An estimated 1.4 million men and women in Tanzania—5.6% of the population—live with HIV (TACAIDS et al., 2013). Of those, nearly 86,000 die each year. Women suffer disproportionately from the virus, with an HIV prevalence rate of nearly 6%, compared with 4% among men. The difference is starkest among those aged 25–29, with 7% of these women infected with HIV, compared with 2.5% of men. Gender norms—societal expectations of how men and women behave—are among the most powerful factors fueling HIV transmission worldwide. Men who adhere to inequitable gender norms are more likely to engage in unsafe sex with multiple partners, perpetrate violence against their partners, and abuse alcohol and drugs, placing them and their partners at risk for HIV and other adverse reproductive health (RH) outcomes.

The CHAMPION Project—Channeling Men’s Positive Involvement in the National HIV/AIDS Response in Tanzania: An Overview of the CHAMPION Project

Grounded in a holistic, gender-transformative ecological approach, CHAMPION worked in close collaboration with the Government of Tanzania, local partners, and communities to implement interventions in 50 districts within 20 regions throughout Tanzania to reduce men’s high-risk sexual behaviors, promote fidelity and a reduction in the number of sexual partners, eliminate gender-based violence, and increase men’s uptake of health services.

PROJECT OVERVIEW

The CHAMPION Project—Channeling Men’s Positive Involvement in the National HIV/AIDS Response—was a six-year project of EngenderHealth, funded by the United States Agency for International Development (USAID) through the United States President’s Emergency Plan for AIDS Relief (PEPFAR). In partnership with FHI 360 and in close collaboration with national, regional, and district-level government agencies and officials and local nongovernmental organization (NGO) partners, CHAMPION implemented interventions in 50 districts across 20 regions, with a special focus on 14 key urban districts with high rates of HIV and gender-based violence (GBV).

With a focus on high-risk adult men and their partners in the 14 highest HIV prevalence regions in the country, CHAMPION initiated an important national dialogue on the importance of transforming unequal gender norms as a means to reducing the vulnerability of men, women, and families to HIV and AIDS and other poor reproductive health outcomes.

In addition, CHAMPION worked with the Millennium Challenge Corporation/Millennium Challenge Account—Tanzania (MCC/MCA-T) to implement a workplace HIV program in temporary construction projects employing short-term mobile workers and a PEPFAR program to scale up the national response to GBV.
The Ecological Model
CHAMPION’s work was grounded in a holistic ecological approach that asserts that programs are more successful and sustainable when they apply a set of interconnected, multisectoral interventions at the individual, community, health services, workplace, and policy levels (Figure 1). Importantly, catalyzing significant and longer-term shifts in social norms and behavior also requires that programs work with both men and women through interventions that are gender-transformative and gender-synchronized.3

Project interventions at all five levels of the ecological model sought to: 1) promote partner reduction and fidelity and reduce high-risk behavior; 2) create an environment that promotes positive social norms; 3) encourage positive health-seeking behavior among men; 4) mobilize workplaces to advance gender equity and constructive male engagement in HIV; and 5) develop strategies for strengthening national, regional, and district laws and policies to engage men in HIV prevention efforts. GBV was addressed as a cross-cutting theme through interventions across all levels.

Examples of CHAMPION activities conducted at each level include:

**Individual Level**
- Implemented Men As Partners® (MAP®) curriculum with men and women
- Implemented CoupleConnect curriculum with couples

**Community Level**
- Mobilized community volunteers to implement local interventions
- Conducted mass media campaigns and associated community-based activities
- Linked communities with HIV testing and counseling (HTC)
- Developed social and behavior change communication (SBCC) materials
- Promoted supportive supervision and action planning
- Provided technical assistance to the government regarding HIV policies

**Service Delivery Level**
- Trained health workers and community-based providers
- Improved facilities to be more male-friendly
- Undertook community outreach through service provision and referrals
- Developed social and behavior change communication (SBCC) materials

**Workplace Level**
- Promoted workplace HIV policy development
- Trained and supported peer health educators (CHAMPION@Work)
• Conducted HIV education sessions (MCC/MCA-T)
• Engaged in community outreach
• Linked workers with HTC centers
• Promoted and distributed condoms

Policy and Advocacy Level
• Advised on HIV and health policies
• Trained district and national government officials and PEPFAR partners
• Supported the MenEngage Tanzania (MET) network

Within each objective, the project engaged individual men and women, community stakeholders, health care providers, workplaces, and local and national government bodies in challenging inequitable social norms, attitudes, behaviors, laws, policies, and environmental structures that influence male behavior. Interventions at each level were mutually reinforcing and reflected reciprocal causation between the individual and the environment.

Table 1. Cumulative achievements for the CHAMPION Project, by PEPFAR indicator

<table>
<thead>
<tr>
<th>Indicator</th>
<th>No.</th>
<th>Time period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indicator 2.1: No. of individuals reached through community outreach that promoted abstinence and/or being faithful</td>
<td>58,501</td>
<td>FY08–FY09</td>
</tr>
<tr>
<td>Indicator 5.2: Total no. of individuals reached with community outreach HIV and AIDS prevention programs that were not focused on abstinence and/or being faithful</td>
<td>31,698</td>
<td>FY09</td>
</tr>
<tr>
<td>Indicator P8.1.D: No. of the targeted population reached with individual and/or small-group level preventive interventions that were based on evidence and/or met minimum standards required</td>
<td>265,617</td>
<td>FY10–FY13</td>
</tr>
<tr>
<td>Indicator P8.2.D: No. of the targeted population reached with individual and/or small-group level preventive interventions that were primarily focused on abstinence and/or being faithful and were based on evidence and/or met the minimum standards required</td>
<td>179,241</td>
<td>FY10–FY13</td>
</tr>
<tr>
<td>Indicator GPY_PREV: No. of the target population who completed a standardized HIV prevention intervention, including the minimum components, during the reporting period</td>
<td>21,570</td>
<td>FY14</td>
</tr>
<tr>
<td>Indicator 2.2: Total no. of individuals trained to promote HIV and AIDS prevention programs that promoted abstinence and/or being faithful during the period</td>
<td>759</td>
<td>FY08–FY09</td>
</tr>
<tr>
<td>Indicator H2.2.D: No. of community health and para-social workers who successfully completed a preservice training program</td>
<td>1,358</td>
<td>FY10–FY14</td>
</tr>
<tr>
<td>Indicator H2.3.D: No. of health care workers who successfully completed an in-service training program within the reporting period</td>
<td>5,132</td>
<td>FY10–FY14</td>
</tr>
<tr>
<td>Indicator P12.1.D: No. of adults and children reached by an individual, small-group, or community-level intervention or service that explicitly addressed GBV and coercion related to HIV and AIDS</td>
<td>247,938</td>
<td>FY11–FY13</td>
</tr>
<tr>
<td>Indicator P12.4.D: No. of people reached by an individual, small-group, or community-level intervention or service that explicitly addressed norms about masculinity related to HIV and AIDS</td>
<td>113,623</td>
<td>FY13</td>
</tr>
<tr>
<td>Indicator GEND_NORM: No. of people completing an intervention pertaining to gender norms that met minimum criteria</td>
<td>1,089</td>
<td>FY14</td>
</tr>
<tr>
<td>Indicator 9.2: Total no. of individuals who received HTC and received results, disaggregated by sex</td>
<td>3,190</td>
<td>FY08</td>
</tr>
<tr>
<td>Indicator P11.1.D: Number of individuals who received HIV testing and counseling services and received their test results</td>
<td>45,836</td>
<td>FY09–FY13</td>
</tr>
<tr>
<td>Indicator HTC_TST: No. of individuals who received HIV testing and counseling and received their test results</td>
<td>4,139</td>
<td>FY14</td>
</tr>
</tbody>
</table>

**SUMMARY OF ACHIEVEMENTS**

CHAMPION’s programming principles, strategic approach, and utilization of best practices provided the foundation for effective interventions that contributed to the achievement of the project’s goals. In addition, the project contributed to PEPFAR goals 7 and 10—to prevent 7 million new HIV infections and to provide care for 10 million HIV-positive people, respectively—USAID’s Health Sector and Strategic Plan for Africa, the Millennium Development Goals in Health, and USAID/Tanzania’s SO10 Enhancing Multisectoral Responses to HIV. Over the life of the project, CHAMPION reached beneficiaries with HIV, GBV, RH, and gender equality messages and education through a range of individual, small-group, and large community interventions (Table 1). In addition to CHAMPION’s cumulative achievements by PEPFAR indicator, the project accomplished a number of additional results:

• Nearly 60,000 individuals were engaged to critically reflect on the role of gender equality in preventing the spread and
mitigating the impact of HIV through EngenderHealth’s gender-transformative Men As Partners® (MAP®) and CoupleConnect group education workshops.

- In collaboration with the Tanzanian government, CHAMPION contributed to the development, review, and operationalization of numerous national, district, and workplace-based policy-related documents and guidelines to ensure that gender and male involvement remain a priority for improving the health of all Tanzanians.

- A cadre of 280 community action team (CAT) members and more than 2,000 peer health educators—all volunteers—were trained and mobilized to spread CHAMPION’s messages and inspire behavior change within their communities.

- CHAMPION targeted workers and workplace managers through its CHAMPION@Work initiative, a comprehensive, workplace-based HIV intervention in which workplace peer health educators were trained to conduct HIV education sessions with their colleagues that focused on gender-transformative HIV prevention and RH messages, outreach to nearby communities, and the provision of HTC and RH services or referrals. Peer health educators in 10 workplaces across 11 districts reached more than 31,000 co-workers and community members with HIV prevention and gender-transformative messages.

- As lead partner for PEPFAR’s GBV Initiative in Tanzania, CHAMPION researched help-seeking pathways and barriers for GBV survivors. As a result of the study, CHAMPION developed GBV-prevention guidance for and provided technical assistance to PEPFAR partners in the Mbeya, Iringa, Dar es Salaam, and Mara regions. The project piloted an innovative bystander intervention in Iringa that helped community members to prevent violence, intervene when witnessing GBV, and speak out against the gender-inequitable social norms and behaviors that perpetuate GBV.

THE WAY FORWARD

Based on lessons learned from six years of project implementation, this program and research brief series provides a detailed overview of the interventions, activities, accomplishments, and challenges faced by the CHAMPION Project. Most importantly, each brief offers a set of recommendations for moving forward to ensure that future projects, programs, and interventions benefit from the wealth of knowledge gained by CHAMPION on how to successfully engage men in health and transform unequal gender norms to ensure the health and well-being of all Tanzanians.

REFERENCES


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