**KEY POINTS**

Through training and ongoing support, the CHAMPION Project worked to strengthen the capacity of advocates and leaders to plan and carry out community-level actions to promote equitable gender norms, reduce HIV risk, eliminate gender-based violence (GBV), and improve reproductive health outcomes.

Community-level champions are a critical ally in moving Tanzania’s national HIV prevention efforts toward empowering local partners to raise awareness about HIV and GBV and to challenge inequitable gender norms in their communities is a promising approach to engendering social change and improving sexual and reproductive health outcomes.

**BACKGROUND**

Inequitable gender norms—societal expectations of men’s and women’s behaviors—exacerbate the spread of HIV and contribute to poor reproductive and other health outcomes (Barker & Ricardo, 2005). Inequitable views of masculinity often lead men to engage in sexual behaviors that increase their risk for HIV and negatively impact their health and well-being, as well as that of their partners. Reducing the prevalence and impact of HIV requires efforts to foster and empower community-level champions. Local activists, leaders, and experts are best positioned to challenge the harmful social and gender norms within their communities that contribute to HIV transmission, gender-based violence (GBV), and other poor health outcomes (Global Fund, 2014).

From 2008 to 2014, the CHAMPION Project trained and supported community partners in 14 urban districts in 10 regions of Tanzania to plan and implement gender-transformative HIV and GBV prevention activities in their respective communities. With support from CHAMPION, community-level champions led local actions to raise awareness about HIV and GBV, championed equitable gender norms to promote long-term behavior and social change, and encouraged community members to get tested for HIV by linking them with health facilities in their area that offer HIV testing and counseling (HTC) and other reproductive health (RH) services.

**COMMUNITY PARTNERSHIPS**

**Ecological Model for Holistic Programming**

Using a holistic ecological model, CHAMPION promoted social and individual behavior change through complementary interventions at all levels—from policy and health service delivery to workplace environments and communities (CHAMPION Project, 2014). Interventions at each of these levels were focused on promoting gender equality and positively engaging men in HIV and GBV prevention and the promotion of sexual
and reproductive health (SRH). The project worked to transform individuals’ attitudes related to gender norms and SRH through intensive group education sessions and through media messaging on gender-equitable norms and masculinity. In addition, the project increased access to and use of preventive and curative SRH services—particularly by men—by strengthening the capacity of service providers and health care facilities to serve men and couples. At the community level, CHAMPION focused on identifying and empowering individuals and couples to spread positive messages about health, GBV, and couple communication through their communities.

**Identifying and Empowering Local Partners**

CHAMPION identified and supported local partners to undertake community-level interventions to promote social change around gender norms and SRH behaviors and care seeking. Partners included local nongovernmental organizations (LNGOs) and community-based organizations, as well as influential local leaders (e.g., religious leaders, teachers, marriage coaches, artists, journalists, media personalities). CHAMPION also established Community Action Teams (CATs) and Community Change Clubs (CCCs) comprised of men and women aged 25–49 who were interested in leading community change around gender norms. In addition, CHAMPION and its partners identified and supported individual champions—men, women, couples selected by their peers—to serve as gender-equitable role models and community change agents.

Building on the diverse talents of community partners, CHAMPION provided training and ongoing capacity building, working to foster in-depth understanding of gender norms among partners; at the same time, CHAMPION built their leadership, communication, and community mobilization skills so that they could be effective, long-term champions for social change, positive norms, equitable relationships, and healthy behaviors. Training interventions relied on participatory learning and action methodologies, which enabled community partners to identify and prioritize issues in their own communities that they were well-positioned to address.

**COMMUNITY-LED CHANGE INITIATIVES**

The project trained and supported 650 CAT and CCC members. Other community-based interventions, such as CHAMPION’s Men As Partners® (MAP®) group education workshops, reached 6,000 men and women in the project’s focus districts. CHAMPION’s community-level partners planned and led a variety of activities in their communities to create awareness, promote behavior change, and stimulate community dialogue about gender norms, HIV, SRH, and GBV. Their activities included:

- **Community dialogues:** Community members came together to discuss and identify common concerns and challenges related to gender, HIV, RH, and GBV in their communities and to develop actions plans to address these concerns.
- **One-on-one discussions:** Men and their partners were reached in informal social settings and during door-to-door visits with gender-transformative HIV prevention messages.
- **Video shows:** Using films with a strong story line and powerful messages as a trigger for reflection, community-level partners led community discussions around gender norms, HIV risk behaviors, and GBV.
- **Street dialogue and theater:** CAT and CCC members led traveling dialogue sessions (boda boda) on HIV, using provocative street theater and music to engage bystanders along their route in discussing issues related to gender and HIV.
- **Health fairs:** Liaising with local health facilities and CHAMPION-trained providers, community partners organized health fairs that brought HTC services and RH information directly to their communities. CATs and other community partners used these health fairs as opportunities to engage community members in dialogue and discussion about male involvement in SRH, as well as the influence of inequitable gender norms on HIV risk and GBV. In addition, these events were used to raise awareness of and provide referrals for other important health services, such as voluntary medical male circumcision (VMMC).
- **Sporting events and concerts:** Given their popularity, sporting events and concerts are a powerful medium for reaching men and women with gender-transformative HIV prevention messages. By involving musicians and athletes as role models and by integrating discussion about gender norms into these events, CHAMPION’s community partners promoted equitable gender norms while raising awareness about the linkages between gender inequality, HIV, and GBV. The project’s partners used sporting events to depict gender-equitable behaviors in intimate relationships as consistent with and similar to valued aspects of sports and athleticism, such as physical fitness and well-being, leadership, teamwork, trust, and accountability.
- **Marches and rallies:** Taking advantage of international and national days of commemoration (e.g., World AIDS Day, International Women’s Day, Father’s Day, Day of
African Families, and 16 Days of Activism against GBV), CHAMPION’s community partners organized marches and rallies, which brought together large numbers of people and generated considerable exposure and media attention to CHAMPION’s messages.

ACHIEVEMENTS AND LESSONS LEARNED
Through community-led change initiatives, CHAMPION’s activists and local partners reached more than 420,000 men and women in their communities with CHAMPION’s key messages; nearly 25,000 of those reached sought HTC services. Community partners expressed pride and satisfaction in the work that CHAMPION supported them to do, noting that they are recognized and respected in their communities for their efforts to effect change. In focus group discussions, CAT members described changes they had begun to see among their peers and in their communities—from improved couple communication and equitable management of household income to reductions in GBV, multiple concurrent partnerships, and marital infidelity. Similarly, local health providers and community leaders reported that the actions undertaken by CHAMPION’s community partners had a tangible and lasting impact.

CHAMPION’s community initiatives demonstrate that leaders of religious and community organizations, local government officials, grassroots organizations, and individual champions are critical partners for catalyzing social change. Through capacity building and support for a diverse array of locally tailored community interventions, CHAMPION was able to harness existing assets within communities and support these partners in identifying and challenging some of the underlying norms that contribute to HIV, GBV, and other poor RH outcomes.

RECOMMENDATIONS
Continuing to support community-level change agents is critical for accelerating a reduction in HIV transmission and the incidence of GBV in Tanzania. The following recommendations stem from CHAMPION’s experience and are intended to inform and guide future community interventions.

• Go local: Fostering and supporting community-level change agents is an effective strategy for spurring sustainable behavior change around gender norms, health seeking, and GBV. However, community interventions and related capacity building must be tailored to specific communities and to the partners who are working to lead social change. Efforts should be made to identify audiovisual materials that resonate with community members. The more “foreign” the messenger, the less likely the message is to resonate.

• Creativity matters: Most people in Tanzania have been exposed to HIV prevention campaigns in the past. To capture people’s attention, messages must be clever, catchy, persuasive, compelling, and tailored to the local context. They must provoke reflection and inspire discussion and debate, rather than reinforce and reiterate facts that are well-known, yet unheeded.
Avoid the “blame game”: In discussing gender norms and disparities between women and men, it is often easy to blame one sex or the other as the source of gender inequalities’ negative outcomes. Positive approaches can contribute to a more constructive dialogue about gender norms, why inequities exist, how they are harmful, why challenging them is important, and how they can be transformed.

Program holistically: Alongside community capacity-building and engagement efforts, programs should ensure the availability and accessibility of health services, such as HTC, to improve access for those who might not otherwise seek care. Service providers must also have the capacity, resources, and commodities available that are needed to provide the full range of client-centered services for HIV, RH, and GBV prevention and response. Likewise, community interventions and health systems strengthening and provider capacity building must be complemented by advocacy for policy change. This holistic programming approach ensures that mutually reinforcing interventions address challenges, gaps, and barriers at the supply, enabling environment, and demand levels.

REFERENCES