

WINNING NARRATIVES

Engaging men and boys as partners in ending Gender-Based Violence



A Movement Accelerator: Reframing/Winning Narratives Initiative Gender-Based Violence Attitudinal Research.

St. Lucia

St. Vincent and the Grenadines

Sherlina Nageer, MPH
For the Caribbean Family Planning Affiliation (CFPA)



Caribbean Family Planning Affiliation

Accredited Member of



International Planned Parenthood Federation



In support of



Spotlight Initiative
To eliminate violence against women and girls

An Initiative of the United Nations funded by the European Union



TABLE OF CONTENTS

Foreword	3
Executive Summary	4
Background	6
Research Methods/Limitations	7
Findings	
Demographics	9
Gender Concepts	11
GBV-Specific	13
I. Scope, Causes, Information Sources, Experiences	
II. Reactions to GBV- When, Why, How Intervene or Not	
III. Thoughts about Current GBV Messages and Approach	
Conclusion and Recommendations	24

FOREWORD

The Caribbean Family Planning Affiliation (CFPA) is a leading regional organization in sexual and reproductive health and rights (SRHR), dedicated to building a healthy and empowered Caribbean through the provision of high quality SRH services and the promotion of human rights. Gender based violence (GBV) is one of its priorities, particularly the linkages between SRHR and GBV. The CFPA has been working in engaging communities in a transformational shift from the paradigm of power, values and norms which have contributed to increasing rates and brutality of GBV, including barriers to access of SRH services and denial of rights.

GBV remains exceedingly high in the Caribbean, with nearly half of Caribbean women facing at least one form of violence: physical, sexual, economic, or emotional.¹ Caribbean societies are also reported to have a high tolerance for GBV which is rooted in the prevalence of patriarchy and inequalities. This research engages men and boys in a critical discussion on the issue of GBV and helps to unpack concepts of power and manhood, providing a space for men to resist toxic masculinities. We believe that men and boys have a vital positive role to play in ending GBV and transforming oppressive notions of gender that continue to plague our societies.

To heal from generations of trauma and to build healthy communities, we need new narratives built on empathy for each other and understanding of our collective struggles. The research provides an opportunity for men and boys to critically examine their understanding of gender construction and relationships, along with their knowledge of, and experiences with GBV, and to contribute towards the shaping of new national conversations where men and boys can be supported to be positive contributors to societal wellbeing.

The research was supported by the International Planned Parenthood Federation (IPPF) Movement Accelerator initiative which focuses on social movements, strategic, values-based communications and campaigns: as well as countering opposition to gender, equality and women's rights. Dubbed 'Winning Narratives', this initiative aims to change social norms around gender equality and SRHR and to improve critical understanding of, and responses to gender-based violence by focusing on men and boys, who often enter the narrative of GBV primarily as perpetrators.

We are grateful for the support of the IPPF and would like to thank Sherlina Nageer, the research coordinator and author of this report; the Youth Advocacy Movements (YAMs) of the St. Lucia and St. Vincent and the Grenadines Planned Parenthood Associations; and the local research coordinators Ademola Williams and Oliiviann Weekes.

Patricia Sheerattan-Bisnauth
Chief Executive Officer, CFPA
ceo.cfpa@gmail.com

¹ | <https://caribbeanwomencount.unwomen.org/>

EXECUTIVE SUMMARY

The aim of this research was to gain a better understanding of the thinking of men and boys around gender and gender-based violence (GBV) in order to develop more effective GBV prevention messages and strategies which would engage men and boys as partners in violence prevention.

A total of 520 men and boys between the ages of 15 and 60 from Saint Lucia and Saint Vincent and the Grenadines were engaged by this research project. Data was collected in a variety of ways- from traditional in-person interviews to telephone, Whatsapp, and Zoom conversations; this was as a result of having to take the COVID-19 pandemic precautions into consideration.

The research asked men/boys who participated to reflect on their childhood, the learning/messages related to gender and violence that they received both directly and indirectly then, as well as to share how they respond to conflict and instances of GBV in their adulthood- theoretically as well as actually. Existing messaging around GBV was also interrogated for resonance with this population, and their feedback solicited regarding how to better engage men and boys on this topic.

Findings reveal that most of the men/boys surveyed only had a vague understanding of GBV- that it referred to conflict between men and women in intimate relationships. The majority of respondents associated GBV primarily with physical violence, although there was also some specific mention of sexual and verbal violence as well. However, most respondents did not appear to have a comprehensive understanding of GBV- most did not mention psychological and financial violence. There was also limited acknowledgment of the fact that men are also negatively affected by GBV; some respondents even expressed the belief that GBV only affected women.

Men and boys' understanding of GBV was gleaned primarily from media (traditional and new); few messages about GBV were transmitted during the childhood period. A surprising number claimed that they were only now learning of the topic via their participation in this research project.

Most of the messages around gender that men/boys received during their childhood reinforced stereotypical hierarchical tropes such as men being protectors and providers of their families, and the main breadwinners. While laudable on one level, this focus on financial success/security can also be toxic when that becomes the only/main way in which men/boys find and assert their identity and self esteem. This overweening focus on the importance of financial/economic success means that other values such as empathy, nurturing, and emotional intelligence are often ignored/undervalued- resulting in one-dimensional men/boys who lack critical relational, communication, and conflict-handling skills. This research's findings about the great lack of involvement when GBV was witnessed, even among loved ones, prove this point about male lack of empathy and connection to others' suffering.

This research revealed that male involvement in anti-GBV actions hinged largely on whether or not they had a personal connection to the issue- either direct, personal experience, or via witnessing or being told about it occurring in their friend/family circle. However, although men/boys claimed to need more of a personal connection to the issue before they would feel compelled to take

action, the data revealed that even when men/boys had those personal experiences with GBV, as well as the power to effect change, they often chose not to take any action, preferring instead to “stay out of problems and other people’s business.” This shows more of a concern with personal welfare and preserving social relationships rather than acting in solidarity with women/girls- the group of persons who experience GBV the most.

The biggest problem with the GBV messages that currently exist is that they are not resonating with men/boys who see themselves as ‘good men’. Another problem with existing GBV messaging that this research revealed is that many men/boys were not seeing the existing GBV ads in the places they frequent. These are two significant issues that need addressing in order to attain greater and more impactful anti-GBV messaging among men and boys.

Significantly, a large number of men and boys surveyed reported a need for more classes/workshops/trainings for men and boys so they could increase their understanding of this issue. This means engaging men and boys in ongoing, interactive activities, not just as passive audiences for advertising and messaging.

BACKGROUND

Gender based violence remains a scourge in our societies, even though large amounts of time, money, and effort has been spent battling it for decades. Globally, 1 in 3 women have suffered physical and/or sexual violence by an intimate partner in their lifetime. In 2020, newly released data for the Caribbean have confirmed alarming rates of gender-based violence, reporting that nearly half of Caribbean women face at least one form of violence: physical, sexual, economic, or emotional. Caribbean societies are also reported to have a high tolerance for GBV which is rooted in the high prevalence of patriarchy and inequalities.

Gender-based violence, and in particular violence against women and girls (VAWG) is one of the most common forms of insecurity facing citizens in the Caribbean. The Caribbean Human Development Report 2012 notes that “citizen insecurity has become an urgent challenge of human development in.... the Caribbean” with gender seen as “the strongest predictor of criminal behaviour and criminal victimization” (UNDP Caribbean Human Development Report 2012).

The COVID-19 pandemic has exacerbated the problem worldwide and the Caribbean has seen a steep increase in numbers and brutality of crimes against women and girls. The stay-at-home orders coupled with many women losing their jobs have taken a toll on women.

Efforts to end GBV in the Caribbean have not been successful. Clearly, the current strategies are not effective. Strategic interventions are needed, including fundamental shifts in and critical approaches to people’s values, ways of knowing, thinking, and engaging with the issue, especially with people in their families, communities and other social circles.

This research provides insight into men/boys’ perceptions of GBV, their motivation for taking action or remaining uninvolved, and their own attitudes around conflict and relating. The goal is to engage men and boys as partners in the fight against GBV, not just deal with them as the perpetrators of violence against women and girls.

Research Methods and Limitations

This research was carried out in two countries of the Caribbean- Saint Lucia and Saint Vincent and the Grenadines, using data collectors employed and supervised by staff of the CFPA national affiliated- SLPPA and SVPPA. The survey tool was developed by this researcher, in her capacity as consultant for the CFPA. Training of data collectors and process monitoring and evaluation was also carried out by this researcher, remotely from Guyana.

The COVID-19 pandemic had a major impact on how this research was done; closed country borders and lockdowns prevented travel from Guyana to the two research sites and mandated remote training and other interactions, instead of the in-person gatherings which would have been done otherwise. COVID-19 also affected the methodology employed by the research team. Face-to-face, in person interviews (while observing the mandatory COVID-19 prevention guidelines such as mask wearing and social distancing)- the preferred research methodology was still done in the majority of instances, but virtual methods such as telephone, Whatsapp, Zoom, and Survey Monkey online platforms were also utilized in instances when research subjects and/or data collectors were not comfortable with in-person interactions.

This mixed data collection method may have had some negative impact on data quality as the virtual methods offered fewer opportunities for researchers to respond to and clarify respondents' questions about the survey tool and ensure proper completion of the survey. Transferring data from the various virtual platforms into the one main collection form may also have introduced opportunities for error. However, quality supervision and quality control measures were implemented and good quality data obtained overall.

The research targeted men and boys (and those who identified as such) from ages 15 to 60, primarily. No women or girls (or those who identified as such) were engaged by this project. Specific attention was paid to ensure that the research sample was as inclusive and representative of the nations' population as possible, and that there was the necessary diversity among respondents in terms of socioeconomic status/background.

Research subjects were identified via random sampling to ensure comprehensive and representative coverage of all the geographic and administrative regions of the two participating countries. A small amount of targeted outreach- such as to sports teams and prison populations, as well as LGBTIQ organizations- was also conducted in order to reach the desired sample size of 250 men/boys minimum per country and to ensure diversity and representativeness in the research sample.

*Note: The data gathered from prison inmates ended up not being included in the final research sample due to tardiness in its submission, as well as significant differences in its collection which this researcher assessed as potentially skewing the total data. Incarcerated individuals are an often-overlooked population sub-group, and more research focused and including them is needed; that was not a specific aim of this project however.

Additional research is needed on this topic among LGBTIQ populations as well, as those individuals may have additional insight into gender and gender norms as well as life experiences which could contribute significantly to expanding understanding of this topic. However, this project did not specifically aim to accomplish that goal. While queer men and boys (gay, bisexual, trans, questioning, and/or intersex) may have been engaged with this survey, specific data on sexual orientation and gender identity was not collected and responses from those persons have been completely disaggregated into the total research sample pool.

The goal of engaging equal numbers of men and boys in each of the age groups (15-25; 26-35; 36-45; 46-60) was not attained; more younger men and boys were actually reached. This may be a result of the fact that data collectors were largely drawn from the pool of youth volunteers that existed at the two organizations conducting the research. While this is something to remedy in future projects, there are also compelling reasons to continue to engage youth meaningfully in this research.

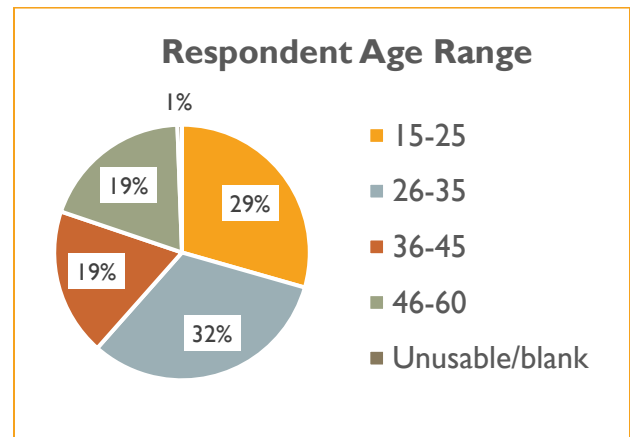
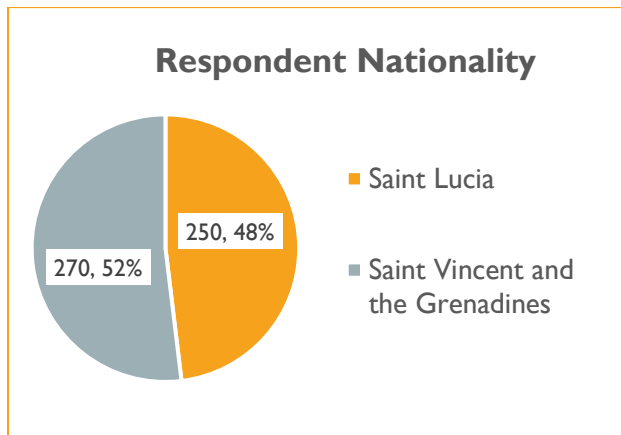
Another limitation of this research is that it only reviewed a sample of GBV ads that were currently available to research team members in Saint Lucia and Saint Vincent and the Grenadines; there likely are additional GBV ads/educational material which exist but were not assessed by participants of this project. However, the feedback that was received does provide valuable information which will greatly assist in designing more meaningful and impactful messaging- the goal of the project.

Finally, this research directly engaged only men and boys of Saint Lucia and Saint Vincent and the Grenadines. However, findings have been shared with persons working on this topic who live in several other Caribbean nations including Guyana, Trinidad and Tobago, Grenada, Dominica, as well as cross-regional organizations such as Cari-Man, and the new messaging developed will be shared with all CFPFA member associates in the region, as well as other partners and allies for dissemination and use in their various countries.

DEMOGRAPHICS

Nationality:

- Slightly more men/boys were reached in Saint Vincent and the Grenadines compared to Saint Lucia, but not significantly. Overall, there were no significant differences in the data between the two countries.

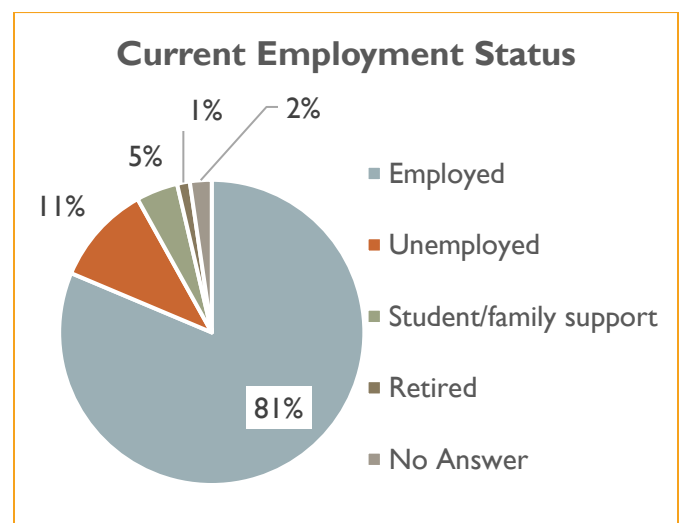
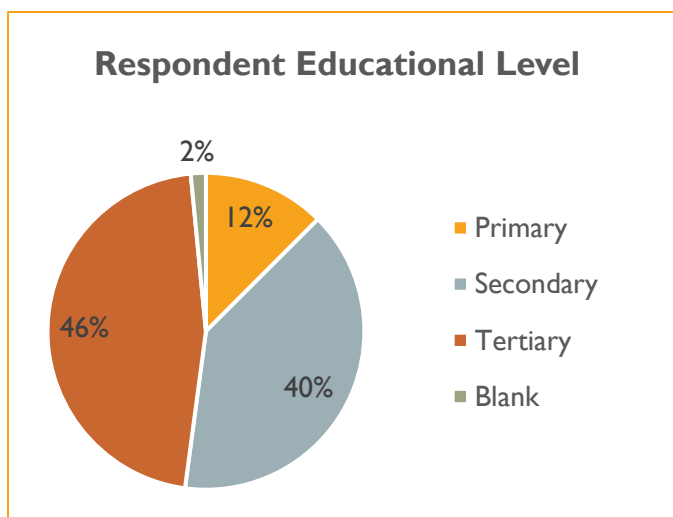


Age:

- While the intention was to reach equal numbers of men and boys in each of the specific age ranges, more younger men were actually reached by the data collectors.
- Almost a third of all respondents were between the ages of 26 and 35, but there were substantive percentages in the other age ranges as well. This allows for a fair amount of interrogation of perspectives across the life cycle.

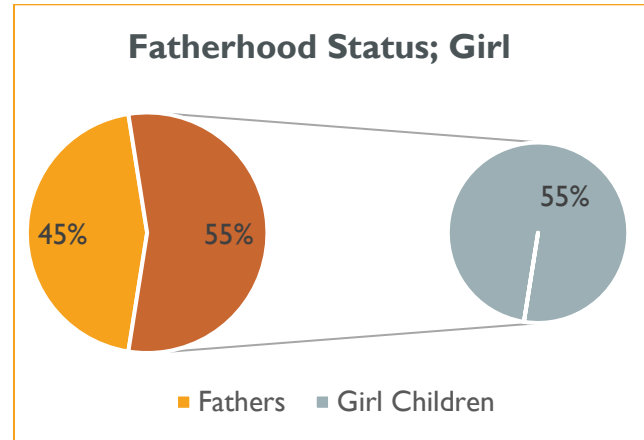
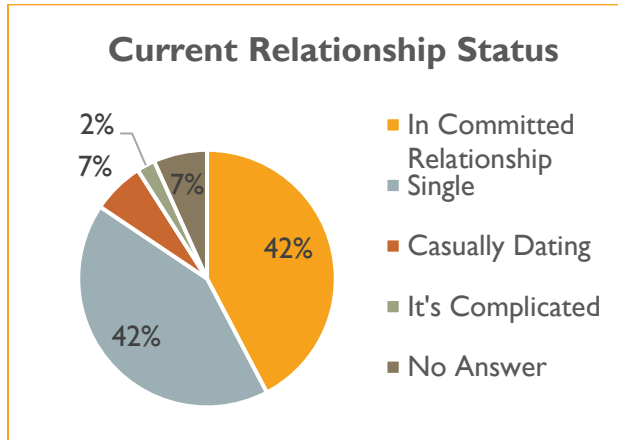
Education and Employment Status:

- Almost half of all research participants had attained tertiary education.
- The majority were employed, either full or part time. Only 11% were unemployed.



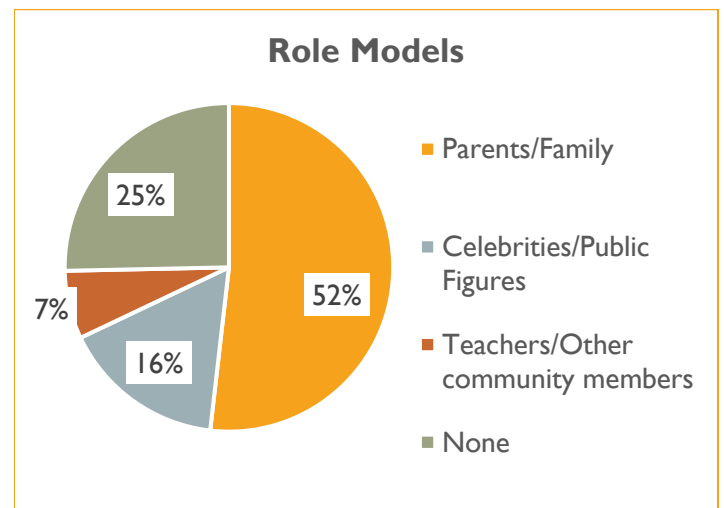
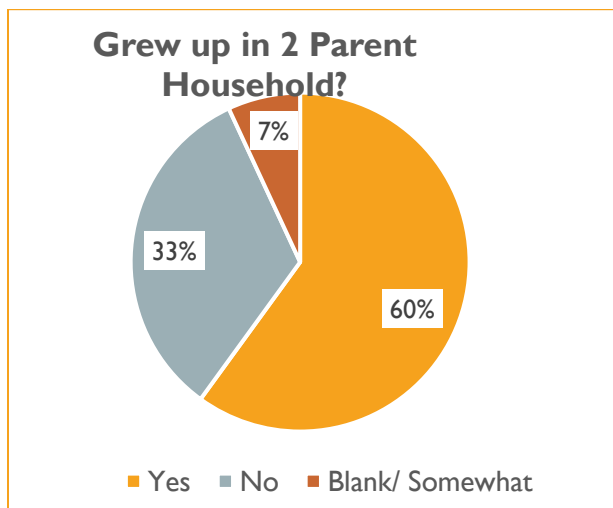
Relationship and Fatherhood Status:

- Equal numbers of respondents were single as in committed relationships (42% each).
- Almost half (45%) of them were fathers, with 55% of the fathers having at least one female offspring.



Childhood Influences:

- The majority of respondents grew up in households with both their parents; a third grew up either in single parent homes, or with other family members besides their biological parents (i.e. grandparents, aunts, etc.).
- Over half of the respondents (52%) listed their parents and other family members as their main role models while they were growing up. A quarter said they didn't have any childhood role models. Celebrities and public figures had more than twice the impact on respondents during their childhood (16%) than teachers and other community members such as religious leaders etc (7%).



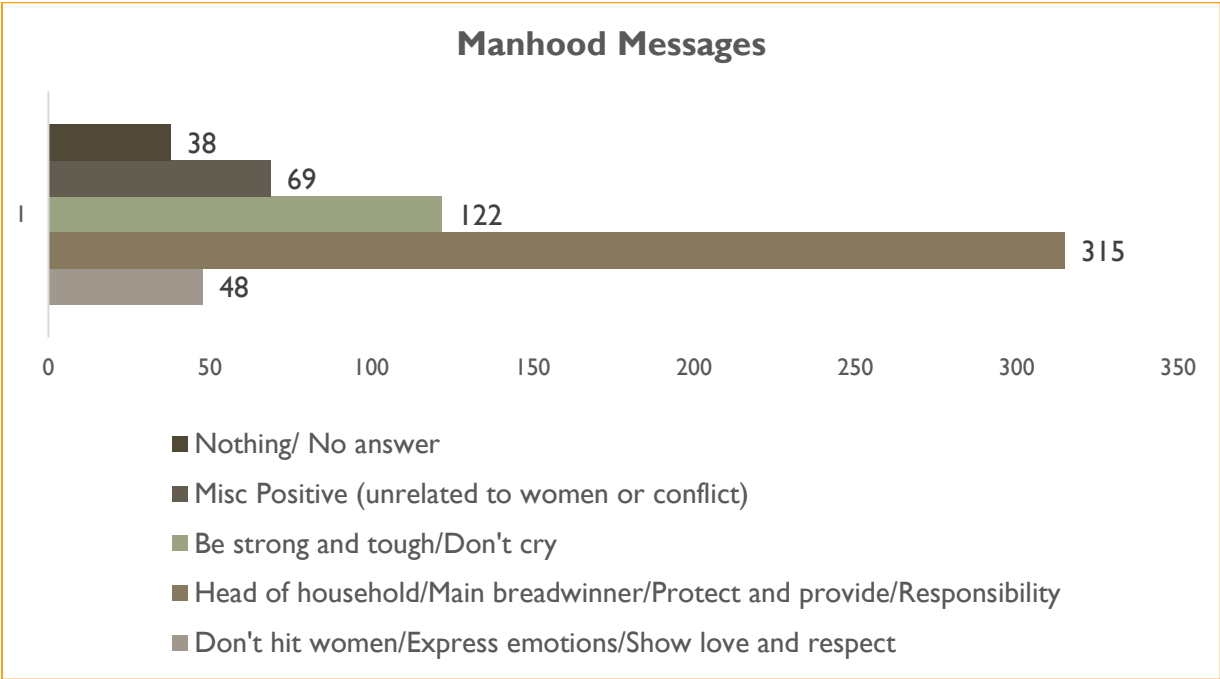
GENDER CONCEPTS

Manhood Messages:

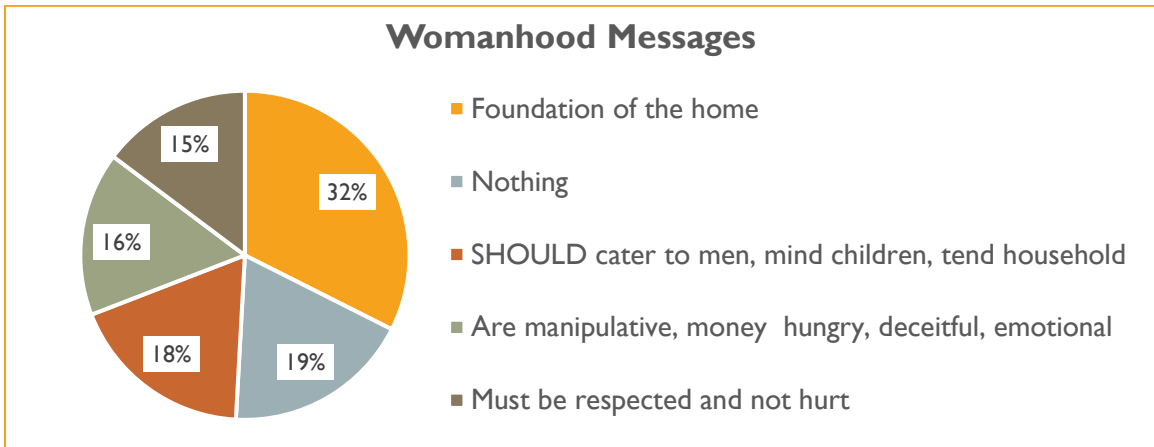
- The overwhelming message that men/boys received while they were growing up was about taking responsibility- ie working hard and providing for self and one’s family- being the breadwinner, protecting, and providing.
- Being tough/not showing emotions was the 2nd most common message/value transmitted to boys/men as they were growing up.
- Not hitting women, respecting and loving them was not a common message that many boys/men received while growing up (only 48 mentioned that specifically).

Manhood Messages:

- You must work and have a woman and children. As a man you run things.
- Men are the head of the household; they need to be responsible. I was taught to suppress emotions and that expressing emotions makes you gay.
- Men must keep true to their responsibilities, be strong, handle their issues on their own
 - Men need to take care of their children’s needs. Working hard is a must. When you're young, focus on getting money. Love will come.
- Men are supposed to take charge, not show any weakness, and be gentle with their spouse by showing them love, care and affection.



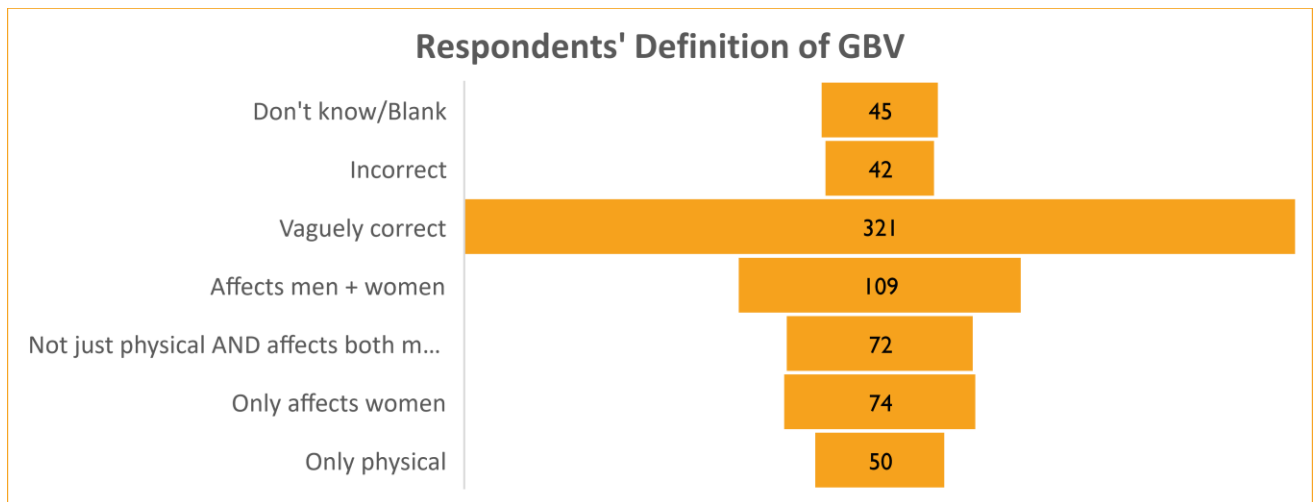
- Respondents also received stereotypical, gendered, problematic messages about womanhood during their childhood, with only 15% receiving any specific instruction about respecting and not hurting women/girls.



GBV- SPECIFIC FINDINGS

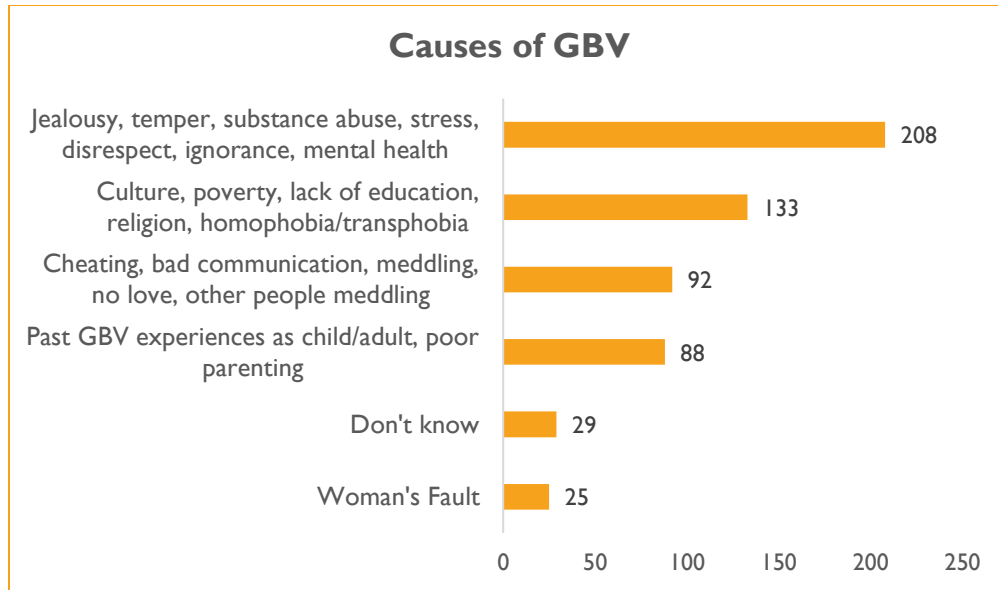
Definition/scope of GBV:

- Most of the men/boys surveyed only had a vague understanding of GBV- that it referred to conflict between men and women in intimate relationships. The majority of respondents associated GBV primarily with physical violence, although there was also some specific mention of sexual and verbal violence as well. However, most respondents did not appear to have a comprehensive understanding of GBV- most did not mention psychological and financial violence.
- There was also limited acknowledgment of the fact that men are also negatively affected by GBV; some respondents even expressed the belief that GBV only affected women.



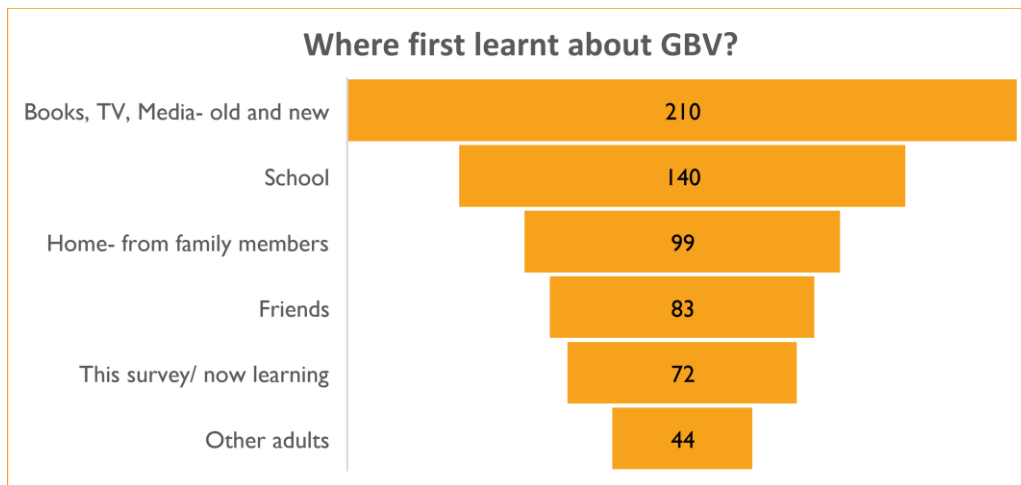
Causes of GBV:

- Respondents ascribed GBV mostly to individual failings such as jealousy, insecurity, having a bad temper, substance abuse, mental health issues etc.
- Structural issues such as poverty, “culture”, lack of education, and dysfunctional social relations were the second most popular reason given, with poor parenting and past experiences such as witnessing or experiencing GBV during childhood or previous relationships coming in fourth, after “relationship issues” such as infidelity and partner incompatibility.
- Problematically, some (albeit a small number) men/boys blamed GBV on women/girls completely.



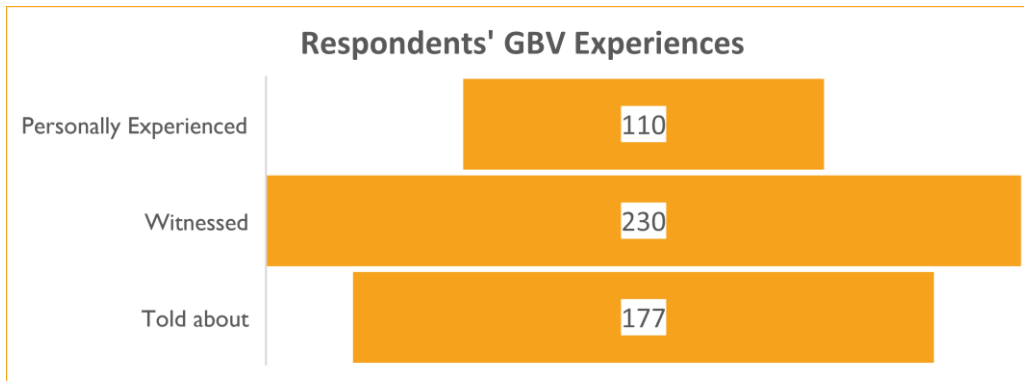
Sources of Information about GBV:

- Most of the men/boys surveyed reported learning about GBV from media- movies/TV/music/the internet/magazines etc. The second largest source of information was school, followed by family members in the home.
- A surprisingly large number of persons said they were learning about GBV for the first time, via this survey (*this might reflect issues with language/terminology/jargon).



Experience of GBV:

- A fifth of all respondents (21%) had personally experienced GBV (as child and/or adult).
- Over a third (37%) had been told of GBV experiences by friends/family members/loved ones.
- 44% had witnessed GBV in their immediate friend/family circle.

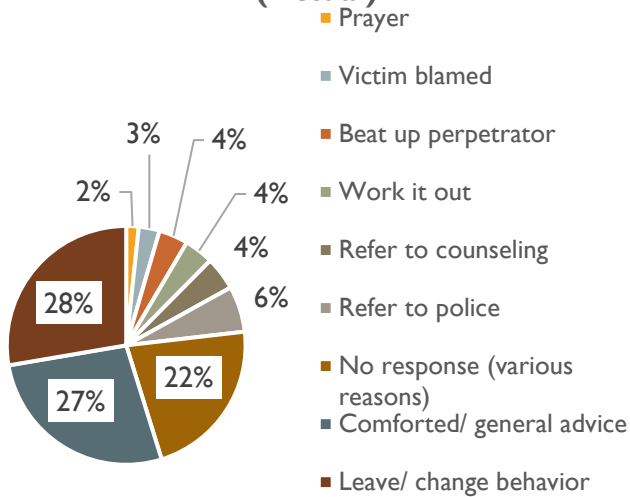


Responses to GBV- When, How, and Motivation for Action or Inaction:

Men/boys reactions to GBV were assessed by asking for their responses to several hypothetical scenarios, as well as for their real, personal experiences. Respondents were also asked about their ways of dealing with conflict they had with their own loved ones.

- Overall, men/boys did respond generally to instances of GBV that they witnessed or were told about, involving both loved ones and strangers.
 - However, the type of intervention varied considerably, depending on factors such as respondent age and agency (real and imagined), respondent's relationship to the persons involved (whether they closer to the perpetrator or the victim), if the persons involved in the conflict were known or unknown to the respondent, if they were married or in relationship with each other, if other persons were nearby and/or also taking action, if weapons were involved (also type), if police or other authorities were accessible, etc.
- Approximately equal numbers of men/boys intervened (47%) as didn't (44%) when they witnessed GBV occurring in their friend/family circle.
- The majority of individuals (77%) did respond when they were told by loved ones about their experiences of GBV. However, the nature/quality of their response was often superficial and while sometimes temporarily helpful, wasn't necessarily prevention-focused or survivor-friendly all the time.
- It is heartening to note that a significant number of respondents (over a quarter- 28% who were told of GBV by loved ones, and a third- 35% in the hypothetical sister scenario) counseled GBV survivors to leave the violent relationship/abusive partner, and/or encouraged the perpetrators to change their abusive behavior.
- While the majority of persons would not choose to intervene physically to stop GBV from occurring- especially if it involved strangers, they would take action by calling on the authorities (police), comforting, calming, and advising the affected persons, referring to other services such as counseling, providing them refuge if necessary, etc.

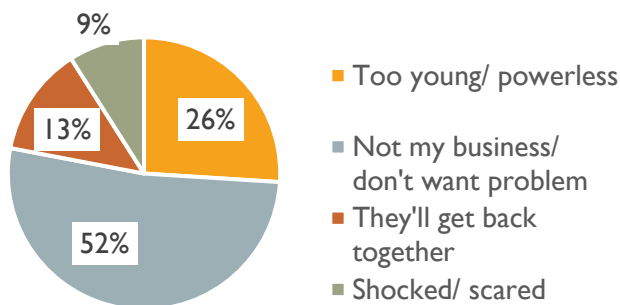
Responses to being told by loved one about their GBV experience (Actual)



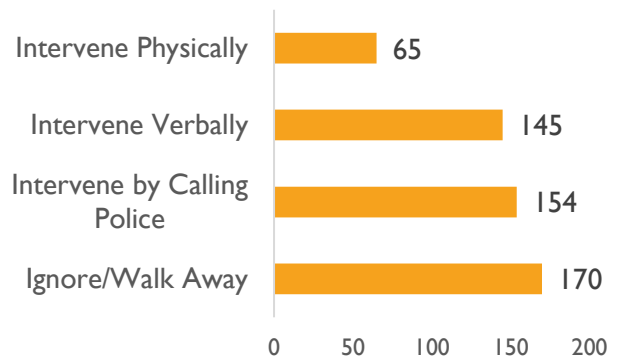
Response to sister experiencing GBV (Hypothetical)



Reasons for Not Taking Action when GBV witnessed in friend/family circle (Actual)

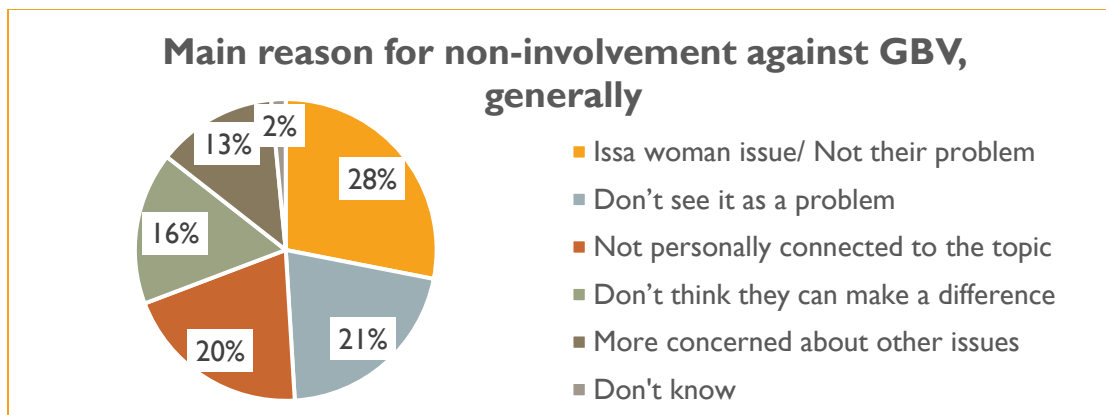


Responses to Witnessing GBV in the Street (Hypothetical)



Non-intervention, in actual and hypothetical situations involving loved ones as well as strangers:

- Approximately a third of individuals (33%) said they would ignore/walk away if they (hypothetically) witnessed an occurrence of GBV in the streets, between strangers.
- When asked to explain why men/boys didn't intervene when they observed GBV, over a quarter of all respondents (28%) said it was because GBV was a "women's issue" and not their problem.
- Approximately one fifth (21%) said the reason was because GBV was not seen as a problem in the first place (reflecting the normalization of this problem in society), and another fifth said it was because men/boys were not personally connected to the issue. An additional 16% said action wasn't taken because they didn't feel it would make a difference.



- However, even when men/boys *were* personally connected to the persons experiencing GBV, many of them still did not intervene. When GBV was witnessed in the respondent's friend/family circle, the majority (52%) reported not taking any action because they didn't see the issue as their business and didn't want any problems themselves.

Reasons for Not Intervening when Witness GBV in the street (hypothetical, strangers):

- Golden rule: Don't get involved in man and woman business. I might call the police but it depends on how I feel in the moment.
 - Keep walking; it's not my responsibility to play hero.
- Mind my business, not get involved. People don't help me with mine.
 - Continue walk me buddy; suppose the man kill me?
- It has nothing to do with me. I would stop, watch and enjoy and go about my business.
- I won't get involved. People do this often and the next day the woman is back with her man.
 - Not my business. I would keep away and even cross the road.
 - I would go about my business because it's a fair fight since the woman is fighting back.
 - Keep walking, that's life, these problems happen, don't get involved.
- This is very common and whilst it's wrong to do nothing, I try my best to stay away from people's relationship problems.
- The most I would do is check to see if the police are around but I am not getting involved. Man and woman fights are normal.
- I don't get involved in people's business. The police will deal with it. People get hurt trying to help.
- I'd prolly just go by my business, not even call the police unless a weapon is involved. Me nah

- Similar attitudes were expressed in response to a hypothetical scenario of witnessing GBV in the street, between strangers. More men/boys said they would ignore the fight and walk away than intervening, even verbally. Calling the police to deal with the matter was the second most popular response, reflecting respondents' concern for their personal safety and unwillingness to intervene in a more tangible manner.
 - It is noteworthy however that there was a small minority of men/boys who prioritized the wellbeing of the person experiencing GBV over their individual safety.

Reasons for Intervening when witness GBV in the street:

- I would tell him to stop his nonsense. A woman gave birth to you but this is what you're doing? That's disrespect to your mother.
 - Will intervene because a man's job is to protect.
- Will ask them to stop. If I have support, I would stop them. I don't want to be a bystander and watch someone get hurt.
 - I would intervene and break them up because men shouldn't be hitting women, it is wrong.
 - I would start to fight him. if I just walk away he would disrespect me.
- I would try to put a stop to it. I have a mother; I wouldn't want anyone to hit her. I wouldn't even be able to tolerate my father doing it.
 - I would help because what he is doing is wrong and I won't be able to sleep if I don't.
 - I would stop him with force to keep my conscience clear.
- I would try to help her as much as possible because I think it's the right thing to do. If it was my mother in that situation I would like someone to do the same.
 - Fight him off her. Man not supposed to hit woman. Encourage others to help.
 - I don't know the persons but I'll intervene simply because of how my mother raised me.
- To be honest I will try part them, try talk to the guy let him know we all have female in our life and if that was his loved one how would he feel?
 - I will hit the man because I watch the woman as my sister and I don't want any man to hit any of my sisters.
- From a safe distance, I would try to convince the man to stop. I believe that if others see me doing so they will pitch in.
 - Help the female and tell him to stop. My religion is against it.
- I would stop and confront them verbally. I would do this because I care about the happiness and well being of others.
 - Try to separate and find people to assist me. If I don't it could lead to something worse.

Motivation for taking action against GBV

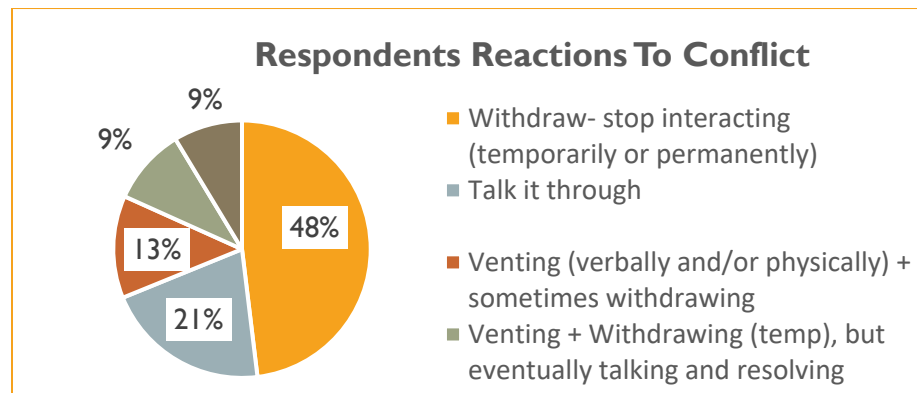


- Interestingly, religiosity did not emerge as a significant factor influencing men/boys' decision making on whether to take action around GBV or not; only a few respondents mentioned their religious beliefs in this way.

Ways of dealing with conflict with loved ones

Respondents' ways of dealing with conflict with their own loved ones was also interrogated as a way of better understanding the various possible responses and reasoning of men/boys that could lead toward or away from violence.

- The majority of respondents- almost half (48%) - said they withdrew from situations of conflict with their loved ones, usually temporarily, but sometimes permanently (ending relationship).
 - While withdrawal was generally employed as a method of ending or de-escalating conflict, it was also sometimes weaponized, with “silent treatment” being used to punish partners.
- About a fifth (21%) were committed to resolving conflict by communication.
 - This number increases closer to one third (30%) when respondents who vent and withdraw temporarily but then return to talk and resolve the conflict (9%) are added.
- A few admitted to using physical violence; more vented verbally- i.e. by shouting, cursing, etc.
 - The men/boys who utilized physical violence in their personal conflicts were largely unrepentant; they also often espoused misogynistic and toxic beliefs about gender/masculinity.



Problematic responses to interpersonal conflict:

- Getting angry quickly is normal. I don't care what happens after. I just slap the woman and let her know her place. I was her man and her child's father. She disrespected me and I showed her who was the person taking care of the family.
 - I stayed silent and refused to communicate.
- It was with my woman, she pushed me. I gave her a few slaps. Her eye got swollen she left for a few days but came back, so no worries. Do what needs to be done.
 - I ended up in the hospital because I got into a fight.
 - My father always said earn respect so sometimes you need to do what it takes.
- Sometimes you have to discipline people even if it means slap, punch, but I won't allow people to disrespect me.
 - It's normal for me to want to get physical in a conflict.
 - I do what I have to do. As a man you need to take charge and do what's necessary.
- I don't take nonsense from anyone. I give you a slap to know your place. If you don't like that then leave.
 - I never really dealt with it; we just pretended like it never happened.
 - I give her the silent treatment; that does hurt them bad.

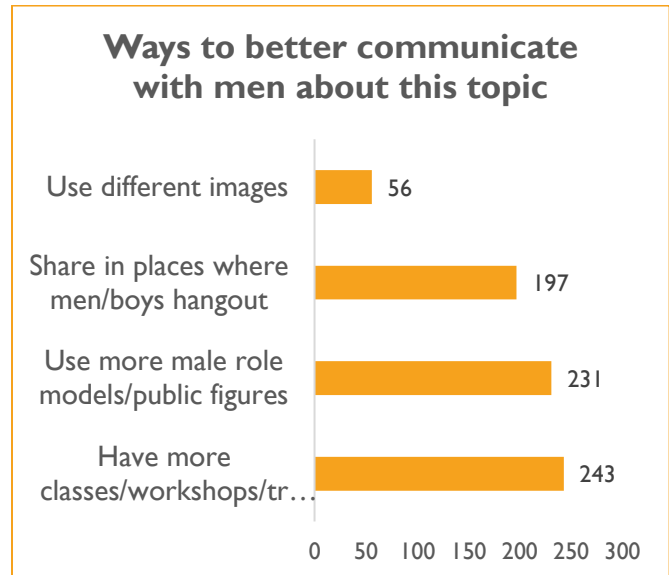
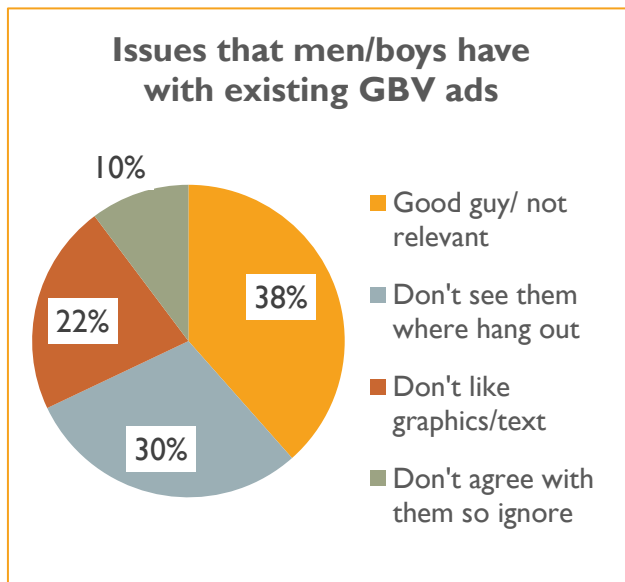
Good ways of dealing with interpersonal conflict:

- Sometimes the best thing is to walk away before you choke someone.
- I tried to remain quiet and calm myself before I respond in an abusive or aggressive manner. Then I deal with it when I am calm and stable mentally.
 - Keep calm and always think of good things.
- I walked away from that conflict because I know if I didn't, I might been in jail or in the cemetery. Sometimes the best decision is to avoid conflict, to walk away.
 - Block and delete and forget about her.
- I sleep in a different room, so we both can clear our heads. Some woman does do thing to tempt man. But I does remember I have a mother and a sister so I turn to the positive directions. I don't want to be labeled as an abusive man.
 - I took deep breaths and continued the conversation.
- I decide to be the big person in the relationship and apologize. We don't have to go through the day mad and have all that tension.
 - I walked away. My peace of mind is important.
- Each of us took turns to speak without disrupting each other. This helped us to solve things faster.
 - I left the house and went for a walk with my friends.
 - I use my words to convey how I feel.
 - I left the area so I could let all my emotions out somewhere else.
 - Sleep on it and talk to her the next day.
 - I just walk away from it and went by my partner for a two weeks.
- I walked away because I might have gotten into a fight with her. Now that I am mature when I look back at the past, I should have sit and try to trash out our problems than to run away from it.
 - I just left the house because I would give that woman a hard slap.
 - I does just give granny mi phone and tell her tell anybody who call I aint home.
 - Make my point and walk away.
 - I apologized and asked for forgiveness.
 - Just walked away because if I stayed we would have fought.
- I go sleep. Sometimes you just need to clear your mind and sleep does it. It keeps /stops you from doing shit.
 - I walked away from trouble.
- I took time to cool off then we addressed the conflict together. I gave the person a listening ear.
 - I took a time out to calm down and reflect on the issue at hand.
 - I asked a friend to be a mediator.
 - I tried to look for a solution and remained calm.

REACTIONS TO CURRENT GBV MESSAGING

There are three main issues that respondents had with the existing GBV messages:

- The biggest problem with existing GBV messages is that they are not resonating with men/boys who see themselves as ‘good men’, who do not abuse women. Men and boys who do not perpetuate GBV still have a very important role to play in GBV prevention; this research finding shows that current GBV campaigns have not engaged these men enough.
 - Some of this lack of resonance also comes from the fact that many men/boys surveyed report that they do not view GBV as their problem- it’s seen primarily as a “women’s issue”. This finding shows that existing GBV outreach and educational materials and messages are failing to describe the problem as a broader, societal one which also negatively impacts men/boys and is deserving of their attention.
- The second largest problem is that almost one third (30%) of men/boys surveyed reported not seeing the existing GBV ads in the places they frequent. This is another significant issue as impactful messages which do not reach their intended target audience result in a campaign with limited efficacy.
 - Specific mention was made by several respondents about showing the anti-GBV ads “on the block”, as well as at sporting and entertainment venues, barbershops, etc.
 - One innovative suggestion was to place anti GBV ads on alcohol bottles.
- Almost a quarter (22%) of survey respondents disliked the look of current GBV ads.
 - A few felt that existing ads were sexist and noted the lack of attention to male GBV victims.
 - Specific credit was given to ads and messaging that utilized local dialect/slang and were viewed as broadly appealing.



- Significantly, a large number of men and boys surveyed reported a need for more classes/workshops/trainings for men and boys so they could increase their understanding of this

issue. This means engaging men and boys in ongoing, interactive activities, not just as passive audiences for advertising and messaging.

CONCLUSION

This research shows that a great deal of work remains to be done in our societies in the GBV arena. The data reveal that men and boys in Saint Vincent and the Grenadines, and Saint Lucia are still largely influenced by toxic notions of masculinity which prioritize financial independence, stoicism, and dominance over emotional intelligence, empathy, and gender equity. Self preservation and maintenance of the status quo and traditional norms of relating take precedence over acting in the social good and extending oneself in service of others- even when those others are not strangers but one's own friends and family members.

These research findings reveal that many men in the countries surveyed (which are likely to be representative of the Caribbean region as a whole) believe that GBV is solely or primarily a "women's problem", do not feel connected enough to the issue to take action against it- especially if they may be harmed, and are unwilling to extend themselves to assist strangers. However, this unwillingness to intervene in instances of GBV remains- even when the victims and/or perpetrators are friends/family/loved ones.

There is a very strong cultural conditioning against getting involved in 'man-woman' business, and powerful social currency in "minding your own business". As a result, there is a significant amount of passive bystanding that occurs in our societies and that fosters inaction against GBV. Current GBV prevention messages do not address this.

This research also reveals the presence of a small but undeniable subset of men/boys who maintain oppressive and backward notions of gender and gender relations. These Neanderthal men/boys are products and perpetuators of a toxic idea of masculinity dominated by hierarchy, rigid roles, and antisocial self centeredness. Their emotional intelligence is under-developed and they also often show a marked lack empathy for others. These men/boys remain unmoved by anti-GBV messages and reaching them remains a significant challenge.

Engaging men and boys as partners in the fight against gender based violence entails employing a variety of tactics and working on multiple levels. Sometimes it may be necessary and effective to utilize traditional tropes in order to reach persons at their current level of understanding; at other times it might be possible and necessary to challenge the traditional norms and urge more transformative approaches.

These research findings do show ways in which men and boys could be better engaged as partners against GBV. This data show that there is a clear need to reframe GBV as also an issue for men and boys, and to show all the ways in which society as a whole is negatively affected by GBV. This would deepen men/boys' understanding of the issue and help increase their connection to the topic.

Showing how men and boys are negatively impacted by GBV also allows the opportunity to address the trauma that men/boys experience as victims of toxic masculinity- something which is still largely unacknowledged and unaddressed in this field. This is key, we believe, to transforming the prevailing narratives and really engaging men and boys as true partners in this crucial work.

This research shows that men and boys are also generally quite open to being engaged further on this topic; they admit the need for more specific classes, workshops, and trainings to help them deepen their understanding of the issue.

RECOMMENDATIONS:

- Use men/boy's traditional perception of women/girls as the cornerstone of the home and traditional male values around responsibility and men as protectors to develop new anti-GBV messages reinforcing women/girls' value to society and centering caring and respect as key to family health and happiness. *(not a truly transformative approach; just engages men/boys at their current level of understanding)*
- Utilize the common male response of withdrawal/avoidance to encourage non-violence during conflict with loved ones. *(Potential message examples: Women does look for trouble. Don't give them what they're looking for- walk away. Say No to Violence. Save yourself trouble. Walk away before you choke/slap/hurt that woman.*
- Utilize traditional images of men as having to be responsible and women as mothers to discuss positive parenting and the harmful impact GBV has on children. *(hitting the mother hurts the children too..)*
- Develop more active 'bystander' messaging to encourage more engagement when GBV occurs and is witnessed in the public setting, instead of the passive observation or ignoring of violent situations that currently prevails. *(Reach out to the 'good guys' to recruit more allies like them. Use 'conscience' and good Christian levers to activate more persons.)*
- Develop and disseminate educational material detailing the negative broad social impact of GBV and ways in which men and boys are also harmed- from witnessing GBV as children to adult dysfunction. *(men/boys as victims/survivors too; emphasize the importance of male mental/emotional wellbeing to familial/societal wellness- interconnectedness/intersectionality)*
- Ensure that GBV messages are placed in locations that men/boys frequent. Take socioeconomic status, educational level, and local dialect into account when designing and disseminating educational materials in order to maximize efficacy and uptake of messages.
- Use more male public figures in messaging/campaigns. Note however, that the primary role models of men and boys are their family members; as such, the family must be a key audience for this messaging.
- Avoid messaging that propagate the notion of men solely as perpetrators of GBV.

The Caribbean Family Planning Affiliation (CFPA)

The Caribbean Family Planning Affiliation is a leading regional civil society organization which is dedicated to Sexual and Reproductive Health and Rights. Established in 1971, it is an accredited member of the International Planned Parenthood Federation and comprises members in Anguilla, Antigua and Barbuda, Bahamas, Barbados, Bermuda, Curacao, Dominica, Grenada, Guadeloupe, Jamaica, Martinique, St. Lucia, St. Vincent and the Grenadines, Suriname, and Trinidad and Tobago, and partners with Family Planning Associations and Sexual Rights CSOs and state entities in Belize, Guyana, Jamaica, St. Lucia and well as regional organizations. CFPA's regional positioning makes it a leading advocate for SRHR across the Caribbean.

The mandate of CFPA is to promote SRHR with particular focus on marginalized populations to end decriminalization against women, marginalized and key populations. CFPA has gained credibility for its expertise and campaigns that address a range of SRHR and gender justice issues. The organization supports the rights of all persons, including youth and persons of diverse sexual orientation and gender identity, to make decisions about their bodies.

In November 2021, CFPA launched the establishment of the Caribbean Observatory on Sexual and Reproductive Health and Rights, which is supported of UNFPA and funded through the Regional Spotlight Initiative. The primary objective is to strengthen the region's positioning to deliver on key advocacy goals to eliminate Gender Based Violence (GBV) and to promote SRHR through galvanising movements to advance legislative and policy changes, making linkages between GBV and SRHR, tracking progress and engaging in social monitoring and advocacy - in partnership with governments and CSOs, and FBOs.

CFPA works to promote the prevention of unplanned pregnancy and the right of women's choice and bodily autonomy, the right to access comprehensive sexuality education (CSE) and the elimination of gender-based violence (GBV). The prevention and response to GBV is critical to our work, and is integrated into our SRHR objectives, services and programmes.

CFPA and its members advocate for the elimination of all forms of GBV, and its members support survivors through trauma informed care and counselling, information and referrals for specialized services, including mental health, empowerment programmes, access to justice and social support.

Caribbean Family Planning Affiliation (CFPA)
Sir Sydney Walling & Sir George Walter Highways, St. John's, Antigua and Barbuda
Tel + (268) 776-1518 (WhatsApp) / + (268) 462-4171
email ceo.cfpa@gmail.com
web www.caribbeanfamilyplanning.com
Caribbean SRHR Observatory - <https://caribbeansrhrobservatory.com>