN has established the Inter-Agency Task Force on Engaging Faith-Based Actors for Sustainable Development (UN Inter-Agency Task Force on Engaging Faith-Based Actors for Sustainable Development, 2018). Secular organizations have begun partnering with FBOs to implement gender programming, including programming designed to promote gender equality (UNFPA, 2014). For example, UNFPA partnered with FBOs in Ethiopia to create the Developmental Bible, a supplement to Ethiopian Orthodox Christian religious teachings that includes messaging on gender equality that complements canonical texts (UNFPA Ethiopia, 2010).

Though secular actors have only recently turned to religious actors and FBOs as genuine partners in gender equality programming, FBOs have independently undertaken gender-related programming for some time. Both local and international FBOs implement gender equality programming, but given the nature of the assessment presented herein, this discussion is restricted to the activities of international FBOs (or, those FBOs that work in more than one nation). International FBOs undertake gender equality programming using a variety of approaches, which will be surveyed below. The review of faith-based programming included here is not intended to be exhaustive; instead, the programs described are meant to illustrate the scope of work of international FBOs addressing gender equality.

Given the importance of religious and faith leaders working in communities of faith, a number of international FBOs have designed training activities for faith leaders to promote gender equality. World Vision, one of the most well-known Christian FBOs, has had an international presence since 1950 and now works in over 100 countries (Marshall et al., 2007). The World Vision Channels of Hope program to provide faith leaders with training to promote development in their communities (World Vision, 2013). Channels of Hope for Gender, the curriculum focused on promoting gender equality, equips faith leaders, their spouses, and their communities to better understand gender and actively plan to address gender inequity (World Vision, 2019). The program has documented changes in faith leaders' perspectives on gender-based violence in South Sudan and in shifting faith leaders' perspectives on traditional gender roles in Uganda (World Vision, 2014, 2019). The World Council of Churches, which bridges Christian denominations and brings together churches and fellowships from more than 110 countries, also incorporates gender justice and gender equality into their ecumenical theological education and faith leader training initiatives, though few details about the content included are publicly available (World Council of Churches, 2007, 2015). Christian Aid, which has worked as an international development agency for sponsoring churches

for over 70 years, also incorporates faith leader training into their approach to gender justice (Christian Aid, 2017b, 2017a). There is also little information on the methods and messaging used in their initiatives.

International FBOs, interfaith consortia, and development actors have also developed toolkits for working with communities to address issues of faith and gender. Tearfund, a Christian charity working internationally to address extreme poverty, developed the Reveal toolkit to be used with communities and churches to promote community transformation around gender (Tearfund, 2015, 2019). The resources in the toolkit provide practitioners with the opportunity to identify gender-related concerns in their faith communities, explore these concerns with the use of Bible studies, and plan action to address the concerns (Tearfund, 2015). The Catholic Agency For Overseas Development (CAFOD), which works internationally on behalf of Catholic churches in England and Wales, designed their Believe in Change toolkit to promote gender equality (Haque, 2018). The toolkit provides reference to Biblical teachings and includes the perspectives of women in the church to promote gender equality at the individual, family, community, and society levels (Haque, 2018). Notably, not all toolkits or campaigns addressing faith and gender have directly involved FBOs, religious actors, or faith leaders. For examples, the Institute of Development Studies (IDS) collaborated with Sonke Gender Justice and the Wits Centre for Diversity Studies to create the Gender, Sexuality and Faith. While this toolkit is designed for use in communities to promote acceptance of gender equality and sexuality, the actors involved in the design of the toolkit are not faith-based or faith-inspired (Institute of Development Studies [IDS] et al., 2016).

While faith leader training and community-based toolkits typically have clear objectives or methods related to faith, FBOs also administer other gender equality programming that may not have primarily faith-based objectives or methods. Faith may be incorporated into these gender equality programs but promoting faith or shifting religious beliefs is not the primary objective and

faith-based methods may not be used. For example, Catholic Relief Services (CRS), a Catholic organization working in international aid since 1943, implements a USAID-funded functional organizational development programming in Burkina Faso using a gender transformative lens (Catholic Relief Services [CRS], 2015a, 2015b). The program, Families Achieving Sustainable Outcomes, promotes gender equality by encouraging women's equal participation in communities and providing women with leadership opportunities, but it does not have faith-based aims or methods (CRS, 2015a).

FBOs have also undertaken gender equality work using the EMBGE approach in programming. Tearfund's Transforming Masculinities program works with men in communities to prevent sexual and gender-based violence (SGBV) in sub-Saharan Africa (Tearfund, 2018). Though Tearfund is a Christian organization, Transforming Masculinities addresses and works to refute harmful interpretations of passages from both the Bible and Qu'ran (Tearfund, 2018). FFL uses a similar approach, incorporating verses from the Bible into lessons delivered to participant couples (World Relief Program Resource Team, 2017).

Faith-Based Content in Gender Equality Programming

In addition to skepticism about the role of religion in global development, many secular actors are also apprehensive about the faith-based content in gender equality programming delivered by FBOs. Some concern over the content of faith-based programming is warranted. For example, in the context of HIV prevention work, research from Kenya, Uganda, and South Africa has indicated that FBOs may have encouraged HIV stigma and discrimination. This same research indicated that messaging from religious leaders often promoted gender inequitable norms and placed the burden of HIV on women and girls in their communities (Chikwendu, 2004; Eriksson et al., 2010; Mwaura, 2008; Otolok-Tanga et al., 2007). This gender bias may be facilitated in part by the overwhelmingly male leadership in religious institutions (Aylward et al., 2012). There have been more recent efforts

by religious leaders and institutions to address the harm caused by this messaging (Otolok-Tanga et al., 2007). However, like all institutions, FBOs and religious institutions are not a monolith, and judgements cannot be made about the gender-related messaging of FBOs based on these examples alone.

The lack of knowledge about the faith-based content and messaging used by FBOs in their dissemination of gender equality programming likely contributes to ongoing hesitation to actively include religion, religious actors, and FBOs in the pursuit of gender equality. Much scholarship exists explaining theoretical beliefs and views of the world's religions on gender equality and the role of women, but there is little transparency about the specific messaging used by FBOs and religious actors (UNFPA, 2016). At the 60th session of the UN Commission on the Status of Women, UN Women and the World YWCA gathered a convening of international actors to discuss religion and gender equality with a focus on ways faith actors can be best engaged in gender equality work (UN Women, 2016). In the convening, participants representing various religious traditions recognized the challenges in overcoming the suspicion secular organizations hold towards FBOs. In an effort to address this suspicion, and misunderstandings about FBOs, participants of the convening produced a series of recommendations for faith actors. The first recommendation explicitly aims to demystify the messaging faith actors use in promoting gender equality by encouraging the dissemination of the work of “feminist faith organizations” and drawing attention to gender equitable interpretations of religious beliefs (UN Women, 2016).

FBOs have made some efforts to increase transparency around faith-based content in gender equality programming. Most commonly, programs or institutions provide information on the broad religious impetus of their efforts. Other programs, like the toolkits from Tearfund and CAFOD, described earlier, include Bible verses in their lessons that promote gender equality (Haque, 2018; Tearfund, 2015). However, Biblical references alone do not capture the application or interpretation

of these verses to gender equality messaging. It is less common for programs to describe the specific interpretations or applications of faith-based beliefs in the programs or services delivered. Channels of Hope for Gender, the faith leader training from World Vision, is an example of a program that both provides the religious justification for the program and also some indication of the messaging used in the training (Kilsby, 2012; World Vision, 2019). An evaluation of the program details Biblical references and the interpretations used to promote gender equality, though it is unclear if the evaluation includes all of the faith-based messaging from the program (Kilsby, 2012). Efforts like this provide more insight into how scriptural interpretations are used to promote gender equality in faith-based content and demonstrate how this content aligns, or does not align, with the approaches and priorities of secular development actors.

Contextual Overview: Implementing Agency, Program, and Location

Implementing Agency: World Relief

World Relief has a nearly eighty-year history of providing international faith-based aid and assistance (World Relief, 2015). The organization was originally known as the War Relief Commission, a project of the National Association of Evangelicals (NAE), until changing its name to World Relief in the 1950s. World Relief's early work prioritized the provision of aid in response to man-made and natural disasters, including war, famine, earthquakes, and flooding. While delivering in-kind aid is still a key function of the organization, it has expanded its role as a development actor by offering long-term programs focused on a variety of outcomes (e.g., economic independence through microfinance, HIV/AIDS awareness and care, child health promotion and vaccination) (World Relief, 2015). World Relief is not one of the largest evangelical FBOs operating in the global development sphere. Major examples of evangelical organizations are World Vision, Baptist World Aid, and Compassion International (Marshall et al., 2007). To compare program expenditures, in fiscal year (FY) 2018, World Relief spent \$22 million on overseas

programming (World Relief, 2019b). World Vision spent more than thirty times that amount on international program services in FY 2018 (\$776 million) (World Vision, n.d.).

World Relief organizes its work into four issue areas: disasters; extreme poverty; refugees, immigrants, and displaced people; and violence and oppression (World Relief, 2016a). These issue areas are further divided into eight programmatic sectors: health and nutrition, family strengthening, disaster response, economic development, peacebuilding, child development, refugee and immigration services, and advocacy and mobilization (World Relief, 2019a). In FY 2018, World Relief had twenty-four program and partner countries and hosted US-based offices in thirteen states, including its central Home Office in Baltimore, Maryland. The organization served five million program beneficiaries in FY 2018 and estimates that 80% of program beneficiaries are women and children (World Relief, 2019a). Just over half of World Relief's program expenses in FY 2018 were dedicated to US-based program ministries, with 40% of expenses dedicated to overseas program ministries and 8% dedicated to disaster response (World Relief, 2019b).

Faith is woven throughout World Relief's organizational identity. World Relief remains a subsidiary of the NAE, which represents evangelical Christians across denominations in the US with the goal of strengthening faith and leadership. World Relief functions as the "relief and development arm" of the NAE (National Association of Evangelicals [NAE], 2019). World Relief's mission is "to empower the local church to serve the most vulnerable" (World Relief, 2016a). The organization's guiding values also demonstrate their commitment to faith. World Relief values a church-centered, sustainable, and holistic approach to its work. The organization also puts forth seven statements highlighting the belief in the power of the church to change the world (World Relief, 2016a). World Relief is registered independently as a 501(c)(3)-1 organization in the United States, a designation reserved for "organizations organized and operated for *religious*, charitable, scientific, testing for

public safety, literary, or educational purposes, or for the prevention of cruelty to children or animals” [emphasis added] (26 U.S. Code § 501, 1986; World Relief, 2017).

Beyond statements of mission, values, and beliefs, World Relief’s activities and programs are also grounded in faith. The organization endeavors to effect change through partnerships with churches in the US and globally. World Relief distinguishes itself from other development organizations because of these direct partnerships. World Relief’s US-based church partnerships focus on supporting their work through the generation of funds, awareness, and volunteers (World Relief, 2016b). NAE considers World Relief a platform to provide opportunities for US-based churches to become involved in humanitarian assistance (NAE, 2019). Globally, World Relief works with local churches to deliver programming and, in FY 2018, over three thousand churches were involved in these programmatic partnerships (World Relief, 2019a).

Program: Families for Life

World Relief has designed the FFL program to promote the development of healthy relationships and strong families under its family strengthening programmatic sector. World Relief envisions healthy relationships as the starting point for healthy families, who then help to build healthy churches. Healthy churches are able to reinforce the growth and development of healthy relationships and families. Focusing on these three areas—relationships, families, and churches—allows World Relief to fulfill its overall mission to empower churches to support vulnerable populations (Figure 3). While the FFL program is targeted towards churches, World Relief has designed the FFL model to be applicable outside of the church; “non-churched” couples can benefit from the model because it is based on a common goal of family strengthening (World Relief Program Resource Team, 2017).

Figure 3. Achieving World Relief's mission through FFL



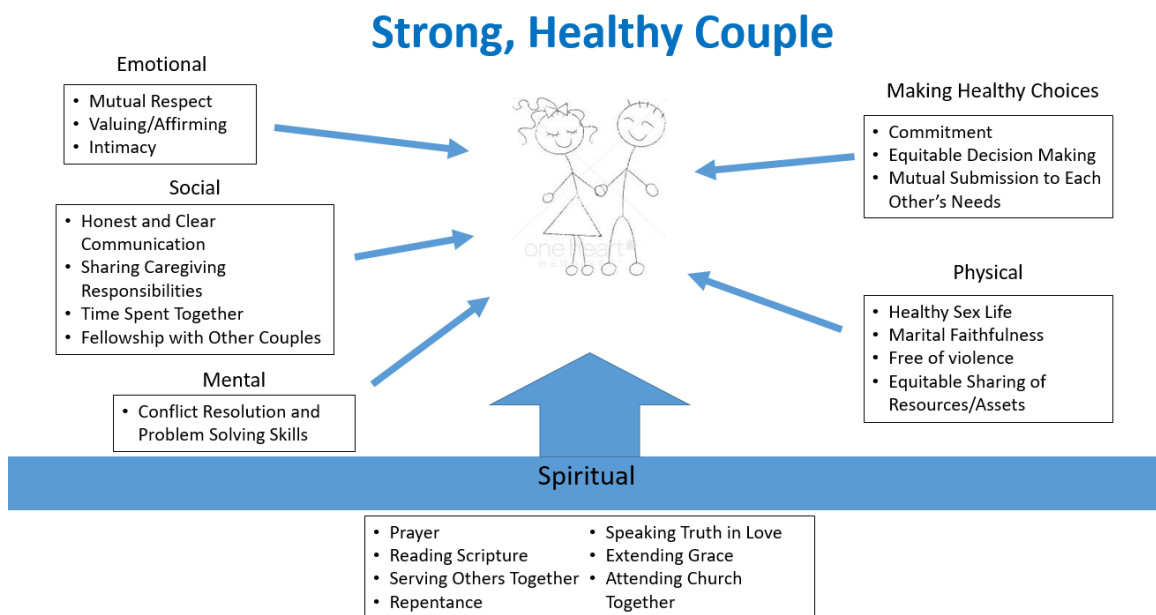
Note. Reprinted from *World Relief Families for Life Toolkit* [Unpublished program document], by World Relief Program Resource Team, 2017, p. 6.

The primary focus of FLL is the development of healthy relationships. FFL uses a couple-programming approach. Heterosexual couples are enrolled in the program and participate together in a series of lessons focused on strengthening their relationship. The program is facilitated by lead couples, who receive initial training and ongoing support. Lead couples are nominated and selected by their local churches and they must demonstrate attributes of a healthy relationship and be willing to commit to program facilitation (*Selection of Lead Couple Facilitators*, n.d.). Each lead couple participates in a group training of approximately twenty couples. The training lasts for four to five days for between five and six hours per day. Couples are coached on facilitation techniques, the use of storytelling, program planning and monitoring, and the use of the FFL manual. After this initial training, lead couples received an annual refresher training and are visited by a staff promoter once a month (D. Dortzbach, personal communication, 2 March 2020).

The FFL approach has been designed to strengthen marriages and can also be used with engaged couples as a form of pre-marital support. FFL aims to strengthen couples' relationships by focusing on six relational attributes: emotional, social, mental, making healthy choices, physical, and spiritual (Figure 4). World Relief has identified traits, characteristics, or practices in each of these areas that signify the organization's view of a strong, healthy relationship. Spiritual traits,

characteristics, and practices form the foundation of a healthy relationship, while the remaining attributes contribute to the continued maintenance and growth of the relationship (World Relief Program Resource Team, 2017).

Figure 4. World Relief's "Strong, Healthy Couple"

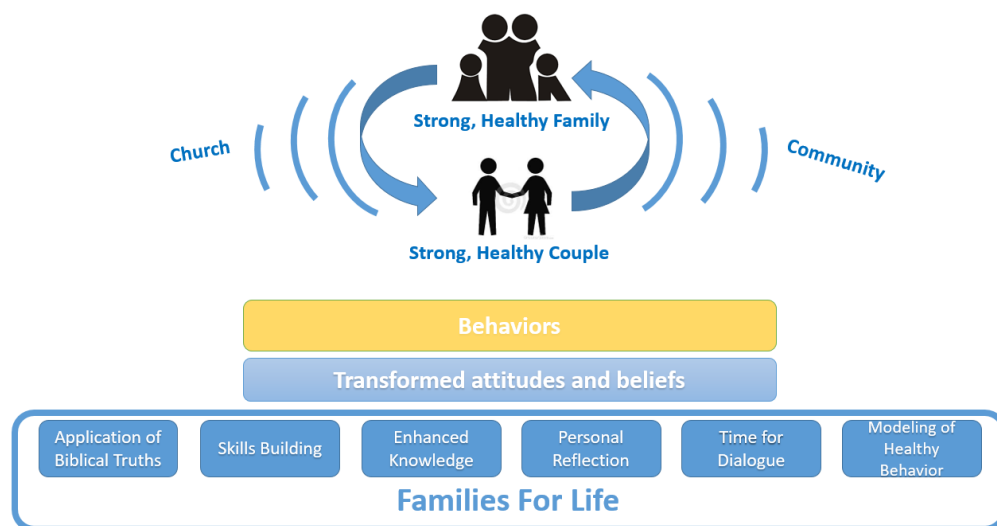


Note. Reprinted from *World Relief Families for Life Toolkit* [Unpublished program document], by World Relief Program Resource Team, 2017, p. 5.

To achieve these overarching goals, World Relief designed the FFL Theory of Change (Figure 5). There are six “building blocks” that form the basis of the FFL methodology and the foundation of the Theory of Change: application of Biblical truths, skills building, enhanced knowledge, personal reflection, time for dialogue, and modeling of healthy behavior. These building blocks are the approaches used to build knowledge and influence attitudinal change throughout the FFL program, which the FFL Theory of Change posits will lead to behavior change within the participant couples. This behavior change will strengthen the couple, which will also strengthen the

couple's family, having reverberating effects on their church and their community (World Relief Program Resource Team, 2017).

Figure 5. FFL Theory of Change



Note. Reprinted from *World Relief Families for Life Toolkit* [Unpublished program document], by World Relief Program Resource Team, 2017, p. 5.

The FFL Theory of Change has been translated into a logical framework (logframe), which guides the FFL monitoring and evaluation process. Each World Relief country office is encouraged to adapt the logframe to include additional relevant indicators based on local adaptations to the program. The goal of the FFL program as stated in the logframe is “To foster strong, healthy couple relationships that support the well-being of families and the greater community” (World Relief Program Resource Team, n.d.). The logframe includes two outcomes. The first outcome is that “facilitators and FFL couple participants change practices and behavior.” Indicators associated with this outcome include the number of couples reporting improved communication, change in shared household decision-making behaviors, change in family planning discussions, change in experiences of abuse in the marital relationship, and change in male caregiving behaviors. There are five outputs associated with this outcome: the creation of a contextualized curriculum; challenging facilitators in

their own practices, behaviors, and attitudes; the preparation of facilitators; the formation of FFL groups; and challenging participants in their own practices, behaviors, and attitudes. The second outcome, “multiplication of Families for Life groups in wider community,” does not include any outputs (World Relief Program Resource Team, n.d.).

FFL is integrated into World Relief’s Church Empowerment Zone (CEZ) Model. World Relief uses the CEZ Model to promote development in communities and to ensure integration across a variety of community- and church-level activities. The CEZ Model allows World Relief to partner with church and community leaders to identify the programs of most benefit to the church and community (Albano, 2017). FFL was designed to complement World Relief’s existing church-based programming and FFL functions as a ministry of each church that adopts the program. Pastors, congregants, and Church Network Committees (CNCs) play roles in implementing FFL, either as participants, facilitators, role models or mentors, or planners (World Relief Program Resource Team, 2017).

World Relief has established FFL programs in India, Haiti, Indonesia (Papua), Malawi, Democratic Republic of Congo, and Burundi. In 2020, World Relief intends to expand the program into Kenya, Rwanda, South Africa, and Cambodia (Dortzbach, 2019b). While World Relief guides the overall FFL development process at the international level, each country office is required to create a locally adapted, culturally sensitive version of the FFL curriculum. This may require adapting content to align with cultural or religious beliefs held in that country. The overarching programmatic goals remain the same, but the delivery of material and focus of lessons may shift slightly between countries. This is a critical step in the FFL implementation process that builds community buy-in and allows facilitators to deliver messaging in culturally relevant ways (World Relief Program Resource Team, n.d., 2017).

Location: Burundi

Burundi is a nation in East Africa with a projected population of 11.2 million as of 2018 (Eggers & Lemarchand, 2019; World Bank, n.d.). The population is largely rural, with only 13% of residents living in urban areas, making it one of the least urbanized countries in the world (UN Department of Economic and Social Affairs, Population Division, 2019). Burundi is divided into eighteen administrative provinces, which are subdivided into administrative communes (Central Intelligence Agency [CIA], 2020; Eggers & Lemarchand, 2019). The nation also established a district health system in 2007, adding a new class of administrative subdivisions within provinces to create health districts (Nsengiyumva & Musango, 2013). Health district catchment areas encompass multiple communes within a province.

Figure 6. Map of Burundi



Note. Reprinted from “Africa: Burundi” in *The World Factbook*, by CIA, 2020.

The nation is characterized by low levels of development. The 2019 Human Development Index (HDI), which measures human development across three domains of life², places Burundi in

² A long and healthy life (measured by life expectancy), access to knowledge (measured by mean years of schooling of adults and expected years of schooling for children), and a decent standard of living (measured by Gross National Income [GNI] per capita) (UNDP, 2019a).

the low human development category (UNDP, 2019a). The nation has seen immense growth in development as measured by the HDI (43.4 % growth between 1990 and 2018), but still lags behind some neighboring nations and the rest of Sub-Saharan Africa. Burundi's Inequality-adjusted HDI (IHDI) captures a 30% loss in development due to inequality. The Gender Inequality Index (GII) provides a measure of gender-related inequalities in reproductive health, empowerment, and economic activity. The 2019 GII for Burundi was 0.520, which placed in the bottom quarter of the 162 nations for which GII was calculated in 2019. However, Burundi's Gender Development Index (GDI), which measured gendered differences in development using the same metrics from the HDI, indicates equal levels of development between women and men (UNDP, 2019a).

Life expectancy at birth is low (61.2 years), and women tend to live longer than men (63 years versus 59.4 years). Male children are expected to attend schooling for one year longer than female children, and adult males have one year more of education on average than adult females (UNDP, 2019b). Formal marriage is not common; only four in ten women and men ages 15 to 49 are married, with an additional 14.8% of women and 11.8% of men reporting living with a partner (MPBGP et al., 2017). Marriage for women under the age of 18 is still quite common, with one-fifth of women ages 20 to 24 reporting that they were married before the age of 18 (UN Women, n.d.). Thirty percent of women of reproductive age in a marriage or union have an unmet need for family planning, and nearly half (48.5%) of all women above the age of 15 have experienced violence (UNDP, 2019b).

World Relief first began working in Burundi in 1964 with the delivery of medicine, food, and clothing to more than 67,000 people (World Relief, 2015). The organization's programmatic work began in 2004. Since this time, World Relief has undertaken several programmatic efforts including Savings for Life, a financial empowerment program, and community health worker trainings addressing leading causes of child mortality. World Relief began implementing FFL in Burundi in

2014 and staff in Baltimore and Burundi have created a contextualized FFL manual used to facilitate the program (World Relief Burundi, 2013). World Relief has implemented FFL in the Kibuye Health District, which is a part of Gitega Province, and will expand the program into Ryansoro Health District and Giheta Commune in 2020 (Carl, 2019; Dortzbach, 2019a).

Burundi: Gender and Religion in Context

Culture and religion play a large role in shaping gender norms and expectations in Burundi. Gender roles are rather rigid, with women holding traditional caretaking responsibilities and men serving as the representative of the household (Rames et al., 2017). Men are expected to make decisions on behalf of the household, but women are often held responsible for malfunctioning households. These rigid gender norms and expectations can serve as facilitators for physical exploitation and IPV (Rames et al., 2017). A CARE Burundi study of gender norms found that men viewed violence as both punishment and a “preemptive measure” to encourage women to perform their duties (Basse & Kwizera, 2017). Traditionally, women are not permitted to have their own resources like land. While women did not traditionally hold public leadership positions, shifts in sociocultural norms and the implementation of representative quotas in some areas have increased women’s participation in public life (Rames et al., 2017). In a 2012 survey from Afrobarometer, the majority of respondents believe women should have equal rights and they do not believe women are treated unequally in society (Ndikumana, 2015).

The 2016-2017 DHS collected information on the participation of women in household decision-making (Ministère à la Présidence chargé de la Bonne Gouvernance et du Plan [MPBGP] et al., 2017). Women and men ages 15 to 49 were asked who in the household makes decisions in two domains of household life (health of women and large household purchases). The majority of men reported that decisions about women’s health and household purchases were made jointly (66.7% and 60.7%, respectively), but many men still said they were the primary decision maker (28.8% and

36.2%). Women also described high levels of joint decision-making on women's health and household purchases (59.7% and 60.3%). Women were also asked who makes decisions about their ability to travel to visit family or friends, and 67.5% of women report making these decisions jointly (MPBGP et al., 2017). Women in urban areas and more educated women are more likely to participate at some level in decisions than women in rural areas or less educated women (MPBGP et al., 2017). Table 1, below, displays information about the participation of women in decision-making in Gitega Province, where World Relief has implemented FFL.

Table 1. Participation of women in decision-making, Gitega Province, Burundi*

	Gitega	Burundi
Percent of women who participate^a in decision-making about		
Her own health care	76.1	72.0
Important household purchases	70.9	69.0
Visiting family	88.0	81.0
Percent of women who participate in all three decisions	62.3	60.0
Percent of women who participate in none of the decisions	8.0	13.0
* As reported by women ages 15-49 who are in a union.		
^a Includes both joint and independent participation.		
Data Source: MPBGP et al., 2017		

The DHS also surveyed men and women ages 15 to 49 on their opinions on wife beating. Men and women were asked if a husband was justified in beating his wife in five given scenarios: if she burns food, if she argues with him, if she goes out without his permission, if she neglects the children or if she refuses to have sex (MPBGP et al., 2017). The majority of women (62%) thought wife beating was justified in at least one scenario, but only one-third of men (32%) thought wife beating was justified in at least one scenario (MPBGP et al., 2017). Rural and less educated men and women were more likely to believe wife beating was justified than urban or more educated men and women (MPBGP et al., 2017). Table 2, below, displays information about acceptance of wife beating in Gitega Province, where World Relief has implemented FFL.

Table 2. *Opinion on wife beating by gender, Gitega Province, Burundi*

	Gitega		Burundi	
	Women ^a	Men ^a	Women ^a	Men ^a
Percent who believe it is acceptable for a husband to beat his wife if				
She burns the food	17.0	3.0	22.0	5.0
She argues with him	33.8	8.9	30.0	10.0
She goes out without telling him	38.0	15.2	39.0	17.0
She neglects the children	54.4	28.1	52.0	26.0
She refuses to have sex with him	41.8	8.4	42.0	14.0
Percent who believe it is acceptable for a husband to beat his wife in at least one situation	64.2	35.3	62.0	35.0
^a Ages 15 to 49. Data Source: MPBGP et al., 2017				

Religion plays an influential role in Burundian culture and society. Religious affiliation is nearly universal in Burundi, with only one percent of women and two percent of men ages 15 to 49 reporting that they do not practice a religion in the 2016-2017 DHS. The majority of the population identifies as Christian, most of whom are Roman Catholic (MPBGP et al., 2017). Religion has played a role in the ethnic tension experienced in Burundi between members of Hutu and Tutsi groups (Eggers & Lemarchand, 2019). Beginning in the 1970s, the government of Burundi undertook efforts to limit the influence of the Roman Catholic Church, as the church's efforts were considered favorable to the Hutu (Eggers & Lemarchand, 2019; Minorities at Risk Project, 2004). Anti-Catholic policies were put into place in the 1970s and 1980s and later repealed, and the Catholic Church played a role in peace efforts in the 1990s (Minorities at Risk Project, 2004) More recently, religious leaders have worked together to establish improved interfaith relationships. However, given the history of religious tensions, religious organizations are heavily monitored in Burundi and the government established a new religious monitoring body in 2017 (United States Department of State, 2018).

There is some limited evidence that religious beliefs may serve as barriers to gender equality efforts in Burundi. A baseline assessment of gender norms and masculinities in the context of

religion in Burundi, funded by Tearfund's HIV and Sexual Violence Unit, found that religious beliefs are often "misinterpreted" to teach gender inequality in Burundian society. These misinterpretations serve to reinforce gender roles and justify harmful behaviors like SGBV (Deepan, 2014). Analysis of United States Agency for International Development (USAID) family planning programs in Burundi found evidence of religious-based barriers to family planning efforts, which are considered a key program to promote gender equality. In religious health facilities, staff were unable to receive training on modern contraceptive provision, and the national health system was unable to introduce modern contraceptives in these facilities. Women who sought modern contraception in religious facilities in Burundi were not systematically referred to other facilities (Emmet et al., 2017; Rames et al., 2017). However, some religious actors are engaging in gender equality work in Burundi; for example, the Anglican Church in Burundi has actively engaged in efforts to prevent SGBV (Deepan, 2014).

Summary

There is clear evidence supporting the need for gender equality programming, particularly in the Burundian context. As the promotion of gender equality has become more common in development, a number of intervention approaches and metrics have emerged, but there is still a need to generate robust evidence to support these approaches. Evidence is growing to support the overall EMBGE approach, but couples programming, a technique under the EMBGE umbrella, is less understood, and this review did not identify any published evaluations of this approach originating in Burundi. The quantitative analysis in this study will contribute additional knowledge to understanding couples programming as a method to promote gender equality in the Burundian context using World Relief's FFL program.

The literature presented here also highlights key gaps in knowledge relating to the role of FBOs in promoting gender equality. Secular development actors have long approached FBOs with

skepticism in all sectors, and the same is true in gender-related programming. Much of this skepticism is rooted in misunderstanding, and there is a call for FBOs to have greater transparency in the messaging and approaches used to promote gender equality. Yet, the evidence presented here makes clear that religion plays an influential role in societies and in the ways beliefs about gender are reproduced in societies. FBOs have recognized this influence and have used their role as development actors to address gender inequality from a religious and faith-based perspective. The World Relief FFL is an example of a program that uses religious beliefs and scriptural interpretations to address gender inequality. The qualitative analysis in this study will provide insight into the faith-based and religious content World Relief uses to promote gender equality in the FFL program.

Chapter 3: Methods

Quantitative Analysis: World Relief Families for Life Survey Survey Design

In July 2019, World Relief undertook a cross-sectional survey of FFL program participants. The purpose of this survey was to use the information gathered to improve the program, plan for program expansion, demonstrate the program's effects to key stakeholders in Burundi and the United States, and address a gap in knowledge about the effectiveness of the FFL program in Burundi. Deborah Dortzbach, World Relief Director of Health and Social Development, led the design of the survey in collaboration with other staff members in the World Relief Baltimore office. Dr. Henry Mosley, Professor Emeritus of Johns Hopkins Bloomberg School of Public Health, consulted on survey design and methodology (D. Dortzbach, personal communication, 7 February 2020).

World Relief program staff designed the survey using a variety of sources and approaches. Staff relied upon the evaluation considerations outlined in the FFL Toolkit to identify domains to be included in the survey (World Relief Program Resource Team, 2017). World Relief's General Impact Survey Instrument/Development (GISI-Dev), which was designed for baseline and endline evaluations in Church Empowerment Zones (CEZs), includes relevant questions and indicators for FFL implementation. World Relief incorporated many of these standardized questions and scales for the measurement of support for gender equitable norms, participation in decision making, acceptance of violence, and couples' communication. The Gender Equitable Men Scale (GEMS), a standardized measure developed by Promundo and Horizons described in greater detail in Chapter 2, measures support for gender equitable norms (Pulerwitz & Barker, 2007). Staff incorporated standardized measures from the DHS to evaluate acceptance of violence and joint decision making (Croft et al., 2018). Finally, the survey included questions about couples' communication from the

WHO Survey on Women's Health and Life Events (World Relief Program Resource Team, 2017). Questions relating to spiritual growth and church involvement were consistent with other World Relief evaluations and surveys (D. Dortzbach, personal communication, 7 February 2020). Appendix A contains the survey instrument.

The survey was then translated into Kirundi and field tested in Burundi before being administered to program participants. The survey was administered using the Enketo open-source web application on mobile devices, which relies on the OpenDataKit ecosystem. Enketo was originally developed for data collection in humanitarian situations and is now housed under the Quadracci Sustainable Engineering Lab at Columbia University (*About Enketo*, 2017). World Relief recruited survey enumerators from a database of enumerators that had administered prior surveys in Burundi. Enumerators completed a multi-day training to ensure familiarity with the survey, its administration, and privacy concerns (D. Dortzbach, personal communication, 7 February 2020). There were eight enumerators, of which six were women and two were men (D. Dortzbach, personal communication, 15 April 2020). Enumerators were deployed to administer the survey to lead and participant couples who were randomly sampled using the procedures described in the following section.

Sampling Procedures

The FFL Burundi survey relied upon simple random sampling with stratified proportional allocation. Participant couples—couples who attended FFL program sessions—and lead couples—couples who received additional training to facilitate FFL—were sampled separately to capture any potential differences in outcomes between the two types of couples (D. Dortzbach, personal communication, 10 February 2020). Two sampling frames were constructed. The participant sampling frame consisted of a roster of all couples who completed at least half of all FFL program sessions between 2014 and 2019. The lead sampling frame included all couples who received the

additional lead couple FFL training. Sampling frames were stratified by commune to ensure leaders and participants from all communes were represented. The survey designers prioritized representation across communes to capture any contextual differences and protect against potential dissatisfaction if a commune was not included ((D. Dortzbach, personal communication, 13 April 2020).

The primary sampling unit used in the survey was couples. Both members of each couple had to be present to be interviewed by enumerators. For this reason, World Relief staff indicated they would need to increase the sample size for both participant and lead couples by 10% to account for non-response. If one member of the couple was absent, deceased, or unreachable, the couple was replaced using a list of replacement couples for the commune. Staff generated the replacement list for each commune by first determining the length of the replacement list (10% of sample size for the commune). Staff then used the “RANDBETWEEN” function in Microsoft Excel to produce random numbers, indicating the couples to be selected for the replacement list (*Burundi FFL Sampling Frame*, 2019; *Sampling Methodology for Families for Life surveys*, 2019).

The survey team utilized a web-based sample size calculator hosted by Creative Research Systems to calculate sample size (Creative Research Systems, 2012). This calculator utilized a desired confidence level and confidence interval, along with the population size, to determine the sample size needed. Creative Research Solutions has not published the formula utilized for its sample size calculator. World Relief set a confidence level of 95% and a confidence interval of +/- 10%. The population of participant couples was 640 couples, and the population of lead couples was 136 couples. Using these inputs, the calculator determined a required sample size of 84 participant couples and 57 lead couples (*Sampling Methodology for Families for Life surveys*, 2019). Notably, the calculator does not require input for the estimated prevalence of the outcome variables to be analyzed, nor does it adjust for the small population sizes of both groups.

After calculating the sample size needed for both the lead and participant populations, World Relief staff proportionally allocated the sample across the four communes in Kibuye Health District (Bukirasazi, Buraza, Itaba, Makebuko). The allocation was proportional to the population size of the communes. Using this proportional allocation of the sample, which did not include the 10% adjustment for non-response rate (NRR) previously indicated, staff then drew simple random samples from each commune for both the lead and participant populations. Staff utilized the “RANDBETWEEN” function in Microsoft Excel to generate random numbers, which indicated which couples were to be selected from each commune (*Sampling Methodology for Families for Life surveys*, 2019). Table 3 displays the sample size needed and sample size achieved during survey administration.

Table 3. FFL Survey sample size needed and achieved, by commune and couple type

Communes	Lead Couples			Participant Couples		
	Sample Needed	Sample Achieved	Difference	Sample Needed	Sample Achieved	Difference
Bukirasazi	5	4	- 1	13	11	- 2
Buraza	21	19	- 2	32	31	- 1
Itaba	17	14	- 3	28	23	- 5
Makebuko	15	9	- 6	12	11	- 1
Total	58*	46	- 12	85*	76	- 9

* Sample size rounded up.
Source: Sampling Methodology for Families for Life surveys, 2019; FFL Burundi Survey Data, 2019.

The sampling procedures described raise some concerns about the representative nature of the samples utilized in the survey. First, as noted, the sample size calculator used an unknown formula to calculate the sample size. This calculator only included confidence level, confidence interval, and population size; it did not include an estimate of prevalence for the outcomes to be measured. Furthermore, the sample size calculation did not account for the finite population of participant couples and lead couples using a finite population correction (FPC). Finally, the sample size did not account for the 10% NRR anticipated by World Relief Staff.

In addition to concerns with the sample size, there are concerns about the replacement procedures used. Though enumerators made every effort possible to interview couples who were originally randomly sampled—including return visits, visiting individual homes, or waiting for delayed partners at the interview location—some couples in the sample had to be replaced (D. Dortzbach, personal communication, 3 March 2020). Unfortunately, there is not a record of replacement and, thus, there is no way to compare any information about the couples who responded to the survey against those who had to be replaced. This impedes the ability to identify or statistically adjust for selection bias.

For comparison, and to verify the accuracy of the calculation from Creative Research Systems, sample size calculations utilizing the OpenEpi toolkit Sample Size for a Proportion or Descriptive Study are presented in Table 4. Of the four outcomes analyzed in this study—support for gender equitable norms, joint decision-making, acceptance of violence, and communication—population level prevalence is available for Gitega Province, where Kibuye Health District is located, in the 2017 Burundi DHS for joint decision-making and acceptance of violence. I utilized a prevalence of 50% for support for gender equitable norms and couple’s communication to maximize sample size given the lack of population-level prevalence data for these two outcome measures. Finally, I used the same confidence level (95%), confidence intervals (+/- 10%), and non-response adjustment (NRA) (10%).

Table 4. FFL Survey sample size using prevalence and finite population correction

Outcome	Lead Couples				Participant Couples		
	Prevalence (%)	Population (N)	Sample Size (n)	Adjusted sample size (n _a)	Population (N)	Sample Size (n)	Adjusted sample size (n _a)
Support for gender equitable norms	50	136	57	45*	640	84	83*
Joint Decision-Making	62.3 ^b	136	55	40*	640	80	80*
Acceptance of Violence	64.2 ^b	136	54	43*	640	78	78*
Couples' Communication	50	136	57	45*	640	84	83*

^a Adjusted sample size includes finite population correction [FPC = $n / [1 + (n / N)]$] and non-response adjustment [NRA = $n / (1 - NRR)$]

^b Data Source: Troisième Enquête Démographique et de Santé, 2017

* Sample size rounded up.

Note: Base sample size (n) calculated using OpenEpi, Version 3.01.

The sample size calculations utilizing the outcome prevalence, non-response adjustment, and a finite population correction yield slightly different overall results. The maximum sample size needed for lead couples, after NRA and FPC, is 45, which is lower than the sample size World Relief staff calculated (58). Similarly, the sample size for participant couples is 84, which is slightly lower than the sample size calculated by World Relief Staff (85). The results presented in Table 3 confirm that the sample size calculator from Creative Research Systems assumes an outcome prevalence of 50%.

After calculating the sample size needed using the outcome prevalence, NRA, and FPC, I also proportionally allocated the new sample size across communes. Table 5 presents the allocated sample.

Table 5. Updated Sample Allocated across Communes

Commune	Lead Couples			Participant Couples		
	Population (N)	Proportion	Sample size (n)	Population (N)	Proportion	Sample size (n)
Bukirasazi	12	0.09	4*	94	0.15	13*
Buraza	50	0.37	17*	244	0.38	32*
Itaba	40	0.29	14*	211	0.33	28*
Makebuko	34	0.25	12*	91	0.14	12*
Total	136	1.00	47*	640	1.00	85*
* Sample size rounded up. Data Source: Sampling Methodology for Families for Life surveys, 2019; FFL Burundi Survey Data, 2019.						

With this updated sampling data, it is clear that the sample achieved in the FFL Burundi survey did not meet the required sample size for participant couples, nor was it proportionally allocated across communes for lead couples or participant couples. The challenges with sample size, sample allocation, and non-response and replacement undermine the generalizability of the results to the population of FFL leaders and participants. Given the amalgamation of these concerns, the analysis presented here must be interpreted with caution.

Data Analysis

As enumerators collected survey data from couples using the Enketo mobile application, the forms were dispatched to World Relief program staff in Burundi. Staff in Burundi reviewed the answers to ensure the responses were plausible. In the case of implausible or inconsistent data, staff followed up with the respondent to confirm or correct the information. Program staff undertook minimal data cleaning and in very few instances followed up with couples to verify the accuracy of responses or clarify contradictory information. All responses were compiled and output into a Microsoft Excel database before data analysis.

I utilized this original dataset to construct several additional variables for analysis. First, I constructed scores and indices for the four indicators of gender equality measured in the survey. I utilized the standard GEMS scoring procedures to assign a value of one to three, with one indicating an answer consistent with low support for gender equitable norms and three indicating an answer

consistent with high support for gender equitable norms, for each of the 17 GEMS questions included in the survey. The sum of these seventeen values constitutes the GEMS score. A GEMS score between 17 and 27 indicates low support for gender equitable norms, a score between 28 and 40 indicates medium support, and a score between 41 and 51 indicates high support (MEASURE Evaluation, 2013a).

To construct the Acceptance of Violence Index, I assigned values of zero or one to each of the five acceptance of violence questions. A value of zero indicates the respondent did not think violence was permissible in the given scenario, and a value of one indicates the respondent did think violence was permissible in the given scenario. Based on analytical guidance, answers of “don’t know” were assigned a zero value (Hindin et al., 2008; MEASURE Evaluation, 2013c). The summation of these scores became the Acceptance of Violence Index. Scores range between zero, which indicates the respondent accepted violence in no scenario, and five, which indicates the respondent accepted violence in all scenarios. While acceptance of violence is often analyzed as a binary to determine whether respondents accept violence in any scenario or in no scenarios, an index allows for a more nuanced analysis of the data (MEASURE Evaluation, 2013c).

I constructed the Participation in Decision-Making Index using the standard guidance for the scale (MEASURE Evaluation, 2013b; Nanda, 2011). For each of the three decision-making questions, I assigned scores of zero to those decisions in which a woman did not participate and scores of one to those decisions in which a woman did participate (either jointly or independently). The summation of these three scores is the Participation in Decision-Making Index. Scores range between zero, indicating a woman did not participate in any of the three decisions, and three, indicating a woman participated in all three of the decisions.

Finally, as there is not a standard method for analysis of the couples’ communication questions included in the survey, I followed a similar procedure to construct a Couples’

Communication Index. WHO does not offer guidance regarding the analysis of the couples' communication questions from the Survey on Women's Health and Life Events. However, other scales measuring communication recommend the construction of indices for analysis (Nanda, 2011). For each of the four communication questions, I assigned a score of zero if a respondent did not communicate with their spouse in the given scenario and a score of one if a respondent did communicate with their spouse in the given scenario. The summation of these scores created the Couples' Communication Index. The index ranges between zero, indicating the respondent did not communicate with their spouse in any of the given scenarios, and four, indicating the respondent communicated with their spouse in all given scenarios.

In addition to these scores and indices, I constructed several categorical variables for use in analysis. As education level was captured in several questions, I created new education categories combining this information to mirror education levels presented in the DHS (MPBGP et al., 2017). This new education variable indicates highest level of education attained and contains seven levels: no education, incomplete primary education, complete primary education, incomplete secondary education, complete secondary education, adult literacy, and unknown. I also created ten-year age categories to better facilitate analysis. This generated five age groups: 30 years and younger, 31 to 40 years, 41 to 50 years, 51 to 60 years, and 61 to 70 years.

All analysis was completed using RStudio Version 3.6.1 (RStudio Team, 2015). As the survey was designed to separately sample lead couples and participant couples, the two groups were analyzed separately. Additionally, while the survey sampled couples, enumerators collected data at the individual level from each member of the couple. Thus, I completed analysis at the individual level. The analysis consisted of two phases. First, descriptive statistics were generated using the *stats* package to provide contextual information about the two study populations (R Core Team, 2019). Second, I completed between-group comparative analysis to assess levels of support for gender

equality using the four domains measured in the survey. First, I compared FFL leaders and participants using two-sample T-test in the *stats* package (R Core Team, 2019). World Relief staff also identified four demographic factors across which they desired comparative analysis: sex, age, education level, and alcohol consumption. To compare male and female respondents, I utilized the *stats* package to complete two-sample paired T-tests for each of the four domains of gender equality (R Core Team, 2019). Paired T-tests were necessary given the interrelation of the male and female groups. I utilized one-way analysis of variance (ANOVA), also in the *stats* package, for comparisons by education level and age (R Core Team, 2019). If ANOVA results indicated a significant difference between groups, I utilized Scheffe Tests, from the *DescTools* package, to analyze all possible comparisons between groups (Signorell et al., 2020). Scheffe Tests were most appropriate given the post-hoc nature of analysis. To compare respondents by alcohol consumption, I utilized two sample T-tests in the *stats* package to compare those respondents who had consumed alcohol in the last month to those who had not (R Core Team, 2019).

Scope of the Analysis

This analysis is focused on describing support for gender equality amongst respondents. The analysis does not utilize questions about spiritual growth, which was also assessed in the survey. Furthermore, comparisons are made in this analysis based on World Relief's expressed priorities.

Qualitative Analysis: World Relief FFL: A Marriage Training Manual for Couples, Burundi

As described, World Relief emphasizes the need to contextualize FFL to the local context in each country in which the program is implemented. World Relief has developed a framework for the program including examples of lesson plans, course schedules, program tracking tools, and evaluation guidelines. Local World Relief offices utilize this framework to guide their implementation of FFL.

One critical product of the contextualization process is the country program manual. The manual serves as a facilitation guidebook and is the main resource for program facilitators implementing FFL. World Relief emphasizes that these manuals are not mere translations of program documents but are instead developed with and designed for participants in the local context. Manuals use accessible language and localized themes and knowledge. As of 2017, World Relief country offices had developed eight locally contextualized manuals. After the manual is developed, lead couples are recruited and trained to utilize the manual to facilitate FFL groups with participant couples (World Relief Program Resource Team, 2017).

Staff at World Relief Burundi and Dutabarane, one of World Relief's local implementing partners in Burundi, developed the FFL manual for Burundi in 2013. The development of the manual also involved staff from World Relief's Home Office in Baltimore. The manual was initially written in English but later translated into Kirundi. There are ten lessons included in the manual, and each lesson follows a standardized structure. The majority of lessons are centered on a guiding Bible verse, which is integrated into the teaching of the lesson. Lessons begin with notes to facilitators, which describe the motivation for the lesson, lesson objectives, session time, and lesson preparation. Lesson formats vary, but there are several key components: educational narratives, illustrative stories for discussion, large group discussion through question and answer, small group discussion and report back, and large group activities. Instructions to facilitators are integrated throughout these components and are not meant to be read aloud to participants.

Analytic Approach

To facilitate a greater understanding of the types of messaging faith-based organizations use to promote gender equality, I undertook a descriptive, qualitative analysis of the lesson content provided in the FFL manual for Burundi. Documents have long been used as a source of qualitative data and this analysis fits under the umbrella of document analysis (Bowen, 2009). As a first stage of

document analysis, I thoroughly read the FFL Burundi program manual, generating handwritten memos in a print copy of the manual. I employed reflexivity throughout the analytic process to ensure all description was grounded in the text of the document.

Using principles of thematic analysis, I created key themes for each of the lessons to guide a description of the use of religious messaging to promote gender equality and healthy relationship dynamics. These themes were created inductively using the memos I generated in reviewing the document. I constructed themes for each lesson, which I have called the guiding narrative. I defined the guiding narrative as the combination of the lesson's associated Bible verse, lesson objectives, and initial explanatory notes to facilitators. Though the Bible verse is the only explicitly religious or faith-based messaging in the guiding narrative, the lesson objectives and notes to facilitator are critical in providing explanatory context about the use of that Bible verse. The combination of these three components provides the overall theoretical motivation for the lesson and produces themes to facilitate thematic analysis for each lesson. I then used the theme for each lesson as the lens through which to view the lesson content.

Using this guiding narrative, or theme, I generated a description of the lesson explaining how the theme is (or is not) manifested in the content delivered to program participants. As the focus of this analysis is on the religious, faith-based, or spiritual aspects of the theoretical motivation, I generated descriptions centered on these elements of the guiding narrative. To best describe the use of religious messaging, I also noted areas in which it was absent or less emphasized. Additionally, the analysis was limited to content related to gender equality and the promotion of healthy relationship dynamics. Though these are broad topics, I focused on the aspects of gender equality and healthy relationship dynamics identified by World Relief in their program documentation. These include support for gender equitable norms, joint decision-making, rejection of violence, communication, and sexual satisfaction.

IRB Consideration

This analysis was determined to be exempt from IRB review because this analysis is a component of program assessment. The data relied upon for the analysis were collected for the purpose of program monitoring, assessment, and evaluation. Furthermore, all quantitative data were deidentified to remove participant names prior to analysis.

Chapter 4: Results

Demographic Characteristics of FFL Leaders and Participants

Most of the individuals who were part of lead couples (leaders) were between the ages of 31 and 50 (Table 6). Just over three-quarters of leaders were married between the ages of 18 and 25. Education levels were low, with most having attended some or completed primary school and very few attending secondary or higher education. Nearly all of the leaders had children with their current spouse. Catholicism was the most popular denomination of Christianity amongst the lead couples. Very few (10%) reported needing to be away from home for one month or longer for employment, and around one-third of them consumed alcohol in the last month (27%). All of the leaders had been involved in a project with their church or World Relief in the preceding two years, with family support projects being most common.

There was a greater proportion of individuals 30 and younger amongst participant couples (participants) (Table 6). Like leaders, participants tended to be married between the ages of 18 and 25. There were also low levels of educational attainment amongst participant couples. Nearly all of the participants had children with their current spouse, and the majority of participant couples practice Catholicism. One in ten participants stayed away from home for greater than one month for employment. Alcohol use was more common amongst participants, with just under half (44%) reporting alcohol consumption in the preceding month. Participation in church and World Relief projects in the prior two years was nearly ubiquitous, and involvement in family support projects was most common.

Table 6. Demographic characteristics, FFL leaders and participants

Individual Characteristics	Leaders ¹ (N=136)			Participants ² (N=640)		
	Percent	Count	n	Percent	Count	n
Sex						
Female	50.00	46	92	50.00	76	152
Male	50.00	46	92	50.00	76	152
Age						
< 30 years	2.17	2	92	26.32	40	152
30 – 39 years	41.30	38	92	32.89	50	152
40 – 49 years	38.04	35	92	21.05	32	152
50 – 59 years	16.30	15	92	16.45	25	152
60 – 69 years	2.17	2	92	3.29	5	152
Age of marriage						
Under 18 years	9.78	9	92	3.95	6	152
18-25 years	78.26	72	92	80.26	122	152
26-35 years	11.96	11	92	14.47	22	152
36-45 years	0.00	0	92	1.32	2	152
Educational attainment						
No schooling	16.30	15	92	16.45	25	152
Incomplete primary education	39.13	36	92	38.82	59	152
Complete primary education	16.30	15	92	13.82	21	152
Incomplete secondary education	1.09	1	92	9.87	15	152
Complete secondary education	2.17	2	92	4.61	7	152
Adult literacy	22.83	21	92	16.45	25	152
Unknown	2.17	2	92	0.00	0	152
Have children with current spouse	97.83	90	92	96.05	146	152
Denomination						
Anglican/Episcopal	8.70	8	92	11.18	17	152
Baptist	0.00	0	92	0.66	1	152
Catholic	32.61	30	92	49.34	75	152
Methodist	17.39	16	92	21.71	33	152
Pentecostal	17.39	16	92	5.26	8	152
Other Christian church or denomination	23.91	22	92	11.84	18	152
Employment requires staying away from family for a month or longer	10.87	10	92	10.53	16	152
Consumed alcohol in the last month	27.17	25	92	44.08	67	152
Involved in church or World Relief project in last two years ^a	100.00	92	92	97.37	148	152
Involved in agriculture projects	19.57	18	92	12.16	18	148
Involved in health projects	21.74	20	92	12.84	19	148
Involved in nutrition projects	32.61	30	92	21.62	32	148
Involved in education projects	3.26	3	92	2.03	3	148
Involved in family support projects	95.65	88	92	93.92	139	148
Involved in clean water projects	0.00	0	92	0.00	0	148
Involved in other projects	0.00	0	92	0.00	0	148
¹ Leaders received additional training and facilitated FFL sessions. ² Participants attended FFL sessions. ^a Respondents could indicate involvement in multiple types of projects. Data Source: World Relief FFL Burundi Survey						

Performance on Gender Equality Measures: Aim 1 and Aim 2

The mean GEM Scale score for leaders was 37.696, which qualifies as moderate support for gender equitable norms (Table 7). Similar proportions of leaders indicated moderate or high support for gender equitable norms (41% and 43%, respectively), while 15% had low support for gender equitable norms. Table 8 includes responses for each question used to calculate the GEM Scale score. Leaders had a low average score on the acceptance of violence index (0.707), indicating low levels of acceptance of violence. About one-third of individuals in lead couples would accept a husband's violence against his wife in one of the five given scenarios. The most commonly accepted reasons for violence were if a wife neglects the children (26%) and if a wife argues with her husband (15%). Around half of leaders reported that women participate in all three household decision categories (decisions about their own healthcare, large purchases, and visiting family). There were high levels of women's participation in all three domains, which resulted in a high value on the Participation in Decision-Making Index (2.304). Couples' communication on the four domains evaluated was nearly universal for leaders, as indicated by the Couples' Communication Index score of 3.935.

Participant couples also showed substantial proportions of moderate and high support for gender equitable norms (43% and 42%, respectively) (Table 7). Only 13% of participants had low support for gender equitable norms. The average GEM Scale score for participants was 37.099, which falls in the moderate support category. Table 8 includes responses for each question used to calculate the GEM Scale score. Participant couples also followed similar patterns on the Acceptance of Violence Index, with an average score of 0.711. About one-third accepted violence in one of the given scenarios. The most commonly accepted scenarios were neglecting children (21%), arguing with husband (20%), and refusing sex (17%). Women also had high levels of participation in decision making amongst FFL participants. About half of participants indicated women participated

Table 7. Gender equality measures, FFL leaders and participants

Gender Equality Measures	Leaders ¹ (N=136)			Participants ² (N=640)		
	Mean	Percent	n	Mean	Percent	n
Gender Equitable Men (GEM) Scale Score ^a	37.696		92	37.099		
Low support for gender equitable norms (GEM Scale Score 17-27)		15.22	92		13.82	152
Moderate support for gender equitable norms (GEM Scale Score 28-40)		43.48	92		43.42	152
High support for gender equitable norms (GEM Scale Score 41-51)		41.30	92		42.76	152
Acceptance of Violence Index ^b	0.707			0.711		
Accept violence in at least one situation		32.61	92		31.58	152
Accept violence in no situations		67.39	92		68.42	152
Accept violence if wife goes out without telling husband		9.78	92		8.55	152
Accept violence if wife neglects children		26.09	92		21.71	152
Accept violence if wife argues with husband		15.22	92		20.39	152
Accept violence if wife refuses sex		16.3	92		17.11	152
Accept violence if wife does not cook food properly		3.26	92		3.29	152
Participation in Decision-Making Index ^c	2.304			2.296		
Woman does not participate in three domains of household decision making		3.26	92		4.61	152
Woman participates in one or two domains of household decision making		48.91	92		48.68	152
Woman participates in all three domains of household decision making		47.83	92		46.71	152
Woman participates in decisions about her own healthcare		63.04	92		58.55	152
Woman participates in decisions about large purchases		79.35	92		81.58	152
Woman participates in decisions about visiting family or relatives		88.04	92		89.47	152
Couples' Communication Index ^d	3.935			3.875		
Communicate with spouse on all four topics		96.74	92		95.39	152
Communicate with spouse about spouse's day		98.91	92		96.05	152
Communicate with spouse about own day		98.91	92		96.05	152
Communicate with spouse about own worries or feelings		98.91	92		98.03	152
Communicate with spouse about spouse's worries or feelings		96.74	92		97.37	152

¹ Lead couples received additional training and facilitated FFL sessions.
² Participant couples attended FFL sessions.
^a Range: 17 to 51; Low support: 17-27, Moderate support: 28-40, High support: 41-51
^b Range: 0 to 5; 0 indicates acceptance of violence in none of the given situations and 5 indicates acceptance of violence in all situations
^c Range: 0 to 3; 0 indicates woman participates in none of the given decisions and 3 indicates woman participates in all decisions
^d Range: 0 to 4; 0 indicates communication on none of the given topics and 4 indicates communication on all of the topics
 Data Source: World Relief FFL, Burundi Survey

Table 8. GEM Scale questions, FFL leaders and participants

	Leaders ¹ (N=136)			Participants ² (N=640)		
	Agree (%)	Partially agree (%)	Disagree (%)	Agree (%)	Partially agree (%)	Disagree (%)
Gender Equitable Men (GEM) Scale Questions^a						
A woman's most important role is to take care of her home and cooking.	48.91	9.78	41.30	39.47	9.21	51.32
Men need sex more than women do.	57.61	14.13	28.26	54.61	14.47	30.92
You don't talk about sex, you just do it.	39.13	7.61	53.26	42.11	8.55	49.34
There are times when a woman deserves to be beaten.	18.48	3.26	78.26	12.50	7.24	80.26
Changing diapers, giving a bath, and feeding kids is the mother's responsibility.	57.61	6.52	35.87	60.53	3.95	35.53
It is a woman's responsibility to avoid getting pregnant.	16.30	8.70	75.00	21.71	7.89	70.39
It is a wife's obligation to have sex with her husband even if she doesn't feel like it.	17.39	6.52	76.09	26.32	1.97	71.71
A man should have the final word about decisions in his home.	52.17	8.70	39.13	53.95	7.89	38.16
A woman should tolerate violence to keep her family together.	42.39	4.35	53.26	51.97	9.21	38.82
Only when a woman has a child is she a real woman.	27.17	0.00	72.83	32.24	1.97	65.79
Men should be outraged if their wives ask them to use a condom.	38.04	9.78	52.17	47.37	4.61	48.03
A man and a woman should decide together what types of contraceptive to use.	93.48	1.09	5.43	92.11	0.66	7.24
A woman should not initiate sex.	30.43	5.43	64.13	32.24	5.92	61.84
A woman should obey her husband in all things.	86.96	3.26	9.78	88.16	3.29	8.55
A man needs other women even if things with his wife are fine.	15.22	4.35	80.43	5.92	0.66	93.42
A man using violence against his wife is a private matter that shouldn't be discussed outside the couple.	22.83	2.17	75.00	25.66	5.92	68.42
Sometimes it is okay for the man to shout at his wife to prove his status.	38.04	6.52	55.43	42.11	8.55	49.34

¹Lead couples received additional training and facilitated FFL sessions.

²Participant couples attended FFL sessions.

^a Instructions to respondent: "The next set of questions will ask you about your views on relations between men and women in general. Please indicate if you totally agree, partially agree, or disagree with the following statements."

Data Source: World Relief FFL Burundi Survey

in all three decisions, and the average Participation in Decision-Making Index was 2.296. There was lower participation in a woman's decision about her own healthcare (58%). Finally, the Couples' Communication Index revealed high levels of communication amongst participants, with nearly all individuals communicating with their spouse on all four topics. The average score on the Couples' Communication Index was 3.875 out of a maximum score of 4.

When comparing the performance of leaders and participants on the four measures of gender equality using a two sample T-Test, there are no statistically significant differences in their performance (Table 9). Leaders had slightly higher mean scores on the GEM Scale, indicating marginally higher support for gender equitable norms. Leaders also had higher scores on average for the Couples' Communication Index, indicating greater levels of communication. However, neither the difference in GEM Scale scores nor the difference in the Couples' Communication Index were statistically significant. Leaders and participants had the same mean scores for both the Acceptance of Violence Index and Participation in Decision-Making Index.

Table 9. Two Sample T-Test assessing performance on gender equality measures by FFL leader and participant status

Gender Equality Measure	Leader Mean	Participant Mean	Mean Difference^a	t value	p value	95% Confidence Interval
GEM Scale Score	37.70	37.10	0.60	0.00	1.00	-1.44, 2.63
Acceptance of Violence Index	0.71	0.71	0.00	-0.05	0.96	-0.30, 0.30
Participation in Decision-Making Index	2.30	2.30	0.01	0.00	1.00	-0.20, 0.22
Couples' Communication Index	3.93	3.88	0.06	0.00	1.00	-0.08, 0.20
^a Absolute value Data Source: World Relief FFL Burundi Survey						

Comparing Performance on Gender Equality Measures across Demographic Characteristics: Aim 3

Demographic Characteristic: Sex

Amongst lead couples, there were statistically significant differences in male and female performance on the GEM Scale score and Participation in Decision-Making Index (Table 10). On average, male leaders had a GEM Scale score of 39.33, which is 3.26 points higher than the female leader mean GEM Scale score of 36.07. Higher GEM Scale scores indicate higher support for gender equitable norms. Comparison under a paired T-Test revealed this difference in GEM Scale scores is significant at the 95% level ($p < 0.001$; 95% CI: -5.79, -0.74). For the Participation in Decision-Making Index, male leaders also had a statistically significantly higher score on the index than female leaders. Higher scores indicate greater participation of women in decisions. The mean difference in scores was 0.26 ($p = 0.003$; 95% CI: -0.60, 0.08). The mean differences in scores between male and female leaders for the Acceptance of Violence Index or the Couples' Communication Index were not statistically significant. Male leaders had lower acceptance of violence than female leaders as measured on the Acceptance of Violence Index (Mean Difference: 0.33; $p = 1.00$; 95% CI: 0.01, 0.64). However, female leaders communicated with their spouse more as measured by the Couples' Communication Index (Mean Difference: 0.09; $p = 1.00$; 95% CI: -0.10, 0.27).

For participant couples, there were also statistically significant differences in male and female performance on the GEM Scale score and the Participation in Decision-Making Index (Table 10). Participant males had a mean GEM Scale score of 38.38, while female participants had a mean score of 35.82. The mean difference between scores was 2.57, which was significant at the 95% level ($p < 0.001$; 95% CI: -3.94, -1.19). For the Participation in Decision-Making Index, male participants also had higher mean score than females (2.51 and 2.08, respectively). The mean difference of 0.43 was significant at the 95% level ($p < 0.001$; 95% CI: -0.66, -0.21). There were not statistically

significant differences between male and female participants for the Acceptance of Violence Index or the Couples' Communication Index. The mean score for male participants on the Acceptance of Violence Index indicated lower acceptance of violence than female participants (Mean Difference: 0.08; $p = 1.00$; 95% CI: -0.23, 0.39). Male participants also reported marginally greater levels of communication with their spouses when compared to female participants (Mean Difference: 0.01; $p = 0.77$; 95% CI: -0.19, 0.17).

Table 10. Paired T-Test assessing performance on gender equality measures by sex, FFL leaders and participants

Gender Equality Measure	Female Mean	Male Mean	Mean Difference ^a	t value	p value	95% Confidence Interval
Leaders						
GEM Scale Score*	36.07	39.33	3.26	-5.20	<0.001*	-5.79, -0.74
Acceptance of Violence Index	0.87	0.54	0.33	0.00	1.00	0.01, 0.64
Participation in Decision-Making Index*	2.17	2.43	0.26	-3.09	0.003*	-0.60, 0.08
Couples' Communication Index	3.98	3.89	0.09	0.00	1.00	-0.10, 0.27
Participants						
GEM Scale Score*	35.82	38.38	2.57	-7.45	<0.001*	-3.94, -1.19
Acceptance of Violence Index	0.75	0.67	0.08	0.00	1.00	-0.23, 0.39
Participation in Decision-Making Index*	2.08	2.51	0.43	-7.80	<0.001*	-0.66, -0.21
Couples' Communication Index	3.87	3.88	0.01	-0.29	0.773	-0.19, 0.17
^a Absolute value * Statistically significant at the 95% confidence level ($p < 0.05$) Data Source: World Relief FFL Burundi Survey						

Demographic Characteristic: Age

Initial visual inspection indicates minimal variation in any of the gender equality measures amongst ten-year age groups for both leaders and participants (Table 11). Under one-way analysis of variance (ANOVA) of lead couple data, there were not statistically significant differences in the GEM Scale score, Acceptance of Violence Index, Participation in Decision-Making Index, or Couples' Communication Index when comparing across ten-year age groups (Table 12). For

participant couples, one-way ANOVA testing indicated a statistically significant difference in the GEM Scale score and Participation in Decision-Making Index when comparing across ten-year age groups. There were not significant differences in participant Acceptance of Violence Index scores or Couples' Communication Index scores when comparing by ten-year age groups.

Table 11. Table of means: performance on gender equality measures by age group, FFL leaders and participants

Age Group	GEM Scale Score		Acceptance of Violence Index		Participation in Decision-Making Index		Couples' Communication Index	
	Mean	n	Mean	n	Mean	n	Mean	n
Leaders								
< 30 years	34.50	2	0.00	2	1.50	2	4.00	2
30 – 39 years	38.87	38	0.45	38	2.24	38	3.84	38
40 – 49 years	36.23	35	0.97	35	2.26	35	4.00	35
50 – 59 years	37.87	15	0.93	15	2.60	15	4.00	15
60 – 69 years	43.00	2	0.00	2	3.00	2	4.00	2
Participants								
< 30 years	34.23	40	1.03	40	1.98	40	3.90	40
30 – 39 years	38.50	50	0.62	50	2.40	50	3.88	50
40 – 49 years	38.88	32	0.59	32	2.50	32	3.84	32
50 – 59 years	37.88	25	0.52	25	2.24	25	3.84	25
60 – 69 years	30.80	5	0.80	5	2.80	5	4.00	5
Data Source: World Relief FFL Burundi Survey								

Table 12. One-Way Analysis of Variance assessing performance on gender equality measures by age group, FFL leaders and participants

Gender Equality Measure	Degrees of Freedom	Sum of Squares	Mean Square	F-Value	p value
Leaders					
GEM Scale Score					
Between Groups	4	205.00	51.18	0.87	0.485
Within Groups	87	5117.00	58.81		
Total	91	5322.00			
Acceptance of Violence Index					
Between Groups	4.00	7.78	1.94	1.637	0.172
Within Groups	87.00	103.30	1.19		
Total	91.00	111.08			
Participation in Decision-Making Index					
Between Groups	4	3.82	0.96	1.55	0.195
Within Groups	87	53.65	0.62		
Total	91	57.47			
Couples' Communication Index					
Between Groups	4	0.56	0.14	0.709	0.588
Within Groups	87	17.05	0.20		
Total	91	17.61			

Table 12, continued.

Gender Equality Measure	Degrees of Freedom	Sum of Squares	Mean Square	F-Value	p value
Participants					
GEM Scale Score*					
Between Groups	4	743.00	185.78	2.999	0.021*
Within Groups	147	9106.00	61.95		
Total	151	9849.00			
Acceptance of Violence Index					
Between Groups	4	5.75	1.44	0.963	0.430
Within Groups	147	219.51	1.49		
Total	151	225.26			
Participation in Decision-Making Index*					
Between Groups	4	7.34	1.84	2.987	0.021*
Within Groups	147	90.33	0.61		
Total	151	97.67			
Couples' Communication Index					
Between Groups	4	0.17	0.04	0.101	0.982
Within Groups	147	60.46	0.41		
Total	151	60.63			
* Statistically significant at the 95% confidence level ($p < 0.05$)					
Data Source: World Relief FFL Burundi Survey					

Further exploration of the participant GEM Scale score and Participation in Decision-Making Index values is necessary to determine which, if any, pairwise age group comparisons are statistically significant. None of the pairwise comparisons of participant GEM Scale scores across age groups were statistically significantly different, nor were any of the pairwise comparisons of the Participation in Decision-Making Index across age groups (Table 13). Though none of these pairwise comparisons are statistically significant, there is one trend worth noting: when comparing GEM Scale scores, 60- to 69-year-old participants scored lower than all other age groups.

Table 13. Scheffe Test results for statistically significant differences in performance on gender equality measures by age group, FFL participants

Comparison of		Difference ^a	p value	95% Confidence Interval	
Age Group 1 to	Age Group 2				
Participant GEM Scale Score					
30 – 39 years	>30 years	4.28	0.168	-0.93,	9.48
40 – 49 years	>30 years	4.65	0.190	-1.17,	10.47
50 – 59 years	>30 years	3.66	0.509	-2.61,	9.92
60 – 69 years	>30 years	-3.43	0.932	-15.07,	8.22
40 – 49 years	30 – 39 years	0.38	1.000	-5.18,	5.93
50 – 59 years	30 – 39 years	-0.62	0.999	-6.63,	5.39
60 – 69 years	30 – 39 years	-7.70	0.365	-19.22,	3.82
50 – 59 years	40 – 49 years	-1.00	0.994	-7.55,	5.56
60 – 69 years	40 – 49 years	-8.08	0.341	-19.88,	3.73
60 – 69 years	50 – 59 years	-7.08	0.500	-19.11,	4.95
Participant Participation in Decision-Making Index					
30 – 39 years	>30 years	0.43	0.169	-0.09	0.94
40 – 49 years	>30 years	0.53	0.099	-0.06	1.11
50 – 59 years	>30 years	0.27	0.780	-0.36	0.89
60 – 69 years	>30 years	0.83	0.300	-0.34	1.99
40 – 49 years	30 – 39 years	0.10	0.989	-0.45	0.65
50 – 59 years	30 – 39 years	-0.16	0.952	-0.76	0.44
60 – 69 years	30 – 39 years	0.40	0.880	-0.75	1.55
50 – 59 years	40 – 49 years	-0.26	0.818	-0.91	0.39
60 – 69 years	40 – 49 years	0.30	0.959	-0.88	1.48
60 – 69 years	50 – 59 years	0.56	0.713	-0.64	1.76
^a Difference = Age Group 1 – Age Group 2 Data Source: World Relief FFL Burundi Survey					

Demographic Characteristic: Educational Attainment

There also appeared to be little variation in performance on the four gender equality measures by educational attainment, or the highest level of education completed (Table 14). One-way ANOVA testing of lead couple data returned a statistically significant difference on the Acceptance of Violence Index when comparing varying levels of educational attainment (Table 15). There were not statistically significant differences on the GEM Scale score, Participation in Decision-Making Index, or Couples' Communication Index for leaders when comparing educational attainment groups. For participant couples, one-way ANOVA testing indicated statistically significant differences on the Acceptance of Violence Index and Participation in Decision-Making Index when comparing educational attainment groups. There were not statistically significant

differences in GEM Scale score or Couples' Communication Index scores when comparing participants by educational attainment levels.

Table 14. Table of means: performance on gender equality measures by educational attainment, FFL leaders and participants

Educational Attainment	GEM Scale Score		Acceptance of Violence Index		Participation in Decision-Making Index		Couples' Communication Index	
	Mean	n	Mean	n	Mean	n	Mean	n
Leaders								
None	38.07	15	0.53	15	2.27	15	3.93	15
Incomplete primary	39.25	36	0.53	36	2.36	36	3.86	36
Complete primary	38.13	15	0.67	15	2.07	15	4.00	15
Incomplete secondary	39.00	1	0.00	1	3.00	1	4.00	1
Complete secondary	38.50	2	3.00	2	2.00	2	4.00	2
Adult literacy	34.24	21	1.05	21	2.33	21	4.00	21
Unknown	38.50	2	0.00	2	3.00	2	4.00	2
Participants								
None	33.76	25	1.20	25	2.32	25	4.00	25
Incomplete primary	38.20	59	0.37	59	2.32	59	3.86	59
Complete primary	36.90	21	0.90	21	2.10	21	3.71	21
Incomplete secondary	36.07	15	1.07	15	2.00	15	4.00	15
Complete secondary	43.71	7	0.00	7	2.43	7	4.00	7
Adult literacy	36.76	25	0.84	25	2.52	25	3.80	25

Data Source: World Relief FFL Burundi Survey

Table 15. One-Way Analysis of Variance assessing performance on gender equality measures by educational attainment, FFL leaders and participants

Gender Equality Measure	Degrees of Freedom	Sum of Squares	Mean Square	F-Value	p value
Leaders					
GEM Scale Score					
Between Groups	6	347.00	57.88	0.989	0.438
Within Groups	85	4974.00	58.52		
Total	91	5321.00			
Acceptance of Violence Index*					
Between Groups	6	16.08	2.68	2.399	0.034*
Within Groups	85	94.99	1.12		
Total	91	111.07			
Participation in Decision-Making Index					
Between Groups	6	2.64	0.44	0.682	0.665
Within Groups	85	54.84	0.65		
Total	91	57.48			
Couples' Communication Index					
Between Groups	6	0.37	0.06	0.304	0.933
Within Groups	85	17.24	0.20		
Total	91	17.61			

Table 15, continued

Gender Equality Measure	Degrees of Freedom	Sum of Squares	Mean Square	F-Value	p value
Participants					
GEM Scale Score					
Between Groups	5	677.00	135.33	2.154	0.062
Within Groups	146	9173.00	62.83		
Total	151	9850.00			
Acceptance of Violence Index*					
Between Groups	5	19.36	3.87	2.746	0.021*
Within Groups	146	205.90	1.41		
Total	151	225.26			
Participation in Decision-Making Index					
Between Groups	5	3.59	0.72	1.115	0.355
Within Groups	146	94.09	0.64		
Total	151	97.68			
Couples' Communication Index					
Between Groups	5	1.42	0.28	0.702	0.623
Within Groups	146	59.20	0.41		
Participants					

Data Source: World Relief FFL Burundi Survey

I completed pairwise Scheffe testing for the educational attainment group comparisons that returned statistically significant results: leader Acceptance of Violence Index, participant GEM Scale score, and participant Acceptance of Violence Index (Table 16). There were not any statistically significant pairwise comparison by educational attainment for leader Acceptance of Violence Index, participant GEM Scale score, and participant Acceptance of Violence Index. However, there are some trends of note. Leaders who completed primary school scored higher on the Acceptance of Violence Index than all other groups; high scores on this index indicate higher acceptance of violence. For participant GEM Scale scores, those who completed secondary school had higher support for gender equitable norms than all other education groups as measured by their GEM Scale scores. Looking at participant Acceptance of Violence Index scores, participants without any education had higher scores on this index—indicating higher levels of acceptance of violence—than participants with any education.

Table 16. Scheffe Test results for statistically significant differences in performance on gender equality measures by educational attainment, FFL leaders and participants

Comparison of Educational Attainment		Difference ^a	p value	95% Confidence Interval	
Group 1 to	Group 2				
Leader Acceptance of Violence Index					
None	Adult literacy	-0.51	0.911	-1.81,	0.79
Incomplete primary	Adult literacy	-0.52	0.781	-1.58,	0.54
Complete primary	Adult literacy	-0.38	0.979	-1.68,	0.92
Incomplete secondary	Adult literacy	-1.05	0.987	-4.99,	2.89
Complete secondary	Adult literacy	1.95	0.407	-0.89,	4.80
Unknown	Adult literacy	-1.05	0.936	-3.89,	1.80
None	Complete primary	-0.13	1.000	-1.54,	1.27
Incomplete primary	Complete primary	-0.14	0.100	-1.32,	1.04
Incomplete secondary	Complete primary	-0.67	0.999	-4.64,	3.31
Complete secondary	Complete primary	2.33	0.212	-0.56,	5.23
Unknown	Complete primary	-0.67	0.994	-3.56,	2.23
None	Complete secondary	-2.47	0.157	-5.36,	0.43
Incomplete primary	Complete secondary	-2.47	0.125	-5.27,	0.32
Incomplete secondary	Complete secondary	-3.00	0.503	-7.71,	1.71
Unknown	Complete secondary	-3.00	0.248	-6.85,	0.85
None	Incomplete primary	0.01	1.000	-1.18,	1.19
Incomplete secondary	Incomplete primary	-0.53	0.100	-4.43,	3.37
Unknown	Incomplete primary	-0.53	0.998	-3.32,	2.27
None	Incomplete secondary	0.53	0.100	-3.44,	4.51
Unknown	Incomplete secondary	0.00	1.000	-4.71,	4.71
Unknown	None	-0.53	0.998	-3.43,	2.36
Participant GEM Scale Score					
None	Adult literacy	-3.00	0.876	-10.56,	4.56
Incomplete primary	Adult literacy	1.44	0.989	-4.94,	7.82
Complete primary	Adult literacy	0.14	1.000	-7.77,	8.06
Incomplete secondary	Adult literacy	-0.69	0.100	-9.43,	8.04
Complete secondary	Adult literacy	6.95	0.522	-4.48,	18.39
None	Complete primary	-3.14	0.876	-11.06,	4.77
Incomplete primary	Complete primary	1.30	0.995	-5.50,	8.09
Incomplete secondary	Complete primary	-0.84	0.100	-9.88,	8.20
Complete secondary	Complete primary	6.81	0.569	-4.86,	18.48
None	Complete secondary	-9.95	0.132	-21.39,	1.48
Incomplete primary	Complete secondary	-5.51	0.696	-16.20,	5.18
Incomplete secondary	Complete secondary	-7.65	0.491	-19.89,	4.59
None	Incomplete primary	-4.44	0.361	-10.82,	1.94
Incomplete secondary	Incomplete primary	-2.14	0.972	-9.87,	5.60
None	Incomplete secondary	-2.31	0.977	-11.04,	6.43

Table 16, continued

Comparison of		Difference ^a	p value	95% Confidence Interval	
Educational Attainment Group 1 to	Educational Attainment Group 2				
Participant Acceptance of Violence Index					
None	Adult literacy	0.36	0.949	-0.77,	1.49
Incomplete primary	Adult literacy	-0.47	0.743	-1.42,	0.49
Complete primary	Adult literacy	0.06	1.000	-1.12,	1.25
Incomplete secondary	Adult literacy	0.23	0.997	-1.08,	1.54
Complete secondary	Adult literacy	-0.84	0.740	-2.55,	0.87
None	Complete primary	0.30	0.982	-0.89,	1.48
Incomplete primary	Complete primary	-0.53	0.684	-1.55,	0.49
Incomplete secondary	Complete primary	0.16	0.100	-1.19,	1.52
Complete secondary	Complete primary	-0.90	0.693	-2.65,	0.84
None	Complete secondary	1.20	0.354	-0.51,	2.91
Incomplete primary	Complete secondary	0.37	0.987	-1.23,	1.97
Incomplete secondary	Complete secondary	1.07	0.573	-0.77,	2.90
None	Incomplete primary	0.83	0.137	-0.13,	1.78
Incomplete secondary	Incomplete primary	0.69	0.540	-0.46,	1.85
None	Incomplete secondary	0.13	0.100	-1.18,	1.44
^a Difference = Educational Attainment Age Group 1 – Educational Attainment Group 2					
Data Source: World Relief FFL Burundi Survey					

Demographic Characteristic: Alcohol Consumption

Alcohol consumption was measured in the FFL survey as a binary, categorical variable: participants indicated whether or not they had consumed alcohol in the last month. For leaders, there was a statistically significant difference in mean GEM Scale scores for those who reported alcohol consumption and those who did not (Table 17). Leaders who consumed alcohol had a lower mean GEM Scale score (32.24) than leaders who did not consume alcohol. The mean difference (7.49) was statistically significant at the 95% confidence level ($p < 0.001$; 95% CI: -10.97, -4.01). There were not statistically significant differences between leaders who consumed alcohol and leaders who did not for the Acceptance of Violence Index, Participation in Decision-Making Index, and Couples' Communication Index.

Amongst participants, there were statistically significant differences in mean GEM Scale scores and mean Couples' Communication Index scores between those who consumed alcohol and

those who did not. Participants who consumed alcohol had a lower mean GEM Scale score (34.61) than those who did not consume alcohol (39.06). At the 95% confidence level, the difference between means (4.45) was statistically significant ($p < 0.001$; 95% CI: -6.99, -1.90). Those who did not consume alcohol also had a higher mean score on the Couples' Communication Index (high scores indicate greater communication). Participants who consumed alcohol had a mean score of 3.78, while those who did not consume alcohol had a mean score of 3.95. The mean difference of 0.18 was statistically significant at the 95% confidence level ($p = 0.002$; 95% CI: -0.40, 0.05).

Table 17. Two Sample T-Test assessing performance on gender equality measures by alcohol consumption, FFL leaders and participants

Gender Equality Measure	Alcohol Consumption Mean	No Alcohol Consumption Mean	Mean Difference ^a	t value	p value	95% Confidence Interval
Leaders						
GEM Scale Score	32.24	39.73	7.49	-8.71	<0.001*	-10.97, -4.01
Acceptance of Violence Index	1.16	0.54	0.62	0.00	1.00	0.07, 1.18
Participation in Decision-Making Index	2.44	2.25	0.19	0.00	1.00	-0.16, 0.54
Couples' Communication Index	3.96	3.93	0.03	0.00	1.00	-0.11, 0.18
Participants						
GEM Scale Score	34.61	39.06	4.45	-6.91	<0.001*	-6.99, -1.90
Acceptance of Violence Index	0.90	0.56	0.33	0.00	1.00	-0.07, 0.73
Participation in Decision-Making Index	2.33	2.27	0.06	0.00	1.00	-0.20, 0.32
Couples' Communication Index	3.78	3.95	0.18	-3.15	0.002*	-0.40, 0.05
^a Absolute value * Statistically significant at the 95% confidence level ($p < 0.05$) Data Source: World Relief FFL Burundi Survey						

Qualitative Description of FFL Sessions: Aim 4

As described in Chapter 3, this analysis utilizes the guiding narrative for each session – its associated Bible verse, lesson objectives, and facilitator notes – to describe how the religious, faith-based, and spiritual components of the theoretical motivation for the lesson is delivered to program participants. This analysis focuses on components of the lessons related to gender equality and relationship dynamics—specifically, those components of gender equality and relationship dynamics emphasized in the FFL curriculum. These components include support for equitable gender norms, rejection of violence, joint participation in decision-making, sexual satisfaction, and improved couples’ communication. Appendix B provides information for each lesson including its title, the associated Bible verse, the lesson objectives, and a summary of the facilitator notes.

Session 1, Friends with God, puts forth the narrative that a strong relationship, or friendship, with God must serve as the foundation and the model for all other relationships or friendships in a person’s life. The verse (Luke 10:27) associated with the lesson, which urges readers to love their neighbors as themselves, is used to lead participants to identify their spouse as their closest neighbor who is also deserving of love and friendship. Growing in relationships with God is shown as a way to further deepen a couple’s relationship with one another in their marriage. The lesson introduces the Hand of Friendship, which shows participants how to love with their hearts, souls, strength, and mind and to give love to their neighbors using the components of Luke 10:27. Participants are also encouraged to model their love for God, their neighbors, and their spouses after the love and sacrifice of Jesus. Just as Jesus loved through making sacrifice, talking and listening to those he loved, honoring and respecting all people, and sustaining love despite fear, betrayal, or abandonment, participants can show love in these ways. When applied to relationship dynamics, these attributes of friendship are aligned with more equitable norms and promote World Relief’s model of the strong, healthy couple.

The second session, Friends with Each Other, is divided into two parts. The first part builds upon the lessons of friendship introduced in the first session. The guiding narrative of part one proclaims the importance and necessity of building friendship between husbands and wives, which is referred to as the “marriage friendship.” This narrative is grounded in the verse associated with this lesson, Song of Solomon 5:16, which the lesson asserts indicates that lovers should also be friends. However, the verse does not describe friendship, leaving much flexibility within the lesson content. Four critical components of friendship are identified, and both husbands and wives are to practice these components. In a marriage, friendship requires talking to one another, listening to each other, spending time together to better understand each other’s ways of thinking and communicating, and becoming comfortable discussing both every day and serious things in life. None of these relationship dynamics are explicitly linked to religious teachings, but they do align with principles of equality and healthy relationships.

Part two of Session 2 builds upon the content of part one, but the guiding narrative is focused on maintaining the marriage friendship in the face of obstacles. Unlike Session 1 and Session 2.1, the guiding narrative for this session is predominantly drawn from the facilitator notes and lesson objectives, not the associated verse. Session 2.2 uses the same verse as Session 2.1 (Solomon 5:16), which does not expressly discuss identifying or overcoming obstacles in friendship. The illustrative story and lesson activity describe how obstacles to friendship can be hidden and couples must work to identify these obstacles, so they do not cause harm to the friendship. Participants are compelled to exercise protectiveness over their marriage friendship just as they would protect their spouse from harm. The lesson provides five approaches participants how use to rebuild a marriage friendship in the face of obstacles or threats, many of which are tied to religious practices or beliefs: open communication about difficult issues, which prevents misunderstanding and distancing; practicing forgiveness, as commanded by Scripture; letting God strengthen the

relationship through daily prayer; gaining wisdom and instruction by reading Scripture together; and recommitting to spending time together.

Session 3, *Friends with Extended Family*, aims to address a common obstacle experienced by couples in their marriages—relationships with their families of origin. The guiding narrative of the lesson is grounded in the associated verse, Ephesians 5:31, which describes the formation of a new family when a husband must leave his mother and father behind to join his wife. The session's illustrative story and activity teach participants that, after marriage, they must allow their new family to guide their lives, leaving behind the guidance of their family of origin. The scriptural messaging informs this teaching about relationship dynamics. In a facilitated discussion, participants explore the meaning of this session's verse as it relates to forming new families, distinguishing new families from families of origin, and uniting new families as one flesh. The facilitated instruction explores four aspects of new families: authority, distinctiveness, unity, and oneness. Facilitators emphasize the protection of the new, distinct, and unique family formed through marriage, which has new values and a new base of authority (though, there is not description of the authority). Though the religious messaging in this session is quite clear, the connection to gender equality is less explicit; it appears this lesson serves to establish a foundation for a healthy relationship, but does not specifically incorporate practices related to relationship dynamics or gender equality.

The fourth session continues to focus on instructing couples how to interact with the outside world. However, unlike Session 3, Session 4, *Friends with Our Neighbours*, does not guide couples in these interactions for the purpose of improving their relationship or maintaining equality in the relationship. Instead, the session is guided by the Biblical teaching of helping others in need as depicted in James 1:27. This verse provides the justification for helping others in need while the facilitator notes and lesson content describe how participants can provide such help. While this

lesson is clearly tied to religious messaging, it does not pursue outcomes relating to gender equality or relationship dynamics.

After this series of introductory lessons focused on friendship, the remaining FFL lessons shift to focus on sharing. The guiding narrative of Session 5, Sharing our Hearts and Minds, leads participants to focus on love and the sharing of their hearts and minds in their relationship while working to understand each other, including their differences. The bulk of the guiding narrative originates in the facilitator notes and lesson objectives, while the associated verse, 1 Cor. 13:1-2, appears less related to the points contained in the facilitator notes and lesson objectives. The lesson describes marriage as a lifelong covenant of sharing and also highlights the concepts of individuality and difference, which are not detailed in the guiding narrative. Using Psalm 139:14-15,³ participants discuss the major non-physical differences they perceive between men and women. Facilitators assert that men and women are made uniquely *and* equally by God, and communication, or the sharing of hearts and minds, between spouses is the only way to appreciate each other's differences. This is a clear tie to principles of gender equality. Later in the lesson content, the role of the guiding verse is described: the virtues described in 1 Cor. 13:1-2 are purposeless without the ability to speak in love, just as in marriage. The lesson presentation uses a parable to describe how God shows His love in actions, which segues into a discussion of showing the love in their hearts and minds through speech and actions in marriage. These practices are aligned with World Relief's model of healthy relationships.

Session 6, Sharing our Bodies, continues the series of lessons on sharing in marriage. This lesson is divided into two parts. The guiding narrative for Session 6.1 designates physical, sexual fulfilment as a gift from God that, when used as intended and under the conditions set forth by

³ "I praise you, for I am fearfully and wonderfully made. Wonderful are your works; my soul knows it very well. My frame was not hidden from you, when I was being made in secret, intricately woven in the depths of the earth." (Psalm 139:14-15, English Standard Version [ESV])

God, is a celebration. These conditions include saving sexual fulfillment for marriage; ensuring sex is not taken, abused, or harmful; only sacrificing sex when necessary (e.g., during sickness or separation); and engaging in sex in unselfish ways. The narrative is driven by Song of Solomon in its entirety, which is called a “detailed description of the beauty of sex,” and the lesson’s associated verse, Song of Solomon 7:10. The session focuses on the two attributes of sex described in this verse: sex as a personal possession and as a personal delight. In the lesson’s story about Jean and Evelyn, Jean approaches his friend, Pierre, to detail troubles in his sexual relationship with Evelyn. Pierre explains the differences in desire men and women experience and the need to focus on a spouse’s desires and pleasure in marriage. Importantly, Pierre urges Jean to make requests of his wife in their sexual relationship, not demands—illustrating rejection of violence in sexual relationships. The lesson presentation reminds participants that sex is to be enjoyed, but only within marriage and with their married spouse, making it a joint possession. Husbands and wives should ensure sex remains a delight in their marriage by keeping a fresh desire for sex and satisfying their partners. The lesson closes with a guided discussion of Song of Solomon 7:1-8:2,⁴ which contains the guiding verse, and contemplation of Proverbs 5:18-19.⁵ Interestingly, Song of Solomon speaks of both a man and woman’s desire, while Proverbs 5:18-19 speaks only of a man’s enjoyment of his wife. The

⁴ “How beautiful are your feet in sandals, / O noble daughter! / Your rounded thighs are like jewels, / the work of a master hand. / Your navel is a rounded bowl / that never lacks mixed wine. / Your belly is a heap of wheat, / encircled with lilies. / Your two breasts are like two fawns, / twins of a gazelle. / Your neck is like an ivory tower. / Your eyes are pools in Heshbon, / by the gate of Bath-rabbim. / Your nose is like a tower of Lebanon, / which looks toward Damascus. / Your head crowns you like Carmel, / and your flowing locks are like purple; / a king is held captive in the tresses. / How beautiful and pleasant you are, / O loved one, with all your delights! / Your stature is like a palm tree, / and your breasts are like its clusters. / I say I will climb the palm tree / and lay hold of its fruit. / Oh may your breasts be like clusters of the vine, / and the scent of your breath like apples, / and your mouth like the best wine. / She: It goes down smoothly for my beloved, / gliding over lips and teeth. / I am my beloved’s, / and his desire is for me. / Come, my beloved, / let us go out into the fields / and lodge in the villages; / let us go out early to the vineyards / and see whether the vines have budded, / whether the grape blossoms have opened / and the pomegranates are in bloom. / There I will give you my love. / The mandrakes give forth fragrance, / and beside our doors are all choice fruits, / new as well as old, / which I have laid up for you, O my beloved. / Oh that you were like a brother to me / who nursed at my mother’s breasts! / If I found you outside, I would kiss you, / and none would despise me. / I would lead you and bring you / into the house of my mother— / she who used to teach me. / I would give you spiced wine to drink, / the juice of my pomegranate.” (Song of Solomon 7:1-8:2, ESV)

⁵ “Let your fountain be blessed and rejoice in the wife of your youth, a lovely deer, a graceful doe. Let her breasts fill you at all times with delight; be intoxicated always in her love.” (Proverbs 5:18-19, ESV).

content of this session clearly uses religious teachings to encourage and justify the rejection of violence in sexual relationships and the importance of sexual satisfaction, two key components of gender equality pursued in the FFL manual.

The second part of Session 6 expands upon the guiding narrative of the first part to incorporate teachings about family planning and faithfulness in marriage. Session 6.2 is grounded in the narrative that children are a blessing for which couples must plan and that unfaithfulness violates God's design of marriage. Both of these teachings are based upon verses drawn from Biblical passages with similar teachings (Psalm 127:4, Proverbs 5:15, and Proverbs 6:27). In the lesson content, planning for childbearing and maintaining sexual health through faithfulness are framed as challenges couples face in their marital lives. In the illustrative story about Jean and Evelyn, Evelyn's friend Noémi seeks support and advice after her husband has had an extramarital affair. Noémi's husband cited their large number of children, which reduces the time Noémi has for her husband and has changed her appearance, as justification for the affair. The first part of the lesson presentation focuses on Psalm 127:4 and guides participants to understand their role as "skilled marksmen" in guiding and aiming their children (arrows). The lesson proclaims the value of children and the need to plan family size to protect the welfare of children and mothers. The lesson acknowledges there are traditional and religious beliefs that discourage family planning but uses Psalm 127:4 to justify the need to discuss and plan family size. Couples are instructed to talk about their family goals and resources, to come to a mutual agreement about family planning methods, to support each other in properly using the chosen method, and to provide adequate health care and support for wives and children. The second part of the lesson presentation in Session 6.2 is focused on faithfulness and sexual health. It begins by providing couples information about HIV transmission, then leads to a discussion of Proverbs 5:15 and 6:27. Facilitators explain these verses clearly reject the sharing of sex outside marriage: participants are to remain pure through faithfulness

(Proverbs 5:15) and are to avoid temptation by finding pleasure in marriage (Proverbs 6:27).

Unfaithfulness in marriage is presented as a risk for HIV transmission. The religious messaging in this lesson, though arguably tangential, is used to support principles of gender equality, like joint decision-making and family planning, that are clearly tied to sexual and reproductive health.

Session 7, *Sharing Gifts and Understanding: Understanding Our Roles*, is focused on exploring the manifestation of gender roles in marriage. The guiding narrative represents a more flexible reading of Ephesians 5:22-28, the theme verses of the lesson, which could be read as a presentation of rigid roles for husbands and wives. Instead, the guiding narrative is that husbands and wives must be challenged to reflect and explore their roles with the purpose of recognizing the complementarity of their “gender-based differences” (no definition of this term is provided). These differences allow husbands and wives to complete one another and navigate their lives as partners. Notably, in contrast to other lessons in which the facilitator notes solely provide instruction, the notes in this session urge facilitators to reflect on their own readings of Ephesians 5:22-28 and to interpret what these verses mean for husbands and wives on their own. The lesson content begins with a discussion of the traditional instrument used to grind Maniok (cassava) flour, which contains two components. Through demonstration, participants are shown that the two components are different but must work together to achieve their goal—just like husbands and wives. In gender-segregated groups, participants then generate lists of common roles or stereotypes associated with the opposite sex; while the facilitators note that they will discuss these lists later in the lesson, they are not discussed. In the illustrative story, Jean and Evelyn visit another, older couple, Pierre and Marie, for dinner. They discuss the fact that Jean has “delegated” some of his tasks around the home to Evelyn, which concerns Pierre, who believes the man should be the head of the household and that this represents “role mixing.” Despite the “risk” of shifting responsibilities, Jean believes he can share responsibilities with Evelyn and maintain his position as leader in the household, even taking

on household tasks like cooking “once in a while.” Evelyn also appreciated taking on tasks that utilize her skillset to “serve” Jean, and it made her feel trusted. After discussing the details of this story, the lesson presentation reminds participants that God made males and females different to complete each other in their differences both sexually and mentally. Spouses can benefit from the strengths and gifts of their partners, which allow them to share responsibility and face challenges. Rigid expectations from parents, neighbors, and cultures may cause couples not to respect, appreciate, or value their partner’s differences or gifts, but that is not aligned with God’s design. The lesson closes with a discussion based on Ephesians 5:22-28. Participants define expected roles for husbands and wives according to the Bible, culture, and reality; the lesson text does not provide answers to these questions. Participants also explore “wrong interpretations” of husbands’ and wives’ roles, like men using their role as head of household to suppress women, or women letting Biblical instructions of submission prevent them from making decisions. The content of this lesson is most strongly tied to the pursuit of gender equitable norms and seeks to link this value with religious teachings.

Continuing the theme of sharing, Session 8, Sharing Our Children, instructs couples on parenting. The guiding narrative includes a verse integrated in the body of the lesson, as no leading Bible verse is provided. The verse emphasizes the importance of honoring children based on Jesus’s actions, while the facilitators notes and lesson objectives focus on open communication with children around sexuality and HIV. The lesson is introduced with a Kirundi saying— “two stones do not help to boil the water”—to justify the three “stones” of care parents must provide: care through setting a positive example, physical care, and emotional care through open communication. However, there are no discussions of gender equality or the role of the marital relationship in promoting positive parenting. Instead, the lesson is focused more on age-based equality; participants are instructed that children are valuable to God and their families and they must be included in

family life and protected from threats. The lesson closes with a reflection on Luke 18:15-16 in which facilitators encourage participants to honor children and make time for them as Jesus did.

In Session 9, *Sharing Our Resources*, couples navigate how to share information and decisions around their physical resources (e.g., money, land, property). Again, the lesson does not have a leading verse, but the lesson relies upon 1 Cor. 12:14-27 in its presentation. This verse helps construct the lesson's guiding narrative: if God chooses to bless couples with resources, couples must be unified and open in sharing information about these resources. The lesson introduction reminds participants that resources are a gift from God. In the illustrative story, Pierre expresses concern about sharing information about his family's resources with his wife, Marie. While he wants Marie to be aware of their resources to protect her wellbeing, he is worried because "women talk." However, Jean reassures Pierre of Marie's trustworthiness and advises Pierre to explicitly ask for secrecy in sharing this information. The lesson presentation builds on this story to remind couples they should become one flesh (as discussed in Session 3) even in financial matters. Participants are to act as one body and not to keep information from other parts of their body (spouse and children), as described in 1 Cor. 12:14-27. This requires discussion about financial matters, forgiving resource-related sins, and planning growth and prosperity as a family. This sharing of information is linked to the healthy relationship practice of open communication, and also encourages equity in the sharing of resources.

The FFL manual closes on Session 10, *Sharing Throughout Our Lives*. The guiding narrative of this session is centered on the lifelong commitment of love and marriage, which requires continuous maintenance and growth. The narrative is motivated by the associated verse, Song of Solomon 8:6, but the details of continuing lifelong marriage are contained in the facilitator notes and lesson objectives. The lesson presentation teaches couples that marriage is not always easy and takes work. However, if they care for their marriage and treat it with honor, then the marriage will stay

strong. A worn Kanga (piece of fabric) is used to demonstrate this concept: despite its age, the fabric stays strong because it is made of quality material and has been treated with care. The lesson closes with a review of the objectives included in each of the previous sessions, weaving in previously covered principles of healthy relationships and gender equality, but not providing additional teaching or context.

Chapter 5: Discussion

Performance on Gender Equality Measures: Aims 1 and 2

The analysis presented the perspective of FFL leaders and participants on support for gender equitable norms, acceptance of violence in relationships, support for joint decision-making in relationships, and communication within a couple. Overall, both leaders and participants exhibited what could be considered gender egalitarian performance in all four domains: high support for gender equitable norms, low acceptance of violence, high support for joint decision-making, and high levels of communication. The majority of leaders and participants had either high or moderate support for gender equitable norms as measured by GEM Scale scores. Around two-thirds of leaders and participants did not believe violence was acceptable in any one of five presented scenarios. Around half of both leaders and participants indicated that the wife in their household participated in all three household decisions. Spousal communication on all four topics was nearly ubiquitous for both leaders and participants. These results demonstrate that leaders and participants who have completed FFL display beliefs and behaviors aligned with principles of gender equality and health relationships.

However, despite these results, there are some areas for potential improvement. More than one in ten leaders and participants exhibited low support for gender equitable norms as evidenced by GEM Scale scores. FFL program staff will need to undertake detailed analysis of the GEM Scale items receiving the lowest support to ensure these items are addressed in programming. For example, half of leaders and participants indicated that men should have the final say about decisions in the home. This belief contradicts FFL programming objectives related to joint decision-making, highlighting the need to strengthen teachings around this objective.

Of more concern is the fact that there is still one-third of leaders and participants who believe violence against a wife is acceptable in at least one situation. Participants and leaders were

mostly likely to believe violence was acceptable if a woman neglects children, argues with her husband, or refuses to have sex with her husband. Future programming should focus on understanding and addressing these justifications for violence. It is also important to address women's participation in decision-making. There are gaps in women's participation in decision making about their own healthcare; around four in ten leaders and participants indicate that women in their households do not participate in decisions about their own healthcare. There are also still gaps in women's participation in decision-making when it comes to household purchases and deciding to visit their friends and family. It will be important to critically examine how to strengthen teaching around decision-making to encourage joint participation.

Understanding FFL leaders' perspectives on gender equality and relationship dynamics is key to program development. Based on the additional training received by lead couples, and their continued involvement in FFL programming, I would hypothesize that leader couples would demonstrate higher support for gender equitable norms on the four measures included in the survey. However, as discussed in Chapter 4, there does not appear to be any statistically significant difference between FFL leaders and participants on any of the four measures of gender equality analyzed. It will be necessary to explore these findings to better understand their implications. This could include quantitative knowledge assessments before and after the initial and refresher trainings provided to leaders. Qualitative data collection with leaders, including individual interviews or focus group discussions, may also provide insight into the limited differences between participant and leader performance on gender equality measures.

It is helpful to consider these results in the broader Burundian context. However, it must be noted that the FFL survey analyzed herein was not designed for population-level comparison; thus, any differences in results and population-level data must be interpreted cautiously. Though there is not published evidence of the use of the full GEM Scale in Burundi, at least two evaluations have

relied on part of the scale in baseline analyses. One baseline survey from Tearfund International, completed in four provinces that did not include Gitega Province, where World Relief implemented FFL, used several isolated GEM Scale items (Deepan, 2014). As the survey did not use all GEM Scale items, it is not possible to construct a GEM Scale score from the responses; however, for the items included, the majority of male and female respondents both provided answers aligned with low support for gender equitable norms. Another survey completed for Care Burundi in six provinces, including Gitega, also used GEM Scale items and had similar results (Basse & Kwizera, 2017). Most men and women surveyed presented beliefs aligned with low support for gender equitable norms on a majority of items. Responses from FFL leaders and participants are in contrast to these findings, where a majority of respondents provided answers aligning with moderate or high support for gender equitable norms.

The 2016-2017 DHS in Burundi also contains information on joint decision-making and acceptance of violence that provides important context to these findings. FFL leaders and participants indicated that women participated in decisions about household purchases at higher rates than DHS respondents in Gitega Province (MPBGP, 2017). However, the same does not hold true for women participating in decisions about their own healthcare. Additionally, in comparison to DHS respondents in Gitega, a smaller proportion of FFL leaders and participants accepted violence in at least one situation (MPBGP, 2017).

Without baseline data, it is not possible to know if FFL leaders and participants exhibited this level of support for gender equitable norms before the program. There are several factors other than the FFL program that could explain the dissimilarities in GEM Scale performance, joint decision-making, and acceptance of violence. As FFL leaders were selected based on exhibiting healthy relationship behaviors, it is probable that they had moderate to high levels of support for gender equitable practices and behaviors before beginning the program. Additionally, as FFL

participants voluntarily chose to participate in the program, they may also differ from community members who chose not to participate in the program. Both FFL leaders and participants had high levels of involvement in other church and World Relief activities, which could also have exposed them to gender equality related messaging and affected their responses on the FFL survey measures of gender equality.

The Influence of Demographic Factors: Aim 3

This analysis found mixed influence of demographic factors on the four measures of gender equality, which varies further when looking at data collected from lead couples and participant couples. Across leaders and participants, male sex was associated with higher support for gender equitable norms, lower acceptance of violence, and higher levels of joint decision-making. Male sex was associated with higher levels of couples' communication for participants, but lower levels of communication for leaders. However, only the associations between male sex and higher support for gender equitable norms, as measured by the GEM Scale score, and joint decision-making, as measured by the Participation in Decision-Making Index, were statistically significant. These results appear to mirror similar findings from South Sudan and the Democratic Republic of Congo using the GEM Scale. In the Democratic Republic of Congo, a study of young, church-going men and women revealed low levels of support for gender equitable norms amongst both sexes, but men had slightly higher levels of support for gender equitable norms (Lusey et al., 2018). Similarly, in a community-based study of men and women in South Sudan, low support for gender equitable norms was pervasive, but women were slightly more likely to provide responses aligned with gender inequitable norms (Scott et al., 2014).

Strong patterns did not appear when analyzing support for gender equality by ten-year age groups amongst leaders or participants. For lead couples, support for gender equitable norms increased with age, as did acceptance of violence and joint decision-making. For participants,

support for gender equitable norms increased with age until reaching age 50, after which support decreased. Acceptance of violence varied slightly by age groups, but no pattern emerged. Joint decision-making increased slightly with age. There was little variation in couples' communication by age for leaders and participants. The differences in participant GEM Scale score and Participation in Decision-Making Index by ten-year age group were statistically significant, though no single pairwise comparison of age groups was significant. There is little conclusive published evidence analyzing the influence of age on support for gender equitable norms and joint decision-making. An analysis of the social factors influencing trends toward gender egalitarianism indicate that, though trends toward gender egalitarianism appear to be universal, they emerge generationally (Pampel, 2011). The generation into which someone is born is the main influence on someone's attitudes or behaviors around gender equality, as opposed to aging itself. Thus, older individuals tend to have less gender equal views due to the prevailing views during their influential periods of socialization (Pampel, 2011). However, recent evidence from sub-Saharan Africa about the influence of age on gender equality is varied. In Uganda, younger adolescents had lower support for gender equitable norms (Vu et al., 2017). In South Sudan, men and women under the age of 35 were more likely to provide responses aligned with gender equitable norms (Scott et al., 2014). An analysis of agricultural and personal decision-making using DHS data from Bangladesh and Ghana found women were slightly less likely to participate in agricultural decisions as they age, but slightly more likely to participate in personal decisions as they age; however, these associations were not statistically significant (Seymour & Peterman, 2018). Additionally, qualitative interviews in Burundi indicate younger men may feel increased pressure to exhibit more rigid, traditional gender roles (Deepan, 2014).

Like comparison by age, comparison by education level returned varied results. Amongst both lead and participant couples, there did not appear to be a consistent pattern of association between increasing education levels and GEMS Scale scores. The same was true of joint decision-

making. Acceptance of violence increased slightly with increasing education. Amongst leaders, those who completed secondary education had higher levels of acceptance of violence than all other groups; however, it must be noted that only two leaders had completed secondary education. Amongst participants, those with no education had higher levels of acceptance of violence than those with education. Again, there was almost no variation in couples' communication. Analysis indicated that there were statistically significant differences in leaders' acceptance of violence when compared by educational attainment, and there were also statistically significant differences in participants' acceptance of violence and joint decision-making when compared by educational attainment. However, again, no pairwise comparisons by educational attainment were statistically significant. Long-standing evidence has indicated that increasing education tends to increase support for gender equality, and efforts to increase educational attainment are upheld as strong measures to promote gender equal views (Kane, 1995; SADEV, 2011). However, the association between increased education and increased support for gender equality is not universal. For example, in the previously cited study in South Sudan, increasing education was associated with increasing support for gender equitable norms (Scott et al., 2014). Yet, a study of men and women in South East Nigeria, which used the Attitude Towards Gender Equality Questionnaire, did not find that educational attainment influenced attitudes toward gender equality (Okonkwo, 2013). The mixed results from this analysis do not align with the prevailing belief that increased education increases support for gender equality; a possible explanation for this could be the inclusion of an adult literacy category, which may influence the ability of the survey to capture formal educational attainment.

Alcohol consumption does appear to have an influence on both lead and participant couples' response on the four gender equality measures. For both leaders and participants, those who did not consume alcohol in the previous month exhibited higher support for gender equitable norms and lower acceptance of violence. Amongst participants, those who did not consume alcohol also had

increased couples' communication, but there was no difference for leaders. However, both leaders and participants who consumed alcohol in the last month had slightly higher levels of joint decision-making. The only differences that were statistically significant were for leader and participant support for gender equitable norms, measured by GEM Scale scores, and participant couples' communication, measured by the Couples' Communication Index. The influence of alcohol consumption on intimate partner violence has been widely studied; evidence almost universally supports an association between alcohol used and increased perpetration of violence, though the effect pathway is still contested (Foran & O'Leary, 2008, p.; Klostermann & Fals-Stewart, 2006). In a small South African study amongst men, reduced alcohol use increased partner communication, decreased violent tendencies, and improved sexual decision-making (Hatcher et al., 2014). There is little published evidence of the role of alcohol consumption in impacting gender equitable beliefs, but it can be hypothesized that similar patterns would hold. The patterns identified amongst FFL respondents appear to mirror the patterns expected, with respondents who did not consume alcohol demonstrating more gender equitable beliefs and practices. However, it must be noted that the level of alcohol consumption was not captured in this survey, making it impossible to determine if there is variation by amount of alcohol consumed.

Future analysis could explore the potential influence of additional demographic factors. Age at first marriage could be a more useful measure for comparison than respondent age (Ewerling et al., 2017). Additionally, it could be beneficial to include spousal comparisons as independent variables for analysis; for example, spousal difference in educational attainment or spousal difference in age (Ewerling et al., 2017). Another question of interest to World Relief is how the number of children a couple has may influence their support for gender equality. However, the FFL survey only captured whether or not couples have children thus, future surveys should also enumerate how many children each couple has. Finally, as this survey included leaders and participants who had

been involved in FFL in a five-year period (2014 to 2019), it would have been helpful to capture when the respondent completed FFL. This information could help assess the influence of time on respondents' retention of gender equality knowledge.

The Presence of Religious Messaging in Promoting Gender Equality: Aim 4

The qualitative analysis sought to describe the religious, spiritual, and faith-based messaging used in the FFL manual to promote gender equality. The most explicit form of religious messaging used within the manual is scriptural references. All of the sessions include at least one verse from the Bible, and the manual uses a verse to introduce ten of the twelve sessions. None of these verses appear alone without interpretation; the content of the manual provides an interpretation of the verse as it is linked to the objectives of the lesson. Many of these interpretations expand beyond the content of the text to ascribe implicit meaning. For example, the interpretations of Ephesians 5:22-28 in Session 7, pushes beyond the traditional, strict interpretation of the passage that emphasizes wives' submission to their husbands. The interpretation included in the manual aligns with a "revitalized interpretation" of the verse, a designation developed by theological scholar Carol J. Schlueter (1997). As Schlueter (1997) describes, revitalizers neither wholly accept nor do they wholly reject the scripture of Ephesians 5:22; instead, they combine the text of the scripture with emerging interpretations of gender equality. This revitalization allows for readers to allow the scripture and ideals of gender equality to coexist. In a similar way, many of the verses used in FFL sessions are interpreted to serve the program's overall goals of promoting gender equality and healthy relationships. Future exploration is needed to assess how these revitalized interpretations are presented by FFL facilitators and received by FFL participants.

The ways religious messaging is used to promote gender equality and healthy relationship dynamics in the FFL program vary widely by session, and some connections between religious beliefs and gender equitable practices appear to be weak. Notably, not all sessions included explicit

links to gender equality or healthy relationship dynamics. Two sessions (Session 4 and 8) do not have obvious links to program objectives around gender equality; thus, the religious messaging used in these sessions is not relevant to this discussion. The remaining sessions encourage gender equality through the promotion of healthy relationships by applying overarching religious principles to the marital relationship. For example, the concept of friendship, woven throughout the first few lessons, is not overtly religious nor is it overtly tied to gender equality. Through several scriptural interpretations, FFL program content presents ideals of friendship and the need to apply these ideals to the marital relationship; participants are urged to apply the religious principle of loving a neighbor as themselves to their spouse, who is their closest neighbor. Though this may promote healthy relationships by encouraging better spousal treatment, it does not clearly address gender norms that may inhibit this behavior. Further, there is a lack of thorough religious justification for certain practices in the program manual. Messages encouraging the prevention of sexual violence in Session 6, sharing responsibility and decision-making in Sessions 7 and 9, and improving communication in Sessions 2.1 and 5 are all proclaimed to be aligned with the intent and will of God; however, justification and explanation are not provided beyond these assertions.

Many of the sessions appear to be motivated more strongly by secular rather than religious messaging. Despite the presence of scriptural references and their interpretations in FFL sessions, most of the sessions' guiding narratives are drawn largely from lesson objectives and facilitator notes, which are not overtly religious in nature. The scriptural references support portions of the learning objectives and facilitator notes, but there are portions of sessions that are not directly or indirectly linked to referenced verses or religious teachings. The religious motivation for lessons, when present, is less frequently referenced and is not incorporated in every aspect of lesson presentation. This would suggest that, in the context of FFL, religious, spiritual, and faith-based

messaging is relied upon as only one method for promoting gender equality, coexisting with secular messaging and teachings.

Limitations and Strengths

The use of standardized metrics to capture respondents' beliefs and behaviors around gender equitable norms is a key strength of both the survey design and analysis. These indices have been created and validated by large-scale research organizations and their use has become commonplace in research relating to gender equality. Using standardized indices can help facilitate future comparison of FFL program data to data from other studies, programs, or contexts. However, the four gender equality measures vary in their usefulness and robustness. Due to the limited number of items used to construct the Participation in Decision-Making, Acceptance of Violence, and Couples' Communication Indices, there is little room for variation in scores on the index. Further, the Couples' Communication Index, the least used index of the four, does not appear to capture meaningful responses about couples' communication patterns.

The data collected in this survey is subject to high risk of social desirability bias. As all FFL leaders and participants had completed training on gender equality, healthy relationships, and other norms, and the survey was facilitated by enumerators who could be perceived as World Relief staff, respondents may have provided answers that they deemed to be more desirable (those reflecting high support for gender equitable norms). This could explain much of the lack of variation in the scores and indices measured in this analysis.

The sampling procedures, described in detail in Chapter 3, also undermine the generalizability of this survey data to all FFL program participants and leaders. Though the sample size calculator used appeared to rely upon standard sample size science, the sample size was not achieved amongst participant couples. There are greater concerns about the application of the sample across communes and the replacement of selected couples. The sample was not allocated

proportionally across all communes, and there was high replacement of couples despite enumerators' best efforts to locate couples. Both of these issues introduce selection bias, potentially skewing the results of the analysis. As there is not database of all program participants, it is not possible to compare the demographic make-up of the sample to the population from which they were selected. Thus, the possibility of selection bias and non-response cannot be ruled out and the analysis presented herein should only be generalized with caution.

Additionally, the cross-sectional, post-program nature of the data upon which this analysis is based limit the applicability of the analysis. Participants completed the FFL survey after graduating from the FFL program, and similar baseline data was not collected for comparison. Additionally, there was not an outside control group selected for comparison. Without a comparison group, it is not possible to draw causal inferences about the effects of FFL. Thus, the analysis and any correlations presented here can only be used for descriptive purposes.

The qualitative analysis presented herein relies upon principles of descriptive thematic analysis to explain the presentation of religious ideas in relation to gender equality. Generating inductive themes for each session – the guiding narratives – ensures the analysis is grounded in the textual presentation of concepts captured in the FFL manual. This helps reduce some analytic subjectivity, which is particularly important when embarking upon analysis of potentially sensitive topics like the role of religion in gender equality.

However, analyzing the written program manual does not provide the same insight into program delivery as direct observation could. As noted in Chapter 4, there are areas throughout the manual for participants and leaders to provide information that is not documented or written in the manual, and it is not possible to analyze how discussion sections may transpire in FFL sessions. The environment in which these lessons are delivered, which is not captured in the program manual, may also influence implementation; for example, it is not possible to identify the presence of religious

iconography or the inclusion of other religious practices in the sessions. Further, as FFL has not been evaluated for program fidelity, it is not possible to assess whether the program is delivered as it is in written in communities in Burundi.

Recommendations

Program Implementation

Staff involved in program design and implementation must pay special attention to the areas in which concerning trends still emerge; this is particularly relevant in the context of violence prevention, as many respondents still thought violence was permissible in one or more situations. Variation in support for gender equality by sex, age, educational attainment, and alcohol consumption may also indicate the need to incorporate approaches to work with those groups that tend to exhibit lower support for gender equality. For example, it may be beneficial to integrate education around alcohol consumption into FFL programming given the association between alcohol consumption and lower support for gender equality.

There is some evidence that the FLL program content as written may include gender stereotypes, which could be addressed in future program implementation. For example, in Session 5, participants are led in a discussion about the differences between men and women. Participants are instructed to list differences between men and women, but there is not guidance for facilitators about addressing potentially harmful or inaccurate differences participants could identify. In Session 7, participants generate lists of the stereotypical roles of men and women, but there is not a broader conversation addressing the origin of these stereotypes, the potential harm stereotypes can cause, or how to shift stereotypes. The manual indicates that the stereotypes will be discussed at a later point in the session, but the session does not include this discussion (nor does it appear to be present in later lessons); this leaves open the opportunity for leaders or participants to continue to hold stereotypical beliefs. This same session finds the term “delegate” being used to describe a husband

sharing roles and responsibilities with his wife in the home, which implies some level of subordination. Finally, some stereotypes about women and men are included without questioning. For example, in the illustrative story in Session 9, women are portrayed as prone to gossip. Incorporating such gendered stereotypes into a program promoting gender equality may have negative effects on the long-term outcomes relating to support for gender equitable norms. Future program implementation should work to remove these stereotypes and also explain the potential harm associated with holding stereotyped beliefs.

This assessment contributes to the growing body of evidence about programs promoting gender equality using couple programming in developing nations. However, further research is needed to explore the couples-based approach used. Future analysis could statistically assess participant couples' agreement on the gender equality measures assessed in the FFL survey. Couples agreement or disagreement on these metrics could provide insight into how the program is received by husbands and wives.⁶ Additionally, comparative analysis will be necessary to determine if this program can escape the common criticism that couple programming only improves relationships without shifting beliefs and practices (Greene & Levack, 2010). Additional studies are needed to determine if couple programming is acceptable in the Burundian context.

Survey Implementation

The analysis also provides insight into the implementation of the FFL survey that may be useful for future programmatic research. Future survey implementation could address concerns with sampling methodology and social desirability bias. First, careful attention must be paid to sample size calculations, and it is recommended to utilize sample size calculations designed for the purposes of scientific research. Should World Relief implement comparative analysis in the future, the appropriate sample size calculations for comparison must be used. Further, though it is impossible

⁶ As noted, FFL is only administered to married, heterosexual couples at this time.

to eliminate non-response and replacement, especially in a field-based survey, additional efforts can be made to track and account for non-response and replacement. Records should be maintained about replacement and, if possible, there should be comparison between respondents and non-responders by key demographic variables to identify the presence of non-response bias. As this survey is highly vulnerable to social desirability bias, World Relief could take additional efforts to ensure participants and leaders surveyed are encouraged to provide accurate responses. This could include using enumerators that are not known to be associated with World Relief, not providing enumerators with clothing or items branded with the World Relief logo, and providing enumerators with a script to be read to participants about the importance of truthful responses.

Several aspects of the survey design could also be altered to facilitate better analysis and comparison. Questions could be altered to capture additional detail about respondents, including those questions about having children and alcohol consumption. Staff should perform qualitative research to better understand the applicability of the Participation in Decision-Making Index in the Burundian context to determine if the questions asked truly capture empowerment. Further, as the Couples' Communication Index did not appear to provide meaningful data in this post-only analysis, further testing of the index's utility is warranted. Pre- and post-program, or treatment and control, comparison may determine that the index is effective at capturing differences between groups. If not, staff involved in survey design should consider testing and validating other measures to assess couples' communication.

Acceptance of Religious Messaging in Cultural Context

This analysis only presents a description of the religious, faith-based, and spiritual messaging used to promote gender equality. It is not possible to assess the acceptability of this messaging or how program leaders and participants perceive this messaging using program documents. It is also not possible to determine if the religious, faith-based, and spiritual messaging aligns with commonly

held cultural and religious beliefs or messages in Burundi. Qualitative research with religious leaders, community members, and program leaders and participants could provide greater levels of understanding about acceptability. This can also provide greater perspective into how religion creates and perpetuates beliefs about gender in Burundian cultural and religious contexts.

Understanding the acceptability of the messages is also key to understanding program success. If communities and participants are unwilling to accept religious interpretations, then the efficacy of the program may be affected.

Conclusions and Implications

Gender has gained increased recognition as a social determinant of health, as described in Chapter 2, and programs addressing gender equality play an important role in improving gender-related health concerns (Sen et al., 2007; Sen & Östlin, 2008). Gender equality programming can address injury and violence prevention, sexual health, family planning and reproductive health, and autonomy in health-related decision-making. FFL seeks to promote all of these outcomes. Further evidence will be needed to determine if FFL is able to improve gender equality and health outcomes related to gender inequality. These initial, cross-sectional findings provide a basis for further research to assess these outcomes.

The assessment of the FFL Burundi survey results is of greatest utility to World Relief in understanding, altering, and expanding the FFL program. Without comparison data either from a baseline assessment or control group, it is not possible to draw conclusions about the causal effects of the FFL program. If World Relief would like to demonstrate the effects of their program, future program implementation efforts should emphasize the collection of either types of data to facilitate comparison. This will require the development of robust monitoring and evaluation plans at the outset of implementation or scale-up.

However, this analysis still provides insight that can benefit program implementation. The relatively high levels of support for gender equality across leaders and participants for all four measures of gender equality are likely promising for program implementation (though it is unknown if respondents exhibited high levels of support before the program). Improving support for gender equitable norms has positive implications for health and wellbeing. Evidence suggests that higher support for gender equitable norms is associated with increased couples' communication and reduced alcohol consumption, which is often associated with the perpetration of IPV (Barker et al., 2011).

As a growing number of organizations, including FBOs, partake in efforts to promote gender equality, it will become increasingly important to ensure that messaging included in programming is effective and does not do harm. As discussed in Chapter 2, faith-based actors face additional scrutiny when partaking in gender equality work, largely due to prejudice from secular actors (Marshall, 2018; Ter Haar & Ellis, 2006). The qualitative analysis presented contributes to improving understanding of the messaging FBOs use to promote gender equality, a goal espoused at the 60th session of the UN Commission on the Status of Women (UN Women, 2016). The completion of similar analyses of gender equality programming from FBOs will only contribute to increased dialogue between faith-based and secular actors in the sphere of gender equality. Further, if religion is seen as a factor capable of encouraging and discouraging gender equality, then it is necessary to consider addressing the ways in which religion enhances or restricts advancement towards gender egalitarianism through religious messaging. Faith-based actors are natural allies in this pursuit, which some secular actors have recognized, and their presence in the development field is widespread. This analysis highlights the role of FBOs in promoting revitalizing interpretations of scriptural text to overcome potentially harmful interpretations of this text.

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Appendices

Appendix A. World Relief FFL Survey Instrument

Burundi FFL-test	
Site of household and survey information Enumerator: Note that these questions should be filled in by the interviewer and not directed to the informant/s.	
1.1. Household Number	_____
1.2. Cluster Number	_____
2. Date of survey yyyy-mm-dd	_____
Commune	_____
Zone	_____
Colline	_____
Souscolline	_____
4. Is the household in an urban or rural location? <input type="radio"/> urban <input type="radio"/> peri-urban <input type="radio"/> rural	
5. Name of interviewer?	_____
6. (Enumerator: The survey team has given you paper copies of a survey/introduction document and consent statement document. Please read both of these in full to the respondent. Did the respondent give consent to be interviewed and record this consent by signing or making their mark on the consent form? If yes, please keep the consent form but leave the survey introduction document with the respondent. If no, please thank them for their time and move to the next selected household (you cannot continue questions without documented consent).) <input type="radio"/> Yes <input type="radio"/> No	
Information regarding the respondent and/or head of household	
7.1. Respondent's name	_____
7.2. Gender of respondent <input type="radio"/> Male <input type="radio"/> Female	
7.3. Respondent's age <i>Should be at least 12 year of age</i>	_____
7.4. Do you have any children with your current spouse? <input type="radio"/> Yes <input type="radio"/> No	
7.5. Is this couple a lead couple for FFL? <input type="radio"/> Yes <input type="radio"/> No	
7.6. Enumerator: Please enter the unique number identifier of this couple (see your list)	_____
What is the religion of the respondent and/or head of household?	
8. Respondent's religion <input type="radio"/> Christian <input type="radio"/> Muslim <input type="radio"/> traditional / animist <input type="radio"/> None <input type="radio"/> other	

9. If Christian, ask which denomination or church the respondent belongs to?

- Anglican / Episcopal
- Baptist
- Catholic
- Methodist
- Orthodox
- Pentecostal
- Presbyterian
- Seventh day Adventist
- Salvation Army
- Other Christian church / denomination
- Independent non-denominational church
- Assemblies of God

Couple information

Enumerator: Enter respondent and spouse's information. Enter the respondent information first (household member #1) and their spouse's information second (household member #2)

* 10. Name of member #1? _____

* 11. Gender of

- Male
- Female

* 12. Age at last birthday of
put 0 if under 1 yr old

* 14. Date of birth, if known?

yyyy-mm-dd

* 15. Relationship to head of household?

- Head
- Spouse
- Child
- parent
- Other relative
- Not related

* 16. Present Marital status of

- Married
- cohabitating
- Separated
- Divorced
- Widowed
- Never married

* 17. At what age did first marry or begin cohabitating?

Marriage is defined however the respondent defines it. Could be traditional, religious, or legal.

* 18. Is or was helped by a church or World Relief project in last 2 years?

- Yes
- No
- Don't know

* 19. If involved what was the main type of project or programmes?

- Agriculture & Income Generation
- Health & HIV
- Nutrition & Kitchen Gardens
- Education
- Family support
- Improved access to clean water and sanitation
- Other

* 20.1. Does contribute to the household income?
 Never
 Sometimes
 Regularly
 Unable to work

* 10. Name of member #22 _____

* 11. Gender of
 Male
 Female

* 12. Age at last birthday of
 put 0 if under 1 yr old _____

* 14. Date of birth, if known?
 yyyy-mm-dd _____

* 15. Relationship to head of household?
 Head
 Spouse
 Child
 parent
 Other relative
 Not related

* 20.1. Does contribute to the household income?
 Never
 Sometimes
 Regularly
 Unable to work

* 16. Present Marital status of
 Married
 cohabitating
 Separated
 Divorced
 Widowed
 Never married

* 17. At what age did first marry or begin cohabitating?
Marriage is defined however the respondent defines it. Could be traditional, religious, or legal.

* 18. Is or was helped by a church or World Relief led project in last 2 years?
 Yes
 No
 Don't know

* 19. If involved what was the main type of project or programmes?
 Agriculture & Income Generation
 Health & HIV
 Nutrition & Kitchen Gardens
 Education
 Family support
 Improved access to clean water and sanitation
 Other

* 20.1. Does contribute to the household income?
 Never
 Sometimes
 Regularly
 Unable to work

20.2. Does your employment require you to stay away from your family for a month at a time or longer?
 Yes
 No

Household membership information continued

1

* 21. Has ever attended school or any early childhood education programme?

- Yes
 No

* 22. What is the highest level of education achieved by

- Early childhood education
 No schooling
 Some Primary
 Full Primary
 Some Secondary
 Full Secondary
 Vocational
 University
 Not known
 Adult Literacy

* 23. If 'some primary' what level has completed?
(number of years completed only)

* 21. Has ever attended school or any early childhood education programme?

- Yes
 No

* 22. What is the highest level of education achieved by

- Early childhood education
 No schooling
 Some Primary
 Full Primary
 Some Secondary
 Full Secondary
 Vocational
 University
 Not known
 Adult Literacy

* 23. If 'some primary' what level has completed?
(number of years completed only)

24. Please indicate the index of the respondent

25. Please confirm that is the desired respondent.

- Yes
 No

Household self-perception, beliefs, and practices

» Spiritual Practice Index

26. How often do you attend church or other religious meetings?

- Never
 More than once a week
 Once a week
 Once or twice a month
 A few times a year
 Seldom

27. How often do you spend time in private religious activities, such as prayer, meditation or Bible study?

- Several times a day
- Once a day
- A few times a week
- Once a week
- A few times a month
- Seldom
- Never / Don't Know / Refused

The following section contains 3 statements about religious belief or experience. Please mark the extent to which each statement is true or not true for you.

28.1. In my life, I experience the presence of the Divine (i.e., God), Pamoyo wanga, ndimawona kupedzeka kwa Unzulungu (i.e. Malungu)

- Definitely not true
- Tends not to be true
- Unsure
- Tends to be true
- Definitely true of me

28.2. My religious beliefs are what really lie behind my whole approach to life.

- Definitely not true
- Tends not to be true
- Unsure
- Tends to be true
- Definitely true of me

28.3. I try hard to carry my religion over into all other dealings in life.

- Definitely not true
- Tends not to be true
- Unsure
- Tends to be true
- Definitely true of me

28.4. Since joining FFL, has your involvement in church changed in any of the following ways?

- Started attending church
- Not attending church
- Attend church more often
- Attend church less often

Please ensure that you have complete privacy and that no one else is listening (ask those nearby to leave). Do you have complete privacy? If Not, the section on gender equality will be skipped.

- Yes
- No

Questions regarding gender equality

The questions in this section apply only to a respondent who is currently or has ever been married or lived with a partner/spouse.

29. Please enter the index number of the respondent.

Enter 0 if none

30. Is currently married, has ever been married or lived with a partner/spouse?

- Yes
- No

Enumerator prompt to read to the respondent: I would now like to ask you a few questions about your current relationship and how you and your partner/spouse relate(d) with one another. Again, all the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question, please let me know. May I start now?

- Yes
- No

Couple Communication:
In general, do (did) you and your (current or most recent) spouse/partner discuss the following topics together: Kulumkizana pabanja:

- | | | |
|--|-----------------------|-----------------------|
| 31.1. Things that have happened to your spouse during the day? | Yes | No |
| 31.2. Things that happen to you during the day? | <input type="radio"/> | <input type="radio"/> |
| 31.3. Your worries or feelings? | <input type="radio"/> | <input type="radio"/> |
| 31.4. Your spouse's worries or feelings? | <input type="radio"/> | <input type="radio"/> |

PARTICIPATION OF WOMEN IN HOUSEHOLD DECISION-MAKING INDEX

	Mainly wife	Wife and husband jointly	Mainly husband	Someone else
32.1. Determining your own health care?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32.2. Making major household purchases?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32.3. Visiting family and relatives?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gender Equitable Men Scale (GEMS):				
Enumerator prompt to read to respondent: The next set of questions will ask you about your views on relations between men and women in general. Please indicate if you totally agree, partially agree, or disagree with the following statements.				
Gender Equitable Men Scale				
	Agree	Partially agree	Do not agree	
33.1. A woman's most important role is to take care of her home and cooking.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
33.2. Men need sex more than women do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
33.3. You don't talk about sex, you just do it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
33.4. There are times when a woman deserves to be beaten.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
33.5. Changing diapers, giving a bath, and feeding kids is the mother's responsibility.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
33.6. It is a woman's responsibility to avoid getting pregnant.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
33.7. It is a wife's obligation to have sex with her husband even if she doesn't feel like it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
33.8. A man should have the final word about decisions in his home.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
33.9. A woman should tolerate violence to keep her family together.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
33.10. Only when a woman has a child is she a real woman.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
33.11. Men should be outraged if their wives ask them to use a condom.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
33.12. A man and a woman should decide together what types of contraceptive to use.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
33.13. A woman should not initiate sex.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
33.14. A woman should obey her husband in all things.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
33.15. A man needs other women even if things with his wife are fine. <input type="radio"/> <input type="radio"/>				
33.16. A man using violence against his wife is a private matter that shouldn't be discussed outside the couple. <input type="radio"/> <input type="radio"/>				
33.17. Sometimes it is okay for the man to shout at his wife to prove his status. <input type="radio"/> <input type="radio"/>				
Enumerator read the following statement to the respondent: The next questions are about your relationship with your spouse. If you feel uncomfortable or unsafe answering any of these questions, you may skip them. Your answers will be kept completely private and will not be shared with anyone.				
34.1. It is important to me that my spouse experiences pleasure when having sex with me <input type="radio"/> <input type="radio"/>				
34.2. Most of the time, we plan ahead of time to have a private place and time for sex. <input type="radio"/> <input type="radio"/>				
34.3. I feel I can talk with my spouse about my sexual needs and expectations. <input type="radio"/> <input type="radio"/>				
34.4. Having sex with my spouse fulfills my sexual needs <input type="radio"/> <input type="radio"/>				
34.5. My husband (or wife) understands if I refuse sex because I am tired. <input type="radio"/> <input type="radio"/>				
34.6. In the last seven days, my spouse and I have spent time together as a couple at least one time, doing an activity such as: drinking tea/eating together, walking together, talking together, or enjoying caring moments together before or after sex <input type="radio"/> <input type="radio"/>				
34.7. Did you consume alcohol in the last month <input type="radio"/> Yes <input type="radio"/> No				
Attitudes towards domestic violence: The following questions assume the respondent is aged 15 and over.				
Sometimes a husband is annoyed or angered by things that his wife does. In your opinion, is a husband justified in hitting or beating his wife in the following situations:				
35.1. She goes out without telling him? Yes <input type="radio"/> No <input type="radio"/> Don't know <input type="radio"/>				
35.2. She neglects the children? <input type="radio"/> <input type="radio"/> <input type="radio"/>				
35.3. She argues with him? <input type="radio"/> <input type="radio"/> <input type="radio"/>				
35.4. She refuses sex with him? <input type="radio"/> <input type="radio"/> <input type="radio"/>				
35.5. She burns the food? <input type="radio"/> <input type="radio"/> <input type="radio"/>				

HIV/AIDS - The following questions are about AIDS.
The following questions are about AIDS

38.1. Have you heard of an illness called AIDS?

- Yes
 No

Do you agree or disagree with the following statements about getting AIDS?

38.2. HIV, the virus that causes AIDS, can be passed from person to person through sex with a spouse who has had sex with someone else. Yes/No

- Agree
 Disagree
 Not sure

Enumerator: Please take some time to thank the respondent for their time and participation in the survey.

Appendix B. FFL Manual Guiding Narratives

Session	Title	Bible Verse(s)	Lesson Objectives	Summary of Facilitator Notes*
1	Friends with God	“And he answered, ‘You shall love the Lord your God with all your heart and with all your soul and with all your strength and with all your mind, and your neighbor as yourself.’” Luke 10:27	During this session couples will, 1. Appreciate that loving God and being His friend means we give back the love He gave us. 2. Understand that loving God and loving others means loving with our heart, soul, strength, and mind.	People must love God before they can love others. Jesus broke the barriers that prevented people from loving God and others. Through friendship with God, people can love God and others more.
2.1	Friends with Each Other	“This is my beloved and this is my friend.” Song of Solomon 5:16	During this session learners will, 1. Consider the meaning of friendship 2. Reflect on the characteristics of a friend 3. Discuss the aspects of friendship they would like to have in their marriage	Friendship can be forgotten in marriage. This lesson encourages spouses to be friends with each other to strengthen their marriage.
2.2	Friends with Each Other	“This is my beloved and this is my friend.” Song of Solomon 5:16	During this session learners will, 4. Explore what breaks down a marriage friendship 5. Consider how to rebuild a marriage friendship when it has faded.	Obstacles and threats can undermine all kinds of friendships, including marriage friendships. Couples should look for obstacles so they can overcome them. Both spouses must work together to identify obstacles, and they must be “deliberately open” with one another.
3	Friends with Extended Family	“Therefore a man shall leave his father and mother and hold fast to his wife, and the two shall become one flesh.” Ephesians 5:31	During this session learners will, 1. Explore the relationship between the nuclear family and the extended family. 2. Consider how to set healthy boundaries for relationships with the extended family.	This lesson discusses the formation of a new family unit through marriage and how that new family relates to the couple’s families of origin. New families have new, different authority bases, and must prioritize the needs of the immediate family in a united way.

Session	Title	Bible Verse(s)	Lesson Objectives	Summary of Facilitator Notes*
4	Friends with Our Neighbours	“Religion that is pure and undefiled before God, the Father, is this: to visit orphans and widows in their affliction, and to keep oneself unstained from the world.” James 1:27	During this session learners will, 1. Explore the biblical instruction to compassionately care for those in need. 2. Consider how to meet the needs of those in their neighbourhood.	Everyone must consider how they can help those in need. Needs are not only physical but are also emotional, mental, and spiritual.
5	Sharing our Hearts and Minds	“If I speak in the tongues of men and of angels, but have not love, I am a noisy gong or a clanging cymbal. And if I have prophetic powers, and understand all mysteries and all knowledge, and if I have all faith, so as to remove mountains, but have not love, I am nothing.” 1 Corinthians 13:1-2	During this session couples will, 1. Discuss the importance of understanding each other’s hearts and minds through communicating with each other. 2. Identify and practice two elements of communication—talking and listening.	Strong marriages rely on growth within the marriage. Husbands and wives may have different perspectives, which is why it is important to have open communication. This is important in marriage so husbands and wives can solve problems together and feel they both will be listened to, understood, and valued.
6.1	Sharing our Bodies	“I am my beloved’s and his desire is for me.” Song of Solomon 7:10	During this session couples will 1. Consider the positive outcomes when married couples think of sex as a personal possession and a personal delight. 2. Reflect how they may increase their desire and delight in each other.	Sexual fulfillment is a gift in marriage but there are conditions under which it should be enjoyed. It is saved for marriage, it should not be taken or harmful, and it should only be “sacrificed” rarely under certain circumstances (e.g., illness). God intends sex to be regular and enjoyable. Sex should not be selfish and the needs of both partners should be fulfilled. Sex is beautiful but can be misused. Song of Solomon 7:10 includes the two conditions for sex described in this lesson (personal possession and personal delight).

Session	Title	Bible Verse(s)	Lesson Objectives	Summary of Facilitator Notes*
6.2	Sharing our Bodies	<p>“Like arrows in the hand of a warrior are the children of one’s youth.” Psalm 127: 4</p> <p>“Drink water from your own cistern, flowing water from your own well.” Proverbs 5:15</p> <p>“Can a man carry fire next to his chest and his clothes not be burned?” Proverbs 6:27</p>	<p>During this session couples will,</p> <ol style="list-style-type: none"> 3. Discuss family size and understand how to plan for their families. 4. Understand the negative consequences when couples are not faithful to each other. 5. Identify risks for HIV infection and know how to prevent the spread of the virus. 	<p>Family planning should include considerations for desire and the health of mother and child. Unfaithfulness is a misuse of sex that violates God’s design for marriage.</p>
7	Sharing Gifts and Understanding Our Roles	<p>“Wives submit to your husbands, as to the Lord. For the husband is the head of the wife even as Christ is the head of the church, his body, and is himself its Savior. Now as the church submits to Christ, so also wives should submit in everything to their husbands. Husbands, love your wives, as Christ loved the church and gave himself up for, that he might sanctify her, having cleansed her by the washing of water with the word, so that he might present the church to himself in splendor, without spot or wrinkle or any such thing, that she might be holy and without blemish. In the same way husbands should love their wives as their own bodies. He who loves his wife loves himself.” Ephesians 5:22-28</p>	<p>At the end of the session the participants will,</p> <ol style="list-style-type: none"> 1. Reflect on the importance of accepting their gender-based differences 2. Discuss the benefits of having a partner who is different from themselves <p>The overall objective is that the couples see each other as complementary in their difference.</p>	<p>Facilitators should not want to challenge men’s role as responsible but instead encourage both husbands and wives to reflect on their roles in their families. Husbands and wives should reach decisions together and should not position one person as the decision maker.</p>
8	Sharing Our Children	<p>“Some people brought their little children for Jesus to bless. But when his disciples saw them doing this, they told the people to stop bothering him. So Jesus called the children over to him and said, ‘Let the children come to me! Don’t try to stop them. People who are like these children belong to God’s kingdom.’” Luke 18: 15-16</p>	<ol style="list-style-type: none"> 1. Parents will begin to see their children as an equal part of family life and as a consequence will let them participate in family life. 2. Parents will plan a regular "talk time" with their children. 3. Parents will accept to talk or initiate talks with their children about sex-life and HIV/AIDS and may refer their children to people whom they trust. 	<p>Parents should be the people providing guidance to children about sensitive issues like sexuality and HIV.</p>

Session	Title	Bible Verse(s)	Lesson Objectives	Summary of Facilitator Notes*
9	Sharing Our Resources	<p>“For the body does not consist of one member but of many. If the foot should say, ‘Because I am not a hand, I do not belong to the body,’ that would not make it any less a part of the body. And if the ear should say, ‘Because I am not an eye, I do not belong to the body,’ that would not make it any less a part of the body. If the whole body were an eye, where would be the sense of hearing? If the whole body were an ear, where would be the sense of smell? But as it is, God arranged the members in the body, each one of them, as he chose. If all were a single member, where would the body be? As it is, there are many parts, yet one body. The eye cannot say to the hand, ‘I have no need of you,’ nor again the head to the feet, ‘I have no need of you.’ On the contrary, the parts of the body that seem to be weaker are indispensable, <u>and on those parts of the body that we think less honorable we bestow the greater honor, and our unrepresentable parts are treated with greater modesty, which our more presentable parts do not require. But God has so composed the body, giving greater honor to the part that lacked it, that there may be no division in the body, but that the members may have the same care for one another. If one member suffers, all suffer together; if one member is honored, all rejoice together. Now you are the body of Christ and individually members of it.”</u> 1 Cor. 12:14-27</p>	<p>Through this session couples will,</p> <ol style="list-style-type: none"> 1. Understand that their unity as couples is possible even in financial matters. 2. Discuss the benefits and potential negative effects of sharing their financial matters with each other. 	<p>Disclosing fears and disappointments around resources helps to facilitate marital discourse and unity.</p>

Session	Title	Bible Verse(s)	Lesson Objectives	Summary of Facilitator Notes*
10	Sharing Throughout Our Lives	“...for love is as strong as death.” Song of Solomon 8:6	<p>During this session couples will,</p> <ol style="list-style-type: none"> 1. Review the meaning of lifelong commitment in marriage. 2. Understand some of the challenges to maintaining that commitment. 3. Review the basic themes from each of the 12 sessions. 	<p>Marriage is a commitment for life; the processes described in preceding lessons are intended to build a lifelong connection. Good marriages won't separate or fade in beauty, but they must be made of quality material. Spouses grow together in their marriage even in the face of change.</p>
<p>* The focus of the Summary of Facilitator Notes is to describe supplemental information related to the guiding narrative that is not evident from the Bible verse(s) or lesson objectives (e.g., additional explanation of the interpretation of the Bible verse).</p>				