

One Man Can:

Politicizing masculinities, gender-based violence and HIV

Anette Remme



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Abstract

This thesis focuses on men, in a search for the root causes of gender inequality, gender based violence and HIV in South Africa. I argue that it is time to move beyond the victimization of women and start politicizing masculinities. In addition to the focus on women's power and agency, we must understand the relations between women, men and structures of economy, politics, culture and so on. Masculinities have increasingly become a research focus in attempting to help men to understand and control their aggressive tendencies toward women. Even though these are important steps forward, this illustrates that the debate has been informed by the stereotype that women are vulnerable and men are aggressive, rather than the underlying causes for these roles. I argue, that gender issues are relational, vulnerability is contextual and even in difficult or poor circumstances people have opportunities to choose change. So, on the one hand, issues of violence and HIV must be politicized rather than individualized and, on the other hand, this should include masculinity and not remain a feminist agenda. Men in all their variety and complexity are almost invisible in these discourses, reduced to being represented as the problem. However, there are indeed options for masculine identity, HIV-prevention and non-violence to concur.

This thesis presents a 'bottom-up' understanding of the context in Cape Town's townships and explores how Sonke Gender Justice Network contributes to politicizing the otherwise depoliticized discourse on masculinities. They do this by utilizing principles of 'agency' instead of 'empowerment' and creating policies on social justice, gender justice and involvement of men. Stories from my informants will reveal how the One Man Can campaign works with gender justice within the complex context of participants' lives and thus make them a tool for the endeavor of ending violence and HIV. Sonke invites men to share their own experiences, build peer leaders and provide alternative masculinities based on experience and local knowledge. In addition they manage to speak to academics and other NGOs due to their holistic approach (using the Sonke Spectrum of Change) where experiences from communities inform research and advocacy.

Key words: politicizing masculinities, gender roles, gender equality, gender-based violence (GBV), HIV, South Africa, peer education, change agents.

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To be as open as I asked others to be: When I was five years old I remember witnessing my own father using violence, and since I was six he has not been in my life. I will never forget my meetings with people who are in search for similar answers and societal changes as me. I now know we are in it together.

Thank you!

Anette Remme

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Abbreviations

AIDS - Acquired Immune Deficiency Syndrome
ANC - African National Congress
ARV - Antiretroviral drugs
BPFA - the Beijing Platform of Action
BEE - Black Economic Empowerment
CAT - Community Action Teams
CSI unit - Communications and Strategic Information
CSW - UN Commission on the Status of Women
FOKUS - the Forum for Women and Development
GAD - Gender and Development approach
GBV - Gender-based Violence
HIV - Human Immunodeficiency Virus
IPN unit - International Program and Networking
LGBTI - Lesbian, Gay, Bisexual, Trans, Intersex
MMC - Medical Male Circumcision
M&E - Monitoring and Evaluation
NGO - Non-Governmental Organization
OMC- One Man Can campaign
Ops & OD unit - Operations and Organizational Development
PAR unit - Policy, Advocacy and Research
PMTCT - prevention of mother-to-child transmission
RHR - Refugee Health and Rights Programme (under the TCBCM unit)
SAIH - Norwegian Students' and Academics' Assistance Fund
SRHR - Sexual and Reproductive Health Rights
STI - Sexually Transmitted Infections
TAC - Treatment Action Campaign
TCBCM unit - Training, Capacity Building and Community Mobilization
UNAIDS - the Joint United Nations Programme on HIV/AIDS
UNDP - United Nations Development Programme
VAW - Violence against Women
WHO - World Health Organization
WID - Women in Development approach
WTO - World Trade Organization

Table of Contents

Abstract	1
Acknowledgements	v
Abbreviations	vi
Figures and Tables	x
1. Introduction	1
1.1 <i>The One Man Can – Welcome Wibooti</i>	1
1.2 <i>Adressing men to eliminate violence and HIV</i>	2
1.3 <i>Objectives</i>	4
1.4 <i>Thesis outline</i>	5
2. Situating HIV and GBV in South Africa	7
2.1 <i>South Africa</i>	7
2.1.1 <i>Race, class and inequality</i>	8
2.1.2 <i>Historical legacy and HIV and AIDS</i>	11
2.1.3 <i>Violence and HIV and AIDS</i>	12
2.1.4 <i>Gender and HIV and AIDS</i>	14
2.2 <i>Sonke Gender Justice Network</i>	15
2.2.1 <i>Sonke’s vision and mission</i>	16
2.2.2 <i>Origin and outreach</i>	17
3. Method	19
3.1 <i>Choice of field</i>	19
3.2 <i>Data selection</i>	21
3.2.1 <i>Confidentiality</i>	23
3.2.2 <i>Observation and interaction</i>	23
3.2.3 <i>Existing literature and limiting the scope</i>	25
3.3 <i>Challenges</i>	26
3.3.1 <i>Time</i>	26
3.3.2 <i>Language</i>	28
3.3.3 <i>Achieving trust</i>	28
3.4 <i>Could have done different</i>	29
3.4.1 <i>Stay longer and at a less hectic time of the year</i>	29
3.4.2 <i>Determined more in advance of the field visit</i>	29
3.4.3 <i>Reach out to more volunteers</i>	30

3.4.4	Diversity of informants	30
3.5	<i>Personal reflections</i>	30
4.	Theoretical framework	33
4.1	<i>Linking gender, GBV and HIV</i>	33
4.2	<i>Politicizing masculinities: a theoretical framework</i>	37
5.	The ideology of HIV and GBV	42
5.1	<i>Gender, class and race in health policy</i>	43
5.2	<i>Individualizing responsibilities</i>	45
6.	Sonke and the OMC campaign	51
6.1	<i>Sonke's ideology of change</i>	52
6.2	<i>One Man Can method</i>	55
6.2.1	One Man Can toolkit	57
6.2.2	Community Radio Toolkit	59
6.2.3	Community Action Teams (CATs)	60
6.2.4	One Man Can clinic in Gugulethu, Klipfontein	61
6.2.5	Refugees, Health and Rights team (RHR)	62
6.2.6	Prison project and ex-prisoner support group	62
6.3	<i>Implementing with peers as resources</i>	65
7.	Agents of change: Peer educators	67
7.1	<i>Welcome Wibooti - ex-gangster against violence</i>	68
7.2	<i>Saint Expedit Ondzongo - Ended use of violence</i>	70
7.3	<i>Jean-Marie Nkurunziza – Proud to be non-violent</i>	74
7.4	<i>Aviwe Mtibe - One man can mobilize the youth</i>	78
7.5	<i>Gail Roman - mother in violent community</i>	81
7.6	<i>Malwande Luzipho - Returning dad after three years</i>	85
7.7	<i>Siyanda Maso - Dreaming of investment in youth</i>	90
7.8	<i>Mkuseli Dlulane - To respect and be respected</i>	91
7.9	<i>Mzamo Sidelo - Change for the next generation</i>	95
7.10	<i>Cherith Sanger - experienced violence for 2 years</i>	98
7.11	<i>Zinhle Nkosi – We must create a space for men</i>	103
7.12	<i>Papy Molembe - I am the first man in my daughters' life</i>	105
7.13	<i>OMC agents for gender justice</i>	109
8.	Conclusion	112
8.1	<i>Lessons learnt from Sonke Gender Justice Network</i>	112

8.2	<i>Contextualization, peer education and ownership</i>	113
8.3	<i>Linking the perspective of communities and NGOs</i>	114
8.4	<i>Politicizing masculinities for change</i>	115
8.5	<i>Summing up</i>	117
	Bibliography	119
	Appendices	122

Figures and Tables

- Figure 1:** Shows that South Africa scores over the average of developing countries, on a Human Development Index (HDI), but the country is the worst of all countries considering the Gini-coefficient, which indicates degree of equality (UNDP, 2013). **Page 9**
- Figure 2:** *Links between GBV and HIV* (Jewkes et.al., 2010), summarizes stereotypes of gender roles and risk-taking that make out the prevailing 'ideology of HIV'. **Page 47**
- Figure 3:** Illustrates the theoretical framework Sonke works from, *The Sonke Spectrum of Change* (van den Berg, Peacock and Shand, 2012). **Page 54**
- Table 1:** Shows Sonke's organizational structure (Sonke, 2012:8). **Page 55**

1. Introduction

1.1 The One Man Can – Welcome Wibooti

Welcome Wibooti (31) was released from prison four months before I met him in Cape Town, South Africa. After encountering Sonke’s One Man Can awareness campaign (OMC) in 2006 through the prison project and learning that he could become a peer educator and even an agent of change, Wibooti exclaims: “*I decided to truly be the ‘OMC man’. I had to change, end my ‘gender inequality-ness’, turn around my un-submissiveness to women and my behavior, which was opposite to the OMC principles*” (interview, 2012). He conceives himself as an example of how receiving the right information and being in an allowing environment can enable men to become positive change agents in relation to violence and gender equality.

Wibooti is one of many young men in South Africa who became involved in ‘gangsterism’ and violence. Adding to what society had taught him about being a boy and a man, he got another lesson in prison where he learned how to become a ‘man’s man’. He elaborates: “*I came to prison 18 years old, scared, alone. Didn’t know what being in prison meant. I was thrown into a room with older career offenders, and I was a first-time offender. Just because I was going to stay for long [13 years] and not considering that I was new and vulnerable... I joined the gang to secure my own safety and avoid getting raped myself. I had to become the stereotype man - something which I was not). I had to become aggressive, because I was in that environment. Hurt instead of getting hurt*” (interview, 2012).

Wibooti’s journey from living a life of violence to becoming an anti-violence advocate will be elaborated throughout this thesis. His story exemplifies the point I want to illustrate about creating agents of change, which is why I choose to allow Wibooti to introduce each chapter. In addition, he exemplifies how

personal experience is an important resource to the OMC campaign, which provides accountability when the method is implemented and presented in media.

1.2 Addressing men to eliminate violence and HIV

According to UN Women, more women between 15-44 dies from rape and violence than from cancer, car accidents, war and malaria combined. Globally, up to 70 per cent of women experience violence in their lifetime. The percentage of women subjected to sexual violence by an intimate partner range from 6 per cent in Japan to 59 per cent in Ethiopia, according to a study in 11 countries done by UNiTE, (2009). This in turn has made women and girls the most vulnerable to HIV transmission, because they have less power over their own bodies and sexuality. According to UNiTE (2009), women who are beaten by their partners are 48 per cent more likely to be living with HIV and AIDS¹.

In 1993 the World Bank recognized the importance of investing in health. This sparked a debate that prevails. The WHO Commission on Social Determinants of Health (2007) acknowledged the structural changes needed to enable everyone the right to health. The relation between gender-based violence (GBV) and HIV has for long been known as crucial (see for example Jewkes, 2010). Both physical and psychological violence against women (VAW)² deprive women of the means of protection from HIV. Violence is one of the elements that sustains

¹ Human Immunodeficiency Virus (HIV) attacks the body's defense system and can lead to the fatal Acquired Immune Deficiency Syndrome (AIDS), unless treated with anti-retroviral treatment (ARVs) (Barnett: 2002). HIV is not a robust virus and it is hard to transmit. The modes of transmission, in order of importance, are: "unsafe sex, transmission from infected mother to child, use of infected blood or blood products, intravenous drug use with contaminated needles, and other transmission involving blood; for example, bleeding wounds" (Barnett: 2002: 38). ARV treatment can keep the amount of HIV virus in the patient at low level and allow him/her to live healthy, but there is still no treatment available to terminate HIV from the body (Barnett: 2002).

² Violence against women (VAW) is defined as; "any act of gender-based violence that results in, or is likely to result in, physical, sexual or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life" (WHO, 2010A: 7) "There are many forms of GBV. Some of these include sexual, physical, or emotional abuse by an intimate partner; physical or sexual abuse by family members or others; sexual harassment and abuse by authority figures and trafficking for forced labor or sex. Systematic sexual abuse in conflict situations is another form of GBV" (WHO, 2010A: 7).

and perpetuates an unequal society (One in Nine, 2012). Three types of violence against women have been recognized: social, economic and political (Momsen, 2004). Violence comes in many forms and differing extent. However, it remains true that VAW “is perhaps the largest violation of human rights humanity knows. Violence against women destroys lives, creates conflicts in local communities and obstructs development” as stated by Gro Lindstad (2012: 2), Executive Director of the Forum for Women and Development (FOKUS).

In this thesis I argue that it is time to move beyond the victimization of women and start politicizing masculinities in order to address the root causes of gender inequality, GBV and HIV. It is important to remember that gender issues are relational, that vulnerability is contextual and that even in difficult or poor circumstances people have opportunities to choose change. My focus will be on the agency of men in choosing change strategies.

In order to learn about the connections between gender, GBV and HIV, I spent two months with Sonke Gender Justice Network in South Africa. The aim was to learn why Sonke is pioneering to engage men and how this helps to fight GBV and HIV. What turned out to be my greatest lesson is that despite all the complexities and challenges with changing gender norms and eradicating GBV in South Africa, there are men and women who spend all their waking hours offering alternatives and providing good examples for change.

Because of this, I will make space in this thesis for personal stories of the activists I have met - of people who live and work with the realities on the ground, those who dare to dream and be guided by their vision of gender justice and a South Africa free from violence and HIV. I believe that there are many answers to be found in their testimonies, which might not be revealed in the quantified data that tend to guide policy makers. The question of how and why to work with masculinities and include men in addressing GBV and HIV can best be understood from listening to the individuals who drive this emerging movement.

1.3 Objectives

This thesis focuses on men, in a search for the underlying dynamics that drive the epidemics of HIV and GBV, and a search for how to create change agents. My aim is to present a ‘bottom-up’ understanding of the context in Cape Town’s townships and to show how individual agency both is affected by, as well as influenced by, broader political structures. This thesis explores how Sonke, through contextualizing men’s role in the fight against GBV and HIV, politicizes the otherwise depoliticized discourse on masculinities. This is not a full review of OMC or Sonke’s work, but an analysis on what can be learned from Sonke in order to understand how politicizing masculinities may be approached. They do this by utilizing principles of ‘agency’ instead of ‘empowerment’ and creating policies on social justice, gender justice and involvement of men. Stories from my informants will reveal how ‘One Man Can’ works with gender justice within the complex context of their lives and thus make themselves a tool for the endeavor of ending violence and HIV. They refuse to be ‘victimized’ as men trapped in poverty unable to meet the expectations of being the family provider.

I want to discuss the concept of politicizing masculinities because men’s violence against women is larger than individual men's issues, rather it stems from how we organize our societies. However, we should still hold those responsible accountable for the violence they exercise. Therefore I will debate how to move from individualization to politicization of masculinities, through holding individuals accountable and at the same time initiate systemic change. Even though the contexts differ across the world, the main principles of violence and power inequity remain the same across the world and so may the solutions.

The main research question in this thesis is: *What can be learned from Sonke Gender Justice Network in South Africa and the method they have developed for changing masculinities in order to achieve gender justice, prevent gender-based violence and prevent HIV?* To facilitate this study, I have the following set of supplementary questions:

- 1. How can men and boys find inspiration and motivation to address GBV and HIV? Similarly, how can women and girls find inspiration to work with men?*
- 2. How does transformation of masculinity through behavior change among men supplement the promotion of women's rights in the fight for gender justice?*

1.4 Thesis outline

This thesis will explore Wibooti's personal trajectory and within the context of his life, present a theoretical framework for politicizing masculinity and argue that Sonke's 'spectrum of change' contribute to the discourse with an example of how to politicize masculinities in practice. I will present a critical view of the persisting NGO conceptualization concerned with GBV and HIV in order to explain how individualizing responsibility of GBV and HIV is depoliticizing. Through presenting Sonke's model, I will suggest that politicizing masculinities lead to a different perspective and a more efficient method. Stories from peer educators will serve as examples before I conclude.

Chapter 2 provides a background on the context in South Africa, especially regarding social inequality, gender, violence and HIV, as well as the vision and origin of the organization Sonke Gender Justice Network. The method I used in the collection of material and interviews for this thesis is presented in chapter 3. I will discuss the methodological decisions I made to get the empirical knowledge this thesis is based on, as well as my reasoning behind them, and the challenges I faced. Chapter 4 presents the theoretical framework used in the thesis on how to link gender, GBV and HIV. My aim is to situate GBV and HIV in the theory of politicizing masculinities.

Chapter 5 explores health policy or NGO programs and argues that individualizing the responsibility for GBV and HIV transmission will not lead to sustainable transformation. On the contrary, it prevents the individuals from understanding their communities and how to promote structural changes. The OMC method and activities will be presented further in Chapter 6, which

explores how Sonke uses experiences of community members and encourages them to become peer educators and human resources in the movement for gender justice. This chapter also describes Sonkes' organizational structure, the Sonke Spectrum of Change, and the One Man Can awareness campaign.

The main part of this thesis is chapter 7, in which my informants from Cape Town share their experiences of being agents of change within the Sonke OMC campaign. They also share personal experiences with gender and violence, as well as their personal motivation for taking part in an effort to address men and be agents of change. This chapter constitutes my main discussion, as I reflect upon how these stories can be understood within the theory of politicizing masculinities.

Chapter 8 concludes on how men and boys find inspiration and motivation to address GBV and HIV, and how transformation of masculinity through behavior change among men supplement the promotion of women's rights in the fight for gender justice. I will sum up what can be learnt from Sonke and the OMC campaign. Furthermore, I will reflect upon how Sonke manages to counter existing gender roles and power inequity, and balance both the work with the communities and civil society at large. I will explain how the grass-root is motivated by Sonke to join their gender justice movement because they are invited to share lived experience. Last but not least, I will explain how this can be described as politicizing masculinities.

2. Situating HIV and GBV in South Africa

2.1 South Africa

Wibooti grew up in the Cape Flats (Valhalla Park) with dreams of becoming successful. Instead he got involved in a life of crime. He proclaims: “*Failing to consider the consequences, but only the need to be accepted as cool and part of something greater than my minute life*” (interview, 2012). Wibooti longed to belong and to prove himself: “*My father would tell me that I would amount to nothing, every single day*”. In one of the most dangerous townships in South Africa, his nearest option (to prove his father wrong) was joining the gangs and becoming a violent man.

In 2000 he was arrested and sentenced to a 23 years prison term on charges of robbery, kidnapping and extortion. He served 13 years of his initial sentence: “*Luckily, I had amazing support from Sonke and from my family. Most offenders don’t have that luxury,*” Wibooti boasts (interview, 2012). He understands that the reason for this support was the type of crime he had done and the fact that the crime committed was toward white people:

While in prison I was communicating to my family through phone and letters. I didn’t rape or murder. My crimes were not too violent. I did crimes against Europeans, and was not fighting my own people. For my family this validated their reasons for supporting me. They were more concerned about who I did crime against and not so much the actual crime. But they never justified the crime. My mom always said she didn’t raise me to do crime. (Wibooti, interview 2012)

This quote summarizes many aspects of the South African reality of racism, crime, inequality, poverty and the importance of the family. Wibooti’s family is a mix of black, white and colored, but he grew up in a colored community. He became engaged in crime with peers who were desperate for money despite the fact that he himself had what he needed. When left by his parents to live with his grandparents and experiencing inadequate sense of belonging brought him into

crime and violence, but then his grandparents also helped him out of it. South Africa is a country of major social challenges but nevertheless a population of survivors and change agents. I now turn to a description of the contextual background of South Africa and Sonke. In order to understand how the twin epidemics of GBV and HIV have developed within the historical, political and social environment in South Africa and to understand the vision of Sonke.

2.1.1 Race, class and inequality

South Africa is the most unequal society in the world according to United Nations Development Programs' (UNDP, 2013) calculations considering the Human Development Index and the Gini-coefficient (see figure 1). This can largely be explained by its exploitative history. The political system and the economy were based on racial discrimination, which after 1948 was institutionalized and legalized as Apartheid (Barnett, 2002). Despite the end of Apartheid in 1994, black African household income fell 19 per cent in the latest half of the 1990s, while white household income rose 15 per cent. Across the racial divide, the poorest half of the South Africans in 2000 earned just 9.7 per cent of national income (down from 11.4 per cent) and the richest 20 per cent earned 65 per cent of all income (Bond, 2004). Unemployment has risen since the late 1980s, but increased sharply after 1994 when South Africa joined the World Trade Organization (WTO) and import tariffs ceased. A million jobs, mostly unskilled, were lost between 1993 and 1997, while 60,000 skilled jobs were gained. About 35 per cent of the labor force lacks formal employment and a far larger proportion lacks the skills to participate in export industries (Barnett, 2002).

These facts illustrate how neo-liberalization in post-Apartheid South Africa introduced a shift in racial divides, rather than ending racism. Race has through what Goldberg (2009) calls *racial neo-liberalization*, remained a determining factor in new social divisions. The difference is that racism is no longer legally institutionalized. Widespread discrimination today happens despite the new

Constitution of 1994, exemplary in protecting individuals and minorities, and the national healing process lead by the Truth and Reconciliation Commission (Goldberg, 2009). The ending of Apartheid and election of the new government did not result in any immediate redistribution of resources. Still, the white minority lives in affluent conditions while most of the black majority continues to live in the overcrowded areas they were moved to during Apartheid (Barnett, 2002). I realize that Barnett wrote this ten years ago, but as Figure 1 shows; unfortunately little has changed in terms of inequality in South Africa.

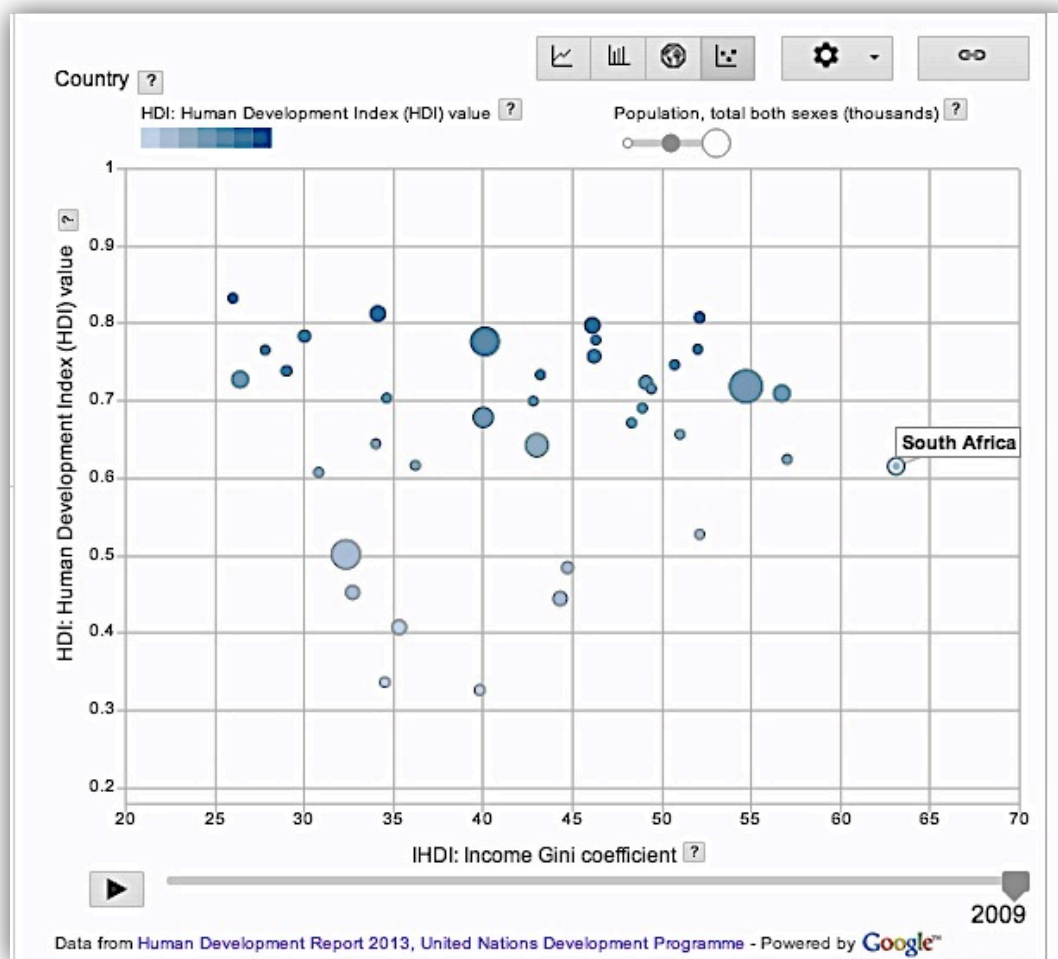


Figure 1: On a Human Development Index (HDI) South Africa scores over the average of developing countries, especially compared to other African countries. South Africa in 2009 had HDI 0,62 (the value of 0 indicate the least developed and 1 the most developed). Considering the Gini-coefficient, which indicates degree of equality on the other hand (the value of 0 being perfect equality and 100 perfect inequality), South Africa is the worst of all countries, with the Gini 63,1 (UNDP, 2013).

Though relatively more South Africans are wealthier and more become part of the middle class, the gap between wealthy and poor has exploded. ANC affirmative-action programs created jobs for the upper rank of black ‘insiders’, but had little effect on black ‘outsiders’ in the lowest earning 60 per cent (Good, 2002:). Redistributive policy of Black Economic Empowerment (BEE) was implemented with the aim to empower the black population. However, instead of giving everyone equal opportunities, BEE has benefited the black middle class and increased the wealth of those who already had some. ANC’s rule was justified through its fight against racism (ironically) and was closely interlinked with its promotion of black capitalism. Black business and government acted as partners. Emphasis has been on the acquisition of existing companies, not on the creation of new ones and the result has been dramatic worsening of inequality. Hence, the poor in general were the biggest losers in the BEE redistribution (Good, 2002).

Consequently, almost twenty years after Apartheid, race and class still inform social divisions and influence people’s identity. As this study will show, the social and economic gaps in the population make it challenging to achieve gender equality. Race, class and gender make up three dividing forces that are interlinked and together hinder equality for the South African population. Therefore, the debate on politicizing masculinities in South Africa is about understanding the complexity of the society. A study or program on masculinity might turn out different depending on whether it focuses on rich or poor, the black, white or colored part of the population. In this thesis the focus will be on the black and colored population in Townships outside Cape Town.

2.1.2 Historical legacy and HIV and AIDS

Globally, 34 million people were presumed to be living with HIV at the end of 2011. Sub-Saharan Africa remains most severely affected, with nearly 1 in every 20 adults (4.9 per cent) living with HIV and accounting for 69 per cent of the people living with HIV worldwide. South Africa has the largest number of people infected in any country, 5.6 million people (UNAIDS, 2012). The national prevalence increased steadily up to 1998 when it appeared to level off briefly. The upward trend was resumed in 2000, when only three provinces (out of nine) had rates below 20 per cent (Barnett, 2002).

South Africa is the third wealthiest country on the continent (after Gabon and Botswana). However, to paraphrase Barnett: “It is evident that national wealth alone is not a defense against such epidemics” (2002: 120). On the contrary, the extreme inequality in South Africa has allowed economic growth and an HIV epidemic to prosper simultaneously. At the peak of the epidemic, the government, going against consensus scientific opinion, argued that HIV was not the cause of AIDS and that antiretroviral drugs (ARVs) were not useful for patients. “President Mbeki’s government restricted the use of freely donated nevirapine and obstructed the acquisition of Global Fund grants”, Chigwedere (2008:410) and colleagues argue. They estimate that more than 330 000 lives were lost because of this policy in the period 2000-2005 (Chigwedere, 2008). The AIDS policy was eventually changed following pressure from social movements that demanded access to treatment and care. Today, South Africa has the world’s largest ARV program (One in Nine, 2012). The present estimated HIV prevalence among adults (ages 15-49) in South Africa declined and is now 17,3 per cent (UNAIDS, 2012).

According to the latest official report (Republic of South Africa, 2012), drivers of the South African epidemic are intergenerational sex, multiple concurrent partners, low condom use, excessive use of alcohol, and low rates of Medical Male Circumcision (MMC). Another concern raised by the government is the

lack of male engagement in prevention of mother-to-child transmission (PMTCT). Important as this is, I take note of the fact that the Republic of South Africa focuses on the individual responsibilities in their report, without discussing the structural barriers many groups face because of inequality. Barnett argue that inequality, experienced through gender, class, race and the history of institutionalized racism and discrimination and overcrowded urban settlements: “has made South Africa fertile ground for the spread of HIV” (2002: 146). Social conditions have made certain groups in the population more at risk of HIV (Barnett, 2002). The HIV epidemic has been fuelled by migration, high crime rates, racial discrimination, and high levels of stigma against sexual minorities (LGBTI), people living with HIV and discrimination against women. Birn describes well the link between social development and HIV: “claiming the lives of millions, these diseases fall along the fault lines of poverty and discrimination, with social and economic dynamics fueling the AIDS pandemic more than any inherent characteristics of the virus” (2009: 301).

2.1.3 Violence and HIV and AIDS

Sadly, crime and gang violence are now endemic in South Africa. As a consequence, rape and gang rape have become a common way of transmitting HIV (Barnett, 2002). Between April 2010 and March 2011 over 66,000 cases of sexual crimes were officially recorded, but there is no doubt that the true figure is much higher. In a South African study, nearly half the women and girls between 14 and 24 reported that their first sexual encounter had involved force, coercion or trickery. Although one in three women are raped and one in four face physical violence from a domestic partner in South Africa, only one in nine assaults are estimated to get reported to police (One in Nine, 2012). More cases of rape are reported in hospitals than to the police, but the number of rapes reported is even more ominous than reports of violent assaults. According to the official estimate, only one in every 35 women who has been raped report the incidence (Republic of South Africa, 2012). The number of HIV infections transmitted during rape per annum has been estimated at 100-300. In an epidemic of about 400 000 new

infections, the number appears small, but it is assumed this is due to underreporting of rape. “At the individual level, a positive relationship has been identified between perpetration of violence and HIV infection”, according to the official progress report on AIDS (Republic of South Africa, 2012: 72).

In a report based on a workshops held with women living with HIV, the relationship between HIV and violence in South Africa is explained against the backdrop of unremitting violence and a feminized HIV epidemic (One in Nine Campaign: 2012). They argue: “In a society with more than two million reported cases of ‘serious crimes’, (...) it is safe to assume that women do not report most instances of physical violence, particularly within domestic settings, because this violence is ‘normalized’” (One in Nine, 2012: 3). More often than not, police officials themselves do not consider such violence to be ‘real’ violence. And some forms of sexual violence are socially constructed as acceptable because of the nature of the relationship within which they occur. Thus, a distinction is often made between ‘rape’ and coercion to have sex, with the latter characterizing the vast majority of sexual violence – those where the perpetrators are family members, husbands or boyfriends (One in Nine, 2012).

Importantly, though, HIV does not spread only because of violence. The point here is simply that GBV in South Africa exposes women to the risk of HIV, because it deprives them of their rights to make informed decisions about their own bodies. Had every South African routinely been tested and those who are HIV-positive been on treatment, recent research has established that transmission of HIV would most likely not take place. The treatment not only prolongs life for the patients, it also lowers the amount of HIV in the bloodstreams, thus making people 96 per cent less infectious (UNDP, 2010). However, providing access to treatment, care and support will not successfully reach out to the whole population if the masculine stereotype still persists and men don’t visit clinics, or if poverty and inequality continue to prevent people from having a successful treatment. Therefore *politicizing masculinity, GBV and HIV* in South Africa is

essential, in order to address structural barriers and create agency for everyone (men or women, rich or poor) to be in control of their own health.

2.1.4 Gender and HIV and AIDS

Gender³ relates to HIV and AIDS because the modes of transmission are closely linked with gender roles and social norms. Inequality between genders (men, women, transsexual, intersex) and sexual partners, inequality in access to sexual rights or decision-making are ways that HIV affects the different genders differently. But transmission from mother to child during pregnancy and birth is another example of how women are affected differently from men. In South Africa, women are automatically tested for HIV when they enter a maternity clinic, with the result that their status is exposed (in a society where HIV remains stigmatized). Women who test positively are often blamed regardless of how they got infected and many of them get exposed to violence or are abandoned by their husband or partner (Luzipho, interview 2012). Barnett suggests that such frequency of violence and sexual assaults, presented above, tells us something about the nature of gender relations in the South African communities (2002: 154).

The number of HIV-positive women is about one and a half times greater than the number of HIV-positive men in sub-Saharan Africa, supposedly home to 75 per cent of all HIV-positive women in the world. One in three women between the ages of 25-29 years in South Africa is HIV-positive. About 30 per cent of pregnant women who access public clinics are HIV-positive. Three fourths, of the number of HIV-positive people between the ages of 15-24 are women, and women are estimated to contract HIV five years earlier in their lives than men (One in Nine, 2012). Women, in particular young women, are among the key

³ Gender according to WHO (2010 A: 6); “is used to refer to ideas about characteristics of women and men that are socially constructed, while sex refers to anatomical and biological characteristics of people’s bodies: male, female or intersex (possessing both male and female traits). Gender includes social ideas about sexuality, including sexual behavior and sexual partners.” Pearson explains that; “‘gender’ rather than ‘sex’ is the key concept, indicating concern with the social interactions of women and men rather than their biological characteristics” (2000: 402).

affected populations for contracting HIV. This is related to the prevailing GBV, to women's socio-economic status and the biological fact that viruses easier transmit to the vagina.

South African men are typically resistant to know their HIV status, 'because a man should be healthy', and thus expose themselves and their partner to risk of infection (Luzipho, interview 2012). That is why this thesis focuses on men, in a search for the underlying dynamics that drive the epidemics of HIV and GBV, and a search for how to create change agents. Research with men and boys has shown how inequitable gender norms - social expectations of what men and boys should and should not do - influence how men interact with their partners, families and children on a wide range of issues. These issues include contraceptive use, physical violence, household tasks, parenting and health-seeking behavior. Research by WHO entitled *Engaging men and boys in changing gender-based inequity in health: Evidence from program interventions*, found that "well-designed programs with men and boys show compelling evidence of leading to change in behavior and attitudes" (2010 B: 4). This confirms the review done by WHO in 2007 that assessed the effectiveness of program interventions seeking to engage men and boys in achieving gender equality and equity in health. This thesis will discuss how men who have successfully completed such programs can be motivated further to work towards politicizing masculinity.

2.2 Sonke Gender Justice Network

Soon after turning 24 years and accumulating his four stars to become the Connell in the prison gang '28', Wibootei arrived at the turning point in his life:

It was in 2007 I turned around and started looking at life differently. Nobody had wanted to be in the same room with me. Due to my behavior, being so aggressive, I was moved to different prisons and I have been in seven different ones. I was totally rootless and aggressive, but I knew I was only pretending. I could give the law when someone needed to be punished, but I was lenient giving less punishment than what was expected. At times I had to act strong and give out severe punishment to prove a point, and not give myself away. Faces and images bother me sometimes, but I deal with it as it comes along. Reading books about psychology has helped me conceptualize this. I doubted if I could really change. OMC convinced me that I could accept change instead of fighting it, but it had to start with me. I had to change how I thought. You can change. Remember, as much as you are hurting someone, you are hurting yourself. Because the person you hurt also looks like you and feels the same way. I had to say to myself 'I am done with that'. (Wibooti, interview 2012)

Despite the long journey and the dramatic experience it must have been, Wibooti is thankful *"I'll say - thank you for the 13 years stay, otherwise I would not be in Sonke and they would not be ready for the prison project"* (interview, 2012). Sonke believed that it was people like Wibooti, who could create a change in masculinity and violent behavior. In the following I will elaborate on the rationale and impetus behind the organization.

2.2.1 Sonke's vision and mission

Sonke envisions: *"a world in which men, women and children can enjoy equitable, healthy and happy relationships that contributes to the development of just and democratic societies"* (Sonke, 2012: 6). Sonke is an Nguni word meaning 'all of us' or 'together' to symbolize the commitment to working in partnership with all who share the vision of gender equality, human rights and social justice. Their mission is to work across Africa to strengthen government, civil society and citizen capacity, while remaining a South African-based NGO. Sonke works from a human rights framework to support men and boys in taking action to promote gender equality, prevent domestic and sexual violence, and reduce the spread and impact of HIV (Sonke, 2012). Sonke's values are built on the belief that the work with men and boys must:

- *Promote the rights of women and girls and link with efforts to empower women and girls;*
- *Enhance the lives of boys and men and help them to see the benefits of transforming gender norms;*
- *Include and respond to diversities among men – such as sexual, ethnic and class differences;*
- *Explore ways to transform gender relations by engaging both women and men;*
- *Address structural and social determinants of gender inequality and, in so doing, promote social justice.*

(Sonke, 2012:7).

2.2.2 Origin and outreach

Sonke was established in 2006 and is still an organization in continuous development and growth. Today it works in all of South Africa's nine provinces and in fifteen countries across Southern, East, Central and West Africa, including global advocacy, to prevent domestic and sexual violence, reduce the spread and impact of HIV and AIDS and promote gender equality and human rights (Sonke, 2012). Already, Sonke is a known and well-established civil society organization in South Africa. Their work has been highlighted as an example of best practice by UN agencies including WHO, UNAIDS, UNDP, and women's rights organizations such as the International Women's Health Coalition and Action AID. Perhaps because Sonke, rather than searching for single solutions to reach its vision, attempts to create holistic change in gender relations at all levels of society through; community education and mobilization; media advocacy and communication for social change; legal and policy advocacy; alliance building; and capacity building and training for government and UN agencies (Sonke, 2012).

Sonke employs nearly 70 staff out of offices in Cape Town, Johannesburg, Bushbuckridge and Gugulethu. And operates with an annual budget of about

ZAR 30 million or US\$ 4 million. They use a broad range of social change strategies to achieve the organization's goals. Sonke reaches nearly 25,000 men each year through workshops and community dialogues. Additionally, they reach nearly ten million listeners a week via community radio shows and millions more as a result of media coverage of high profile advocacy work to effect change in government policies and practice (Sonke, 2012). In the next chapter, on method, I will explain why I chose to visit South Africa and Sonke Gender Justice Network as the empirical base to this thesis.

3. Method

Wibooti participated in the OMC prison-project from its beginning in 2006: *“It opened my eyes, made me reflect a lot and made me change. In prison you have much more time to think and to change than outside”* (interview, 2012).

Therefore, Wibooti argues that follow-up activities with those transitioning back into society after a prison sentence make a difference: *“The ex-prisoner support group will become very important. Ex-prisoners can make a change and inspire others. Because of their backgrounds and encounter with violence, and because of the particular situation in prison where you can spend more time reflecting on the workshops”* (interview, 2012).

In this chapter I will discuss how I interacted with my informants in Cape Town, and how I have compiled all information and research used for this thesis.

Mainly, my method evolved around joining Sonke staff and volunteers in their daily activities and learning about their work, listening and observing. Sonke gave me a desk in their office and allowed me to take part in their work environment. People like Wibooti gladly explained what they were doing. In addition to arranging to meet for approximately a one hour long formal interview (as with most informants), many of them let me join activities or approached me when they had new reflections in mind.

3.1 Choice of field

There were two main reasons that made me choose South Africa and Sonke as my field of study. For one, South Africa is as explained above a country stricken by a serious HIV epidemic, normalization of violence and remaining social inequalities despite the fact that South Africa has one of the worlds’ most egalitarian constitutions. Therefore, the country offers an opportunity to study masculinity and gender in an environment that is interestingly full of contradictions, and where HIV and violence is more openly spoken about. South

Africa is not unique as a country with gender inequality and a high prevalence of gender based violence, but it is unique for its transition from racial segregation. Cape Town is particularly interesting with respect to this historical transition, with the whole city and the residential areas still being racially divided. Sonke is only one of many organizations in South Africa that addresses the issues of gender, HIV and violence, but it is quite unique for its holistic approach to these topics and for the focus on masculinities and engaging men.

Secondly, I chose Sonke because I had already had the privilege to meet with the executive director Dean Peacock. The recommendations I got from colleagues and the vast number of publications written by and about the organization gave the impression of a serious actor within the field and a successful organization in growth. The combination of an opportunity to meet with an organization that works comprehensively with gender justice, HIV and violence and study the context in a country where politicizing masculinities is so relevant and applicable made the decision easier.

In Brazil, Instituto Promundo runs similar programs as Sonke (the two organizations have had a close partnership from the beginning). However, going to Brazil would offer me much bigger challenges with language, as I don't speak Portuguese. In addition, the context is very different with regards to the prevalence of HIV and GBV in Brazil, so the project would have to be framed quite differently. I had previously made myself familiar with the South African context and historical background, through an exchange semester in Durban and through meeting with SAIHs' (Norwegian Students' and Academics' Assistance Fund) partner organizations in South Africa. Lastly, the situation with HIV is much more severe in South Africa and the link between masculinity, violence and the spread of HIV intrigued me when I chose my topic.

3.2 Data selection

This is an interdisciplinary⁴ study, the method and analysis is built on my background in social sciences, namely the interdisciplinary field of development studies. I chose to use a qualitative⁵ approach and combined literature review with interviews and observation of Sonkes' work. A quantitative⁶ method would not allow me the insight to personal reflections and a broader understanding of the Sonke method. I did 27 semi-structured, qualitative interviews with employees in the Sonke office, volunteers and one other researcher.

All my informants were asked about their motivation to work for Sonke and I tried to encourage them to talk about their personal experiences, with gender norms, violence or HIV. Sometimes I was told stories about people they had met through working in Sonke or situations they had witnessed, but more often they told me their personal stories and how it had inspired them to strive for gender justice. Because I wanted my informants to share personal stories and reflections, I did not use a recorder. Instead, I made notes during the interviews and transcribed as soon as possible thereafter. Whenever I had the chance, I typed the notes directly on my laptop, but out in the field I used a notebook and then wrote onto the computer. I spoke twice with several informants, because I had some informal interaction with them before the actual interview. I chose not to stick to a strict interview guide because I got much better response by letting my

⁴ Interdisciplinary research, according to Robinson (1996:89), should be evaluated by three criteria; "1) the degree to which the research contributes directly to addressing real social and political problems, 2) the degree to which the research contributes to the development of theory about the interaction of human and natural systems, and 3) the degree to which the research is self-conscious about general epistemological critiques of disciplinarity".

⁵ Qualitative method: may limit the number of informants to for example 20, and the intention is to reveal descriptions, to get more details and nuanced information. Qualitative method is used especially for studying new phenomenon that has not been thoroughly researched before (Johannessen et.al. 2006, my own translation).

⁶ Quantitative method: focuses on counting the prevalence of a phenomenon. Many quantitative approaches obtain procedures from natural sciences, but are also adjusted to studying human phenomenon (Johannessen et.al. 2006, my own translation).

informants tell their story, and ask the way it fit the conversation or the situation. Also, I didn't want not appear to be coming from the north and 'know better'.

I did semi-structured interviews⁷ with open-ended questions⁸ and asked everyone:

- 1) *What they were working on in Sonke*
- 2) *Sonke's motivation for focusing on men and gender justice*
- 3) *Challenges of violence, gender equality and inequality in South Africa*
- 4) *What had inspired them to take part in this work*

I asked the same questions in essence, but never with exactly the same wording. My aim was to create conversations around the questions. My informants spoke freely and from the interviews I learned what the different staff members and volunteers in Sonke emphasize in the OMC campaign. The way I listened was a bit subjective (as it usually is) and was probably colored by my own experiences, both personally and from the culture I grew up in, and what I had learned so far about the subject I studied. I am personally interested in understanding what motivates people to be agents of change, because it inspires me that people can be activists, have faith in and live to fight a cause like this. I believe the OMC change agents inspire change in everyone they meet along their way, in life and in their Sonke career.

Some quotes and details from my informants got lost because they began to convey interesting reflections when a situation occurred during an event or a conversation in the hallways at Sonke. In those instances, I sat down as fast as I could and noted all I could remember. I probably did not remember everything, but the alternative would be not to get the information and have the opportunity

⁷ Semi-structured interviews; "have an general interview guide as the foundation for each interview, while the exact questions, themes and the order of the questions may vary" according to Johannessen et.al. (2006: 137, my own translation)

⁸ Open-ended questions (for example, 'what is your view on?'), are according to Scheyvens and Storey (2003: 41) "designed to elicit data on opinions and behavior as much as they are to get hard facts".

to follow up in interviews. Some details are also missing because I did not have a recorder, but if I had used one it could act as a deterrent to share personal reflections. I got most of the relevant information in situations where the informants were comfortable with the conversation. Also, I believe I asked more follow up questions, when I could not rely on a recorder. Therefore, I was less likely to misunderstand words or information afterwards.

3.2.1 Confidentiality

All of my informants signed a consent form with information about the intention behind the research project and how the information they shared would be used. I gave the option to remain anonymous or read through transcribed quotes. No one was forced to talk about personal experience. Because Sonke wanted to see the thesis and perhaps use it afterwards, I understood that some were concerned their story would be recognized but this was not an issue for the majority as most were very open with their colleagues. This is also why I decided to actually ask staff members about their personal background. The atmosphere at Sonke was very open and they shared reflections around many issues on the weekly Monday morning meeting. I made sure to get to know people and talk a bit before I made the consent form and got signatures. Partly because I was in the process of figuring out who to interview and how to do the interviews and partly so that I was sure they knew what they signed on to.

3.2.2 Observation and interaction

I spent time getting to know people, dynamics, balance of power, activities and the language used in Sonke. I tried to pick up what they emphasize in their work. Much of this can be found on paper, but it was interesting and important to me to understand what the volunteers and staff chose to explain and what they emphasized. In the beginning, I wanted to understand South Africa and violence, but I became more curious about the organization and also realized the need to narrow my focus. I got most intrigued by the Gugulethu clinic (Gugulethu Men's Wellness Centre) and the Prison Project, and therefore decided to focus on the

One Man Can campaign. Before I started the actual interviews, I kept my eyes open for opportunities to start conversation with staff and volunteers at the office and in the field. This way I got to know them, I decided who I wanted to talk more to, and I managed to build up confidence. I asked to join activities and get interviews by explaining that I was trying to understand the work they are doing and how Sonke manages to create agents of change.

During my stay, I attempted to reflect critically on the various people's roles in the organization. I could see Sonke as a professional organization, while at the same time a young organization in development. They work on many different issues and some people have divergent ideas about which directions this development should take. I found that I had an advantage from having organizational experience, although I tried to think as a researcher during my time at Sonke. For example, I found it easier to get an understanding of the organizational structure and how I should ask around for what I needed. Even though the person in charge told me he would find out where to place me, I was able to take initiative myself instead of waiting as he was quite busy. I also observed that the work is driven both by donors' requirements on reporting and the needs in the communities. This meant that the staff working on the implementing side and the staff who was developing programs and strategies for Sonke often had different priorities. However, as I observed there was openness and willingness from both sides to discuss these issues and for example the weekly Monday meeting for all staff was a place for thoughts to be shared.

I noticed the difference between participants in workshops and clients at the clinic versus the employees from Sonke, even the volunteers from Sonkes' Community Action Teams (CAT). Those who work within Sonke have knowledge and are empowered and motivated to create change. Compared to the clients in the clinic and the CAT members, they appear more confident and they also have a little more money to spend because they have jobs. I became very wary of the difference between my informants and I in terms of education, cultural background and income. On the other hand I tried to balance out, by

joining them for lunch sometimes and contributing with buying some extra food, or by talking about how I have faced similar challenges in organizational work back home as they did. With most of my informants I managed to find a good tone and mutual understanding.

I could recognize that some of the informants seemed to put a lot of effort and energy into their work, some seemed tired, but they were still motivated for the cause. I could recognize the challenges in that advocacy work is tiring and became deeply impressed.

3.2.3 Existing literature and limiting the scope

While I was in Cape Town, I focused my literature search on the One Man Can campaign, but I also had a fairly broad approach to understand the organization. Much material is available online on Sonkes' webpage and in addition I was given access to print material in the office. I did interviews with employees in all units, and I asked them for further literature on the main theme their unit worked on. In addition, I noted titles and authors of books and other existing literature they had available on the premises, for the Sonke staff to use. This was part of my investigation while I was in Cape Town, in order to get a good overview and understanding of how Sonke works. I focused on the OMC campaign. The existing literature was important in the writing process, because it shaped my background information and theoretical framework. During the fieldwork, however, I tried to remain focused on the testimonies of Sonke staff and volunteers to understand where their dedication to working with men is coming from and what they want to achieve. My aim was to write about the change agents and I would not be able to analyze the entire organization and go through all the literature in two months. All in all I have been able to access the literature I needed and searched for.

3.3 Challenges

3.3.1 Time

Because I had to attend classes during the fall semester and return to Norway by New Year for an exam early in January, I was able to spend only two months in Cape Town. I chose to conduct as many interviews and observation opportunities as possible in that time, and did the analysis of the field visit as well as literature review when I got back to Oslo. Had it been possible, for example three months in Cape Town would allow me to attend more activities and to do follow up interviews with my main informants. I was able to collect quite a lot of information, but not to double check much of what I was told, for example, whether participants on workshops had the same impression as the Sonke staff or to observe changes over time in a program.

During the time I spent with Sonke a lot of activities were happening around the 16 Days of Activism⁹ and the office closed the week before Christmas, which I had not taken into account. This meant that they all were quite busy and there were less regular activities. Following the 16 Days of Activism was interesting, but some of my interviews had to wait until it was over and some were in the end cancelled. I ended up with seven weeks with the Sonke staff, and the eighth week working through my material, because most of my informants went on holiday.

Even though time was limited, I invested a couple of weeks to get to know people, learn who were in which positions and build up some trust and understanding for my intentions with being there. This helped me understand who were involved with the OMC as well as who had been part of the program themselves. And exactly because I didn't have that much time, I needed to make

⁹ According to UNWOMEN (2013), the 16 Days of Activism Against Gender Violence start on the International Day for the Elimination of Violence against Women, November 25th, and end on the International Human Rights Day, December 10th, in order to emphasize that violence against women is a violation of human rights.

some priorities as to which persons I really needed to interview. Also, it was good to have a little basic information and to have a friendly atmosphere before I invited people to one hour long interviews where I wanted them to share personal stories and reflections. My impression is that the strategy worked well, because I got better interviews with those I had spent some time with in the field, than from those I hadn't had that much time to talk to beforehand.

Because the 16 Days of Activism started in the middle of my stay when I had done my mapping of potential informants, I had to be very proactive in order to schedule both interviews and to participate in activities. In addition to the formal interviews, some conversations happened spontaneously in between activities. Sometimes I noted these quotes because I wanted to follow up in an upcoming interview, other times I found that they completed some of the information I had already been given. If I had more time, I would have liked to do proper follow up interviews and ask for elaboration on such statements. Another initial idea that was dropped due to lack of time, was to interview more external informants, such as organizations that Sonke cooperates with. I ended up being busy enough following up on the activities and schedule interviews within Sonke and decided not to break away from being in that loop. The only external interview that I did was with Christopher Colvin, who has done a previous study of Sonke.

This project would have benefitted longer time period, better planning, with more researchers involved and with more informants. However, I have tried to make the most of the resources I had available. More rigorous research would also cost more and this was done as part of a study program. I regretted that I had not prepared more in advance. At the same time my experience with balancing a lot of work in intensive periods and the fact that I am engaged in the field of global health through activism, gave the advantage that I quickly understood Sonke's work and also quickly got their respect. So, even though my own engagements and busy calendar stressed me a bit because I wanted to be rigorous as a researcher, it also opened many doors.

3.3.2 Language

South Africa has eleven official languages. I did my research in English and sometimes had to ask questions again because the different dialects of English were not always easy to understand. I had to make sure I got the points correctly. The activities and workshops I attended were usually conducted in a mix of Xhosa and English. Since I didn't have an interpreter assigned to work with me, I had to ask different people to translate for me. For the purpose of my research I did not find it essential to understand every word of what was said in workshops. So, instead I tried to talk to the Sonke staff and volunteers about how they thought the events went and about the essence of what they had achieved and learned from the intervention. I also made sure to be briefed in advance, on what was going to happen. It was interesting to participate in events or to visit the Gugulethu clinic despite this language barrier, because I got an insight in how many participants showed up, how they interacted with each other and the people from Sonke and how they reacted to discussing themes such as gender equality, HIV and violence. Since most South Africans speak some English, I was also able to approach some participants and ask about their experience with Sonke activities.

3.3.3 Achieving trust

I made a point of talking to people one by one to get personal stories. Therefore, much of the information I got was based on the confidence the informants had with me. The best information sometimes came from informal discussions outside the formal interviews, while others naturally talked about anything in the interview. Therefore I made sure to let everyone know what I was planning to do with the information they gave me. I asked permission to refer to their personal experience in my thesis, and in the instances I wanted to use something they had told me before or after the interview I let them know. In addition, they were aware that I observed activities and took note of what was said in workshops. I intentionally tried to build confidence by being interested, serious and open to

share some of my own experiences. On the other hand I showed confidence in their expertise in the context they grew up in, work and live in. My impression was that my informants achieved trust in me for the role I had as a researcher. Otherwise I would perhaps not be able to have the same type of conversations with them as a white girl from Europe. However, it might also be that their answers could have been phrased a little different had I been a white boy. It is difficult to know for sure. All I could do to get as correct and honest answers as possible was to act professionally and emphasize that I was there to listen (not to impose my own experiences and values).

3.4 Could have done different

3.4.1 Stay longer and at a less hectic time of the year

The purpose of this thesis is to understand sustainable development issues and to understand the challenge and structures behind them. I am aware that I was not able to go in-depth in my research question, either through qualitative or quantitative data. Had I been an anthropologist, I would have stayed longer, perhaps lived in Gugulethu Township, spent more time at the Gugulethu clinic (including speak to the clients), visited more prisons, and spent time with different units a few weeks each.

3.4.2 Determined more in advance of the field visit

Before travelling to Cape Town, I had decided on the main research question, but not whether I would focus on the OMC campaign or other areas of Sonkes' work (such as policy work or partnerships with other actors). Sonke is a large organization and I did not have much time. So, I decided to travel there first and then determine my focus area in part depending on who I was able to get time with, what activities were possible to attend during the period I was there, and sketch my plan based on this.

3.4.3 Reach out to more volunteers

My plans to join to different Township marches as part of the 16 Days of Activism got cancelled (one due to the weather and one because my transport was delayed). It was a pity, because I had planned to use the opportunity to meet more volunteers outside the office. On the other hand, the 16 Days of Activism is not hosted by Sonke, they only took part in it. So it was not essential to participate in order to understand Sonke. At least I was able to join three events at the Gugulethu clinic, one on traditional circumcision, the second on violence against women and lesbians and the third on fatherhood. At these events I was able to both observe and speak to some volunteers and participants.

3.4.4 Diversity of informants

I could have made sure to get interviews from other sources, to back up interviews from Sonke informants. The advantage of mainly looking for internal sources to information within Sonke and to always be present at their premises was that I could easily follow up and add new questions. I note that the method for this study is very qualitative and it has been difficult to verify all information interviewees gave me. I am aware that they have their subjective perceptions of and experiences with Sonke. However, they provided an overview of the driving forces behind the organization, because they are the individuals who run the activities. My interest has been to understand the individuals' backgrounds and their ownership to the organization.

3.5 Personal reflections

Throughout the process of working on this project I also challenged myself and learned quite a bit in my own life, in addition to following the personal journeys of my informants. This was not unexpected. For one, I believe a Master thesis should be a process of personal development. But secondly, I chose my topic with the interest to learn from South African experiences and compare them with

my own. I realize that the personal journey this thesis has been for me became part of my method, my understanding and my way of reflecting.

My personal background influenced the way I did my interviews, because I sometimes allowed to share my own views. The interviews were as mentioned open ended and parts of them became discussions. I wanted to create a safe space and encourage as much openness as possible. I find my personal journey relevant because it forms a basis for my understanding of the informants. I can relate to wanting to create change but to feel paralyzed at the same time. Emotions and logical reflections do not always agree and it can make us feel vulnerable. I believe the solution is to find alternative approaches and agency to act on them. So, I sympathize with Sonke's method and have allowed myself to be inspired.

Personally, I need alternatives to change my way of living and sometimes alternative expectations from society. I was the first in Norway to be diagnosed with Melnic-Needles Syndrom, and therefore have the experience of having to explore how that fits into the perception of what is 'normal'. I believe *vulnerability* is to remain in a situation that is 'expected', where you actually do not have the capacity to give from your best ability. While *agency* is admitting weaknesses, asking for help, talking about the root causes of our issues, daring to be different and to try new ways of moving forward. Pointing to problems is not the same as claiming to be vulnerable and to ask for sympathy, but an initiative to develop agency for change.

The fieldwork reminded me of where I came from and how I became interested in this topic. Lack of concentration for periods after the fieldwork, and delay because I allowed myself some breaks, meant that I ended up writing the case study and discussion months after my fieldwork. This is a challenge because I used a qualitative and participative method. I might have remembered or interpreted some points differently than I would earlier in the process. However, I hope and believe that my notes were good enough to capture the essence and some interesting quotes, and they have supplemented with literature.

I now turn to my theoretical framework and the concept of politicizing masculinities. As showed above, the Republic of South Africa emphasized risky behavior in their report on HIV. Although individual responsibilities is crucial, I will argue that it is important to contextualize the situations people are in and the cultural and political barriers they meet that might lead to risk-taking. Secondly one must create opportunities for men to become change agents rather than ‘risk-takers’, through mobilizing a movement that reflects their own experiences. From my perspective this is what Sonke works to achieve, and therefore I chose to analyze their work within the framework of politicizing masculinities.

4. Theoretical framework

When I grew up my father was not around. He was working. When I got his attention it was either because I made him proud, then he would just recognize that. Or when I made him angry, then he would show me, shake me and talk to me. That was how I felt bonding with my father, how we spent time together. So, I later felt that was the way to make someone listen and to be close to them. (Wibooti, interview 2012)

This is how Wibooti conveys that he learned to connect with loved ones in a violent way. And the lesson continued as he joined the gang environment: “Gangs do not have any respect for women. When men need to show their strength and domain, they would sometimes be requested to rape women in order to prove their power over them” (interview, 2012). Before encountering the OMC program, this characterized Wibootis behavior as the man in relationships with women, he explains:

Before prison I thought women should be submissive and I thought it was right to use violence, to shake someone to get them to listen to me. Not only did I think it was right, but I have dated girls who expected me to hit them. They think that it is a sign of a man loving them. Because their mothers comforted them by saying their dads were violent because he loved their moms. (Wibooti, interview 2012)

Wibooti describes the use of violence against women as an act of showing that he is the man, that he loves them and that they are submissive to him. This is clearly related to social gender roles, where men are expected to take the lead. Whether you are the man or the women in a relationship where there is risk of HIV transmission (a risk which is high in South Africa as explained above), the dynamic will determine your power to decide over existing protective measures.

4.1 Linking gender, GBV and HIV

Ruth Pearson (2000) examines how gender analysis historically has become widely accepted as part of development thinking and practice. In the search for

theoretical and political analysis of gender and development (including HIV and GBV), distinction has been made between women's practical gender interests; needs of women within their gendered roles, and strategic gender interests; interest in changing structures or practices of gender subordination and discrimination. In the 1970s there was a successful attempt to integrate focus on women into development policies, through the Women in Development 'WID' approach. But in the 1980s the WID approach was criticized for dealing only with women's practical gender needs, which lead to a shift from WID to the Gender and Development 'GAD' approach. GAD focused on gender relations and treated policy interventions as requiring a gender analysis in order to assess their likely impact. Lastly, came the 'mainstreaming' of gender in development policies, which tended to mean anti-poverty strategies and a focus on poor women (Pearson, 2000: 402). Pearson calls for a need for a broader, critical (GAD) approach addressing strategic gender interests and analyzing the causes of gender inequality. However, she argues "this should not be seen as a polarized debate since both approaches are needed. Also it is crucial to include the roles of men as well as of women both in any analysis and in any proposed solutions", concludes Pearson (2000: 402).

Jerker Edström (2011) calls for changes in gender roles to be debated seriously. Perhaps the literature has been too descriptive of gender as it is and not able to reflect the alternatives. Edström writes: "The fact that that gender is relational – to other gendered identities as well as contexts – was not being taken seriously either in gender work on women's rights or in much of the masculinities literature" (2011: 73). We should not simplify the impact of gender roles he argues, although there are such tendencies in society. For example, men commit far more acts of violence than women, and in some contexts, such as parts of South Africa, there has been a worrying institutionalization of sexual violence against women. But many men are not violent and victims of violence are also men (Edström, 2011).

Violence against women has been on the global political agenda the past twenty years. Following the focus on VAW at the Vienna Conference on Human Rights in 1993, the United Nations Commission on Human Rights appointed a special rapporteur on VAW. This preparatory work led to the Beijing Platform of Action (BPFA) in 1995, which identifies VAW as one of the 12 critical areas of concern, declaring it ‘an obstacle to the achievement of equality, development, and peace’. It was only in 2000 that the role of men in addressing VAW started to shape debates and the agendas of WHO or NGOs. However, already in 1995 the BPFA adopted at the Fourth World Conference on Women read: “The advancement of women and the achievement of equality between women and men are a matter of human rights and a condition for social justice and should not be seen in isolation as a women’s issue” (UN, 1995: 16).

Momsen further points to how VAW from the beginning was linked to gender inequality and the vulnerability of women. At the Beijing +5 Review, in 2000, strategies for reducing such violence had been laid out. Masculinities have increasingly become a research focus in attempting to help men to understand and control their aggressive tendencies toward women (Momsen 2004: 93). Even though these are important steps forward, this illustrates the point made by Edström, namely that the debate has been informed by the stereotype that women are vulnerable and men are aggressive. Rather than addressing the underlying causes for these roles (Edström, 2011).

As Pearson summarized, gender and feminist studies have mainly debated women’s social, economic and political role. Unfortunately, the gender perspective has not filtered into the HIV and AIDS debates. The spread of HIV is closely linked to gender, as presented above. It continues to profoundly affect women and girls across all regions, due to both biology (vaginal transmission and pregnancy) and social roles. Further, one of the most troubling issues about the HIV epidemic is its connection with violence (Connell, 2011). Understanding how the development agenda has politicized and mainstreamed gender (presented as women’s rights) does not give the full picture of how gender intersects with

HIV. As I will argue in the following discussion, HIV has contributed to an individualizing and victimizing way of handling gender, because individuals are blamed for violence, vulnerability and/or risky behavior. The stigma closely attached to HIV maintains secrecy and a perception of individual responsibility.

Edström is critical to the use of the term vulnerability in an analysis of the link between gender and HIV because: “the focus on vulnerability alone misses the significant point that transmission is relational between bodies and takes place in context of complex bio-social dynamics” (2011: 76). Women are vulnerable to HIV when men are vulnerable to HIV, because of poverty, cultural expectations, trauma etc. Taking the threats men face seriously is different from blaming violence or HIV on masculinity. Although the notion of male vulnerability is becoming more commonplace, he argues “it often fails to take account of the relationship between structural inequalities and agency, which in turn tends to lead to fairly apolitical approaches to change men as individuals” (Edström, 2011: 76). It is not a problem to acknowledge and show that men are also vulnerable. But the problem with using vulnerability in dealing with masculinities in HIV is that it forces the analysis back to individuals at the expense of power relations, structures and dynamics beyond the personal (Edström, 2011). By focusing on power and inequality and the agency individual men might have or gain within these structures, possibilities to move beyond vulnerability will appear. According to Edström, the recent dominant rights debate in HIV (both rights to treatment and women’s rights) have become institutionalized and domesticated within the international HIV and development debate. Despite the potential of HIV to exactly politicize how women and men address gender inequity (Edström, 2011).

Public health discourses surrounding HIV blame men’s risky sexual practices and behaviors for the pandemic, Izugbara and Okal (2011), write about young male Malawians: “Despite years of HIV information, education and communication, young Malawian men continue to engage in risky sexual practices” (2011: 21). This shows the contradiction that has arisen with men

learning that they are at risk and also to blame for HIV. Unfortunately, this point was not captured in research and response to the problem because men themselves were not involved, Izugbara and Okal claim that: “Social research on vulnerability to HIV and sexual transmitted diseases in Malawi has been driven by doubtful assumptions about gender and has neglected young men and their narratives and practices of heterosexuality” (2011: 21).

Izugbara and Okal elaborate that young men are “frequently challenged by cultural and political discourses and practices that cast ‘real’ men as risk takers and philanderers and women as subordinate to men” (2011: 21). This is combined with fear-arousing imagery in public health narratives that depict HIV as pervasive and inescapable among young men who stick to normative standards of manliness. Therefore, the young Malawian men interviewed seemed little motivated to change, although the same public health narratives call for change in male behavior as the key to preventing the spread of HIV (Izugbara and Okal, 2011). In this case remaining a real-man contradicted the encouragement from NGOs to be cautious about HIV or to respect women. And no alternative masculine role was suggested.

4.2 Politicizing masculinities: a theoretical framework

Being part of OMC in prison led Wibooti to ‘have to’ change into the One Man Can:

It was a difficult transition from being a very active gang member in prison, and having been part of violence. It felt conflicting to be part of OMC and the gang at the same time. I wanted to be a responsible man, but on the other hand experienced still having ties and being part of a gang, I thought about being non-violent. OMC challenged me not to say one thing and do something else. I decided to completely let go and get out of the gangs. I could not remain the same Welcome, being violent to others. And becoming a peer educator, there were issues I could address through OMC such as HIV and sexual violence. We had assaults in the prison. And I was also part of assisting in perpetuating the sexual violence. (Wibooti, interview 2012)

Wibooti's reflections may help to understand the point that masculinities are no more set in stone than other social identities. Like women over the world have been able to move from being housewives to enter work, men can also change their masculinities. It does however require substantial recognitions and political action. *"What I think the government can do is try to understand the environment under which this boy comes from and why he does the things that he does. Are there support systems in place? And, if there are no support systems, assist him to put those systems in place"*, Wibooti suggests (interview, 2012). We need to politicize masculinities, and move beyond the individual men and boys, not in order to move away from them, but to put the spotlight on the structures and social expectations that might be obstacles in their journey to change.

Cornwall et.al. (2011) set out a holistic and structural agenda to challenge masculinities, GBV and HIV through politicizing masculinities. The aim is to contribute to shift the gender agenda back to a concern with the fundamental structural inequities (Cornwall, 2011:2). Although men and masculinities over the last decade have captured greater space in the agenda of gender and development, there still seems to have been relatively little transfer of energy or experiences from initiatives focused on the internal and interpersonal aspects of men's lives to efforts that also address the unjust effects of men's privilege in the world of politics and the economy. While recognizing the growing visibility of gender-based violence and HIV - which has given rise to gender work that addresses the impact of masculine norms on how men think and act - Cornwall et.al. (2011) call for a politicized debate on masculinities, which contextualize the internal aspects of masculinity with sociopolitical power structures. There is, according to Cornwall, a widespread sense among feminist activists and researchers that the gender agenda has been depoliticized as it has been taken up by development agencies. It has become stripped of the original concern with inequitable power relations and reduced to interventions that are not genuinely transformative (Cornwall, 2011).

A number of writers have observed the extent to which this embrace of 'gender' has been accompanied by a tendency to play down challenges to the status quo and play up the benefits of instrumentalizing women in the service of development. Power has come to be represented as something that can be bestowed or acquired rather than a structural relation that is in itself gendered. (Cornwall, 2011:1)

Arguing that we should see power as a structural relation, Cornwall (2011) offers a critique to the use of empowerment as a tool to address gender inequality. She criticizes NGOs and global policy of targeting investments without any consideration of the broader social changes that need to take place. Instead, she suggests they have promoted increasing focus on the adolescent female as the agent of economic recovery, 'if only she can be empowered sufficiently'. According to Cornwall, this deeply individualized perspective, removes the complex interactions between gender and inequality in the lives of both women and men. The result is that policies and programs of economic and political elites that shape such interactions are rendered invisible (Cornwall, 2011). In addition to the focus on women's power and agency then, we must understand the relations between women, men and structures of economy, politics, culture etc. So, on the one hand, issues of violence and HIV must be politicized rather than individualized and, on the other hand, this should include masculinity and not remain a feminist agenda.

Edström (2011) looks at what might be gained from politicizing the way in which men and masculinity are represented in discourses about vulnerability in relation to HIV. "Politicization is needed to build relevant alliances for challenging specific aspects of patriarchal gender oppression, which have an impact on social justice, human rights and the [HIV] epidemic alike", he argues (2011: 71).

Gender movements should engage men in conversation about the harms that norms of masculinity do to them. This will open ways to talk about privilege and oppression at a systemic level and allow men to work with women to overturn patriarchal ideologies and inequalities. Taking for example campaigns for equal pay are not only a fight for women's rights, but can be seen from men's

perspective as part of their own liberation (Cornwall, 2011). Cornwall suggests that “the growing interest in working with men to change the violent norms of ‘traditional’ or ‘conventional’ masculinity opens up for mobilizing men to challenge their social, economic and political institutions that reproduce this violence from which they, too, suffer in so many ways” (2011:16). This will in turn call for new, gender-equitable masculinity and generate moments for forging alliances for gender justice among people of all gender identities. Cornwall encourages us to dear to envision: “a world of equitable social relations in which masculinities and femininities are points of gender identification available to all” (2011:16).

The consequence of depoliticizing gender, while politicizing women’s rights, is that men are left with a patriarchal ideology bereft of its legitimizing activities (as the example from Malawi illustrated above). “Patriarchy does not mean that men have only privileges. Men also have many responsibilities”, argues Silberschmidt (2011: 104). Men’s authority has come under threat and so have their identity and sense of self-esteem. In the context of increasing economic insecurity around the world, the tension between normative ideals and men’s ability to achieve these have intensified. Men’s roles and identities are increasingly contradictory (Silberschmidt, 2011). In other words: the masculine identity crisis needs to be politicized and seen in connection to women’s rights.

The tendency to sympathize with women as victims of HIV and GBV without analyzing men’s action leads to misunderstood response to the epidemic. Though they have been recognized as drivers of the HIV epidemic, the underlying reasons for men to be ‘the driving force’ have not been fully understood. Silberschmidt points out that: “economic instability leading to economic disempowerment of men seems to encourage them to prioritize sexual empowerment, including sexual risk taking (...) and preside over considerations of the dangers of HIV infection” (2011: 105). This not only affects men, but entire societies. Prevention efforts have focused on sexual behavior patterns and women’s ability to negotiate safe sex. However, the important argument of

understanding men's sexuality in relation to the dynamics of economy, power relations, gender relations and other social structures has been neglected (Silberschmidt, 2011).

There are indeed many possible shapes masculinity could take. And there are options for masculine identity, HIV-prevention and non-violence to concur. The emergence of new, perhaps less violent and less oppressive ways of being masculine is possible. Especially if men's movements reach out beyond a constituency of men to collaborate with feminist organizations, and manage to create a movement with space for all change agents, regardless of gender. Further, like Silberschmidt argues: "The project of gender justice requires a breakdown of solidarity among men which exists across age, class, race, ethnicity and sexuality" (2011: 106). This is how politicizing masculinity in South Africa also intersects with redressing discrimination and inequity. As explained above, South Africa is a context of major inequalities across exactly age, class, race, ethnicity and sexuality. Sonke's work helped me understand the driving force behind building a movement to politicize masculinity.

5. The ideology of HIV and GBV

Why I did this? I was struggling with rejection. Wondering why my parents left me to my grandparents. I wanted to belong somewhere. I was raised colored in a colored area, but went to a Model C school, which is affluent, upmarket and a boarding school. My grandparents always wanted me to get out of Valhalla Park, wanted me to get a better education. But it became difficult instead, because I had to go back to my community and defending being in a 'white school'. The school was not really white, this was at the time SA was transitioning, but it was a boys' school where you had to pay fees. I was picked upon, got viewed as a 'mommies boy', 'stuck up', 'you wear blazer'. So, I joined the gang culture to be part of the community. Prove myself. Not wanting to consider the consequences, but only considering wanting to belong. I had what I needed, so I had a life where I didn't really need anything. For me it was just filling up the gap of being accepted. And become a part of the community and society. It was for me just allowing the stereotype to live. (Wibooti, interview 2012)

Social structures and expectations create the context in which we orient ourselves when we make decisions for our lives. As Wibooti's story tells us, young South Africans face many challenges in their search for identity, belonging and education or job opportunities. As for him, such identity struggle can lead to violent lifestyles. In the following, I will present the NGO discourse, which has dominated the debate on global health policy in the past two decades. Models such as Figure 2, summarizes *stereotypes* of gender roles and risk-taking that make out the prevailing 'ideology of HIV and GBV'. That is what this thesis attempts to challenge. This ideology promotes victimization and fails to promote change or solutions for allowing men the *belonging* Wibooti describes and alternatives of action and agency.

5.1 Gender, class and race in health policy

The typical global health discourse tends to simplify the connections with gender, GBV and HIV, especially in the analysis of vulnerability or ‘risk-behavior’. Interpretations of vulnerability tend to reinforce essentialism about men and women, which is unhelpful because it compromises our ability to understand the structural influences on HIV and GBV. “The way in which ‘gender’ comes to be represented is limited to an often stereotypical binary that depicts men as predators and women as victims. Men in all their variety and complexity are almost invisible in these discourses, reduced to being represented as the problem”, argues Edström (2011: 71). When this happens, structural and cultural barriers that stand in the way for men’s sexual health remain invisible. However, and even more worrying, men’s and women’s agency to challenge or act differently from this stereotypical binary is totally ignored.

It is disturbing how the literature within global health states that women are vulnerable and have specific health needs while men’s health is not an issue. Birn et.al. (2009), for example, only spend a paragraph commenting on men and health. “Men’s roles as primary breadwinners in numerous societies may lead them to travel and work in dangerous and/or stressful settings, and result in illness and/or injury”, argues Birn et.al. (2009: 262). They state that men have poorer health because of taking risks, doing physical work, engaging in armed conflict, substance abuse or not testing for STIs, but that these issues are already addressed in health strategies. They claim that principal health problems of men have been well studied. And imply that this might be because health researchers and policy makers are men. Without considering how changes in men’s life could change women’s health or the other way around.

Morrell (2011) remarks that “Policy is often considered a ‘neutral’, genderless, activity performed mostly by ‘neutral’ men. Thus it is not so surprising that creating sufficiently gender-conscious policy is very difficult” (2011: 159). Morrell maintains that policy debates on gender equality are mainly concerned

with what women have to gain from greater gender equality. Women are considered vulnerable because of lacking services for pregnancy, birth and violence (etc.), and because they ‘lack power’ over their bodies and the shaping of health policy. “Women in many societies have limited economic and social power, attain lower levels of education than men, and lack legal autonomy. These factors combine to maintain women’s disadvantaged social position and result in gender-specific health problems”, Birn writes (2009: 259).

In this picture, the link between the two is missing. A man who abuses alcohol and refuses to test for STIs may expose women (and children) to violence and HIV. Therefore, we cannot treat women’s health as an issue separate from men’s health. Also, the case of South Africa shows that men in fact don’t have enough knowledge about their health and that they don’t visit clinics, while women are quite aware and also quite capable of showing up at clinics or participating in HIV-movements. Men need to become more concerned with health and should be invited to help address GBV and HIV. Morrell (2011) highlights that we need to make the debate of gender justice relevant for men, and avoid resistance based on gender equality and health being depicted as ‘women’s business’. He states that more attention could be given to how men might promote gender equality in ways that assist women. Morrell argues: “Efforts towards gender mainstreaming in law and policy are often, quite understandably, women-oriented; the implications of such policies for men need to be more fully explored, whilst at the same time avoiding anti-women/anti-feminist, ‘men only’ tendencies, as sometimes promoted” (2011: 161).

Gender also interacts with class and race in determining access to education, employment, health, and social services. Race and racism are indeed determinants of health in South Africa. Birn states that: “Race, like gender, is a social construction that is used to classify groups into categories based on arbitrary visible, characteristics (e.g., skin color, shape of eyes, etc.)” (2009: 332). Racism negatively affects health and race is often conceptualized as social class. Racial and class differences exist independently but also operate

synergistically, also with gender dynamics (Birn, 2009: 332). In the context of South Africa this is important to bear in mind, but again I will argue that rather than regarding race and class as forces that make some people more vulnerable, we need to allow people the opportunity to live their lives in full expression of their personal agency. Policymakers and NGOs working with global health, GBV and HIV should recognize this and not approach black, colored or poor in South Africa as vulnerable recipients of their policy, but as actors to collaborate with.

5.2 Individualizing responsibilities

The way gender analysis is typically utilized in HIV programming is individualizing the responsibility of ‘taking risk’ to each man and addressing individual women with the offer to ‘empower’ them away from their ‘vulnerability’. According to WHO, “*Gender analysis identifies, analyses and informs action to address inequalities that arise from the different social roles assigned to women and men, the unequal power relationships between them, and the consequences of these inequalities on their lives, their health and wellbeing*” (2010: 6). Gender analysis in HIV programming highlights how inequalities constrain women’s ability to protect themselves or seek testing, care and support services. It also highlights how men’s social roles, increases women’s risk of HIV infection. Contrary to this individualizing approach, this thesis argues for politicizing of masculinity alongside politicizing of feminism and overall gender justice. The main consequence of an individualizing gender analysis is that people remain in roles defined by society, in a sense both men and women become vulnerable to the maintained expectations.

In the last decade much has been done to improve the health of poor women: “The BPFA stated that ‘women have the right to the enjoyment of the highest attainable standard of physical and mental health’. It also recognized that ‘women have different and unequal access to and use of basic health resources’” Momsen convey (2004:103). New focus at the beginning of this century, on health and protection from violence as human rights led to a rapid expansion of

preventive health care and community-based programs. Usually run by NGOs, with a new focus on including men, and often with an approach that promoted ‘changing masculinities’. “Educating men in their role in women and children’s health has apparently been remarkably successful in changing social attitudes and gender roles (...). Even in highly patriarchal societies some men can remain marginal to the dominant order of patriarchy and be open to change” Momsen described in 2004 (2004:103). However, I will argue that it was naive to think that NGO interventions could develop formulas to change masculinities without politicizing them. Transformation does not arise from individualizing formulas, but rather when men join political movements in search for structural changes. Helping men to ‘understand and control their aggressive tendencies toward women’, which became a focus in research (Momsen 2004: 93), is not going to bring about real and sustainable change because responsibility remain individualized. A transformative strategy must address the norms that cause men to experience that being in control and exerting power is important to their masculine identity.

Another worrying fact is how easy it has proven to be to mobilize whole societies around women’s vulnerability, without anyone asking *why* men are ‘the perpetrators’. According to Silberschmidt (2011) there are good reasons to organize and mobilize in South Africa. Marches organized around AIDS-related issues have attracted sizeable support from men and women, black and white. However, she argues:

the lack of popular support for men’s movements in South Africa is a major indicator of their limitation. In contrast, the organization that constitute a pro-feminist movement as well as initiatives for both men and women around domestic violence, have attracted men and women as well as financial support. (Silberschmidt, 2011: 106)

In other words, everyone agree that HIV and women’s rights seriously needs to be addressed, but men’s political role in the big picture is ignored. Perhaps the alternative to a patriarchal society seems utopian.

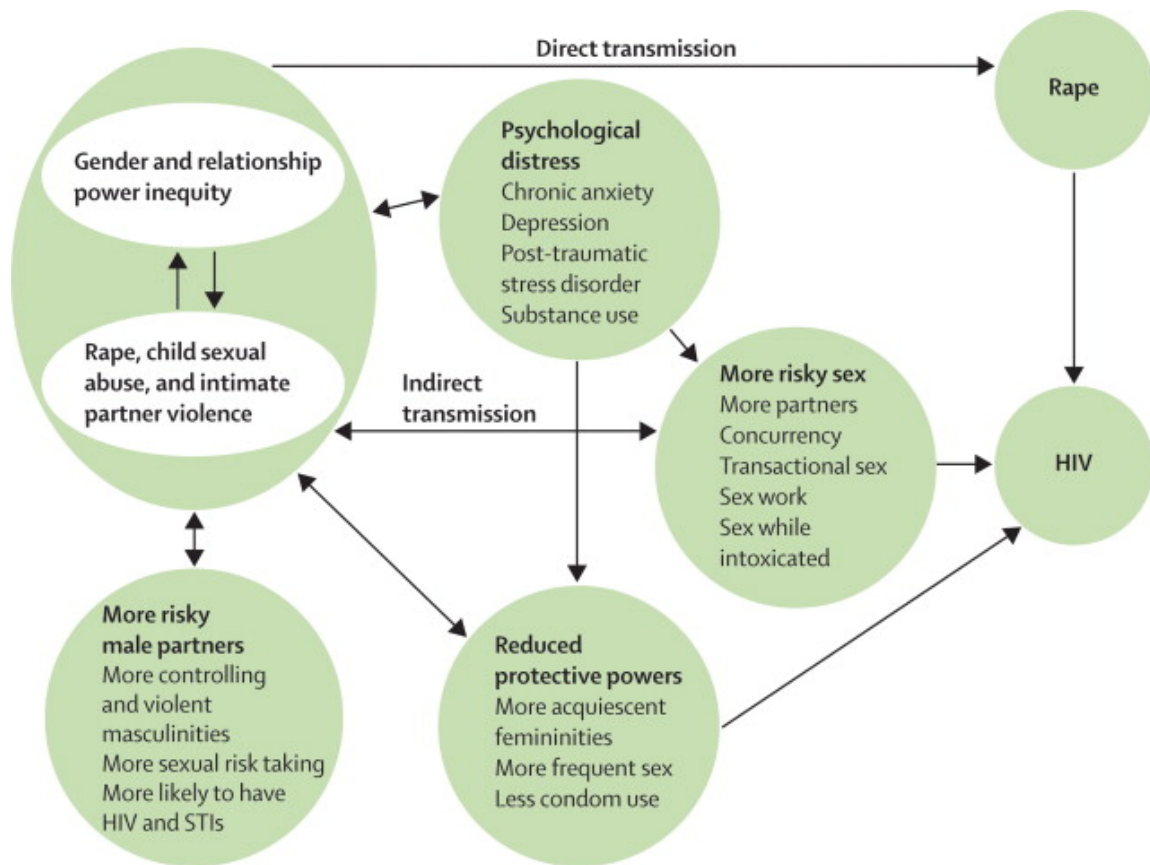


Figure 2: Links between GBV and HIV (Jewkes et al., 2010).

Figure 2 is used in the study by Jewkes et al. (2010) to reveal casual linkages between gender roles, risky sexual behavior and transmission of HIV. This figure shows direct links, which enhance individual responsibility without contextualizing political and societal structures that influence the individuals. A direct link is drawn from gender - or relationship - power inequity to more violent and risky male partners and reduced protective powers (more frequent sex and less condom use), for example, which in turn leads to HIV. Another direct link described is from gender power inequity, GBV or child abuse to rape, which according to the model also leads to HIV. Indirectly, it is stated that the experience of power inequity or violent abuse leads to psychological distress and/or more risky sex, which could also lead to HIV transmission. This depicts a deeply individualizing picture of dynamics that are in reality much more complex. As I will show, Sonke reveals the same possible connections in a more proactive and politicized manner, which importantly does not blame individuals.

In the article in which Jewkes et.al. (2010) shows this model, it's presented a longitudinal analysis of 1099 young South African women, who were HIV-negative at baseline and had subsequent HIV test results. They found that 6.2 per cent (128 women) acquired HIV during 2076 person-years of follow-up. That 8.5 per cent of women with low relationship power equity at baseline acquired HIV, compared with 5.5 per cent of women with medium or high relationship power equity. Also, 9.6 per cent of women who reported more than one episode of intimate partner violence at baseline acquired HIV, compared with 5.2 per cent of those who reported one or no episodes. Based on this data, they conclude that relationship power inequity and intimate partner violence increase risk of HIV infection in young South African women. They argue:

By not focusing on gender issues, these interventions provide little help for vulnerable women. (...) Qualitative research has shown that the links between HIV and AIDS, gender inequity, and gender-based violence lie in the patriarchal nature of society, and ideals of masculinity that are based on control of women and that celebrate male strength and toughness. These ideals readily translate into risky sexual behaviors, predatory sexual practices, and other acts of violence against women. Additionally, they allow men to have multiple partners and control their sexual encounters. (...) men who perpetrate violence are more likely to be HIV infected. (Jewkes et.al., 2010:41)

The study by Jewkes et.al. contributes to some critical information on relations between gender and the risk of HIV transmission. However, it maintains the image of women as victims and men as perpetrators. "Prevention agendas remain dominated by promotion of male condom use, HIV testing, treatment for sexually transmitted infections (STIs), and more recently MMC and ARVs. By not focusing on gender issues, these interventions provide little help for vulnerable women", they write (2010:41).

Helen Epstein (2010) offered her critique to Jewkes et.al. in an article in Lancet. Epstein states that "this is a secondary analysis based on a controlled trial of the effect of intimate-partner violence on HIV" (2010:1219), and that the conclusions are based on statistical analysis of inadequate conceptual models.

“The relation they [Jewkers et.al.] find between intimate-partner violence and HIV infection in South African women could in part be explained by a confounder they do not control for: men’s sexual partnership concurrency”, Epstein argue (2010:1219). Multiple partnering by either partner could engender conflict, violence or risk of HIV. Determining men’s behavior based on a study of women is not convincing, but unfortunately making such assumptions is not uncommon within the ideology of HIV and GBV. As Epstein points to, several key relations between variables are excluded from Jewker et.al.’s model. For example “Jewkers and colleagues do not rule out that having a non-violent male partner with a concurrent partner carries as much risk of HIV as having a violent male partner with a concurrent partners”, Epstein writes (2010:1219).

The UNAIDS also focus on vulnerable groups and the vulnerability of men and women. The Global Report from 2012 argues: “The lower socioeconomic and political status women are assigned, including unequal access to education and employment, and fear or experience of violence compound women’s greater physiological vulnerability to HIV” (UNAIDS 2012 B: 70). Hence they draw the conclusion that women and girls have little capacity to negotiate sex, insist on condom use or otherwise take steps to protect themselves from HIV. Equal to Jewkes et. al. (2010) and Figure 2, UNAIDS describes men’s vulnerability to HIV to be because of gender norms that encourage men’s high-risk behavior, discourage them from seeking sexual health services or acknowledge their lack of knowledge about HIV. What Sonke manages to add to this picture are the positive role models who shed light on the alternative masculinities, which men can choose to identify with. Also, responsibility is put into a wider context. Christopher Colvin wrote a report on OMC in 2009, where he interviewed participants to understand how individuals or whole communities become change agents. Four years later, I interviewed Covin and he states that in order to create change “*first there needs to be recognition that there is a whole range of masculinities*”, and continues to say that “*Sonke staff usually remember that because they go back and forth between seeing men they work with as open to change and arch traditionalists that need to change*” (interview, 2012).

In the theory chapter I referred to Izugbara and Okal (2011) who argue that men and boys in Malawi were trapped in masculine expectations. However, UNAIDS (2012 B: 76) mentions Malawi as a good example to look to for solutions on addressing gender, violence and HIV. UNAIDS (2012 B) encourage us to learn from this. They argue:

Building on such successes, countries should empower women and girls in all their diversity, including women living with HIV, as leaders to catalyze essential cultural shifts towards gender equality and access to quality services. (...) Countries should engage men and boys to promote healthy gender norms and adapt HIV program to ensure that they reach all those in need, including marginalized groups such as transgender people. (UNAIDS, 2012 B: 76)

These are all good advice, except that it upholds the view of men and women merely as victims of HIV and GBV and receivers of their rights to health service. One also needs to recognize the agency and power of peoples own life choices, when they learn to challenge existing power structures. Instead of assuming that violent male partners are engaging in risky behavior or that infidelity is a driver of both HIV and GBV, one needs to allow men to take part in reflecting on all these issues. And instead of promoting campaigns directed towards the individual and his/her personal responsibility, campaigns on HIV and GBV should be comprehensive and directed towards communities, while offering individuals a chance to critically debate the norms and structures within the community.

I will move to explore how Sonke build upon local experiences of power and cultural constraints in their programming, and how they build peer-educators through acknowledging that local knowledge is essential to understand how one can bring about change. From this bottom-up perspective of Sonke, these peer-educators develop into agents of change who learn to transform negative experiences with gender norms, power inequity, GBV or risky sexual behavior into lessons that can guide positive change.

6. Sonke and the OMC campaign

Having the support of Sonke outside the prison assisted me to build that character, to build that confidence, so that I'm moving on from a point of having the theory of the One Man Can program but also implementing that in my life on a daily basis. Today, it's like a dream to work in an organization that practices what they preach - the opposite of prison where they bring people down instead of rehabilitating them as they are supposed to. And it is a dream to have the freedom to do what you love, to interact with people and to decide whether you want to interact. For example for me, having the opportunity to go back to jail and meet my past. Speak in front of former co-prisoners and correctional officers. It can sometimes be painful, but you get the choice to decide whether you want to go or not. It is really overwhelming to go back to prison. Meet the ones I perpetuated violence against now that I am in this position - working in a big organization fighting violence. (Wibooti, interview 2012)

In order to create social movements, you need enthusiastic individual drivers. “*The experience of working at Sonke has been overwhelming,*” Wibooti utters (interview, 2012), clearly being such an individual. His main motivation to work with the OMC campaign is to inspire the same change in others as he has experienced within himself. In addition though, the job in itself provides meaning and motivation to him. “*I have always loved administration, to work with people. You listen to what people report, but when you are documenting it gets deep. You feel like you want to make justice to what they are documenting. Then a few months after a report you see that the person reports different, you see the development*”, he describes (interview, 2012).

In the following, my aim is to understand the strategy behind the method Sonke has developed to implement change in Wibooti's and other men and boy's lives. As well as how their method contributes to politicizing masculinities, through building peer-educators that act as agents of change, from the bottom-up. This thesis will focus on the OMC campaign, which is the main community education activity that Sonke runs. The main goal of this campaign is to build individual drivers that can spark debates and initiate change on the ground.

6.1 Sonke's ideology of change

As argued in the previous chapter, campaigns on HIV and GBV should be comprehensive and directed towards communities, while offering individuals a chance to critically debate the norms and structures within the community.

Furthermore, Edström uttered that focus on power inequality and the agency individual men have or gain within these structures reveal possibilities to move beyond vulnerability (2011). However, in an article titled “Mobilizing Men and Boys in HIV Prevention and Treatment: the Sonke Gender Justice Experience in South Africa”, by Sonke's founder and two of his colleges, it is claimed that:

“Despite international commitments and the growing base of program experiences and evaluation, most initiatives to engage men and boys in achieving gender equality have been small-scale and short-term” (Van den Berg et.al. 2012: 11). To counter this, Sonke suggests, as follows: “In order to transform the pervasive gender inequalities, a scaling-up and widening in scope of the programs and models already known to be effective is imperative. The two values of engaging men and working systemically to scale up existing interventions therefore need to be combined as one holistic intervention” (Van den Berg et.al. 2012: 11).

They go on to argue that Sonke exemplifies the successful combination of these two values: “To achieve change, Sonke engages in various forms of activism across levels of a socio-ecological framework that Sonke calls *the Spectrum of Change*”, explains Van den Berg et.al. (2012:12). This approach towards achieving gender equality, health and human rights is inspired by the conceptual framework, called the Spectrum of Prevention, developed by California based Prevention Institute, and secondly by several examples of other activist organizations. Van den Berg et.al. puts it in plain words: “The Sonke adapted version of the Spectrum of Prevention, called the Spectrum of Change, identifies seven mutually reinforcing social change strategies that move beyond an exclusive reliance on individual or small group change to additionally promote changes at the social, political and economic levels of people's lives” (2012:12).

The seven levels are:

1. *Building Individual Knowledge and Skills*
2. *Providing Community Education*
3. *Strengthening organizational capacity including work with service providers*
4. *Community mobilization*
5. *Communicating for social change through media*
6. *Working with government to promote change in policy and practice*
7. *Building effective networks and coalitions*

(Van den Berg et.al., 2012:12)

Within the Sonke Spectrum of Change, training, capacity building and community mobilization work are integrated with, and connected to, research, policy and advocacy work (Van den Berg et.al., 2012). At the same time ‘gender equality and social justice’ remains the overall goal, and is therefore placed at the center of the spectrum of change. This, I will argue, constitutes strategies that, when applied together, contribute to politicizing rather than individualizing masculinity, GBV and HIV. As explained in the organization’s Capacity Statement: “These strategies are mutually reinforcing and generate important synergies. They should be used to promote multi-sectorial approaches that bring together activists with varied skills and connections” (2012:7). As the illustration of the Sonke Spetrum of Change shows (Figure 3), all approaches designed to contribute for change revolve around the core goal and they are both equally important and equally held accountable in research, monitoring and evaluation. Therefore this model constitutes the recognition of how, for example, policy makers, community change agents and communication for change strategies have a shared responsibility in the fight for gender justice. No single solution will end GBV and HIV, therefore Sonke integrate these elements in collaboration with other actors.



Figure 3: *The Sonke Spectrum of Change (van den Berg et.al., 2012).*

To ensure that Sonke’s work draws on all the aforementioned multiple change strategies, the organization’s work is divided into the five units described in Table 1. In Chapter 7, I will present how staff members mainly from the Training, Capacity Building and Community Mobilization unit work on the One Man Can campaign. However, I also present one informant from the Policy, Advocacy and Research unit, and one from the Operations and Organizational Development unit, in order to illustrate how the units collaborate and use the same OMC language, even though they have different roles to play in the movement. I chose not to include the international and regional work of Sonke in this thesis, but to focus on activities in South Africa. However, I note that the units’ diverse work is interlinked to fulfill the vision of the Spectrum of Change.

Table 1: Sonke’s organizational structure (Sonke, 2012:8):

<i>Sonke unit:</i>	<i>Task:</i>
<i>Training, Capacity Building and Community Mobilization (TCBCM unit)</i>	<i>The overall goal of the community mobilization and capacity building program is to work proactively with men and boys, public and civic institutions across Africa to prevent gender-based violence, the spread and impact of HIV and AIDS, and promote gender equality.</i>
<i>Policy, Advocacy and Research (PAR unit)</i>	<i>The overall goal of the policy advocacy and research program is to ensure that work with men and boys is included and implemented effectively in policies at all levels, and to engage in critical research to establish a solid evidence base for ongoing work with men and boys.</i>
<i>Communications and Strategic Information (CSI unit)</i>	<i>The overall goal of this program is to promote positive changes in social norms and practices to increase support for gender justice among boys and men, facilitate development and implementation of human-rights focused policies relating to men, gender and HIV, and positively influence public discourse around gender and HIV.</i>
<i>International Program and Networking (IPN unit)</i>	<i>The overall goal of this program is to develop and consolidate coherent national, regional and international networks of civic organizations and activists to build capacity, advocate for and implement work with men and boys. Sonke’s work with men and boys for gender equality has received growing international recognition, as reflected in its capacity as the Africa Coordinator and Global Co-Chair of the MenEngage Alliance.</i>
<i>Operations and Organizational Development (Ops & OD unit)</i>	<i>The overall goal of this program is to develop institutional and financial capability so that Sonke functions effectively and efficiently, with proper acknowledgements and appreciation of the contribution of all staff members.</i>

6.2 One Man Can method

The OMC campaign’s main goal is to support men to advocate for gender equality. This includes encouraging men to take active stands against domestic and sexual violence and to contribute in changing gender norms. In addition, OMC participants are helped to promote and sustain change in their personal

lives to protect themselves and their partners from HIV (Sonke, 2012). While behind bars, on the one hand, Wibooti accepted the system within the prison and that he had to play by both other prisoners and the guards' rules. On the other hand, reflecting (in OMC workshops) upon how his own behavior had turned violent made him determined to transform both himself and the system through activism. He elaborates:

My supervisor in Sonke is my biggest inspiration. She is for real. She is advocating for prisoners' welfare and honestly goes all the way to set the agenda. She is so critical towards those who are responsible. I don't like how the officials talk about their vision of creating a better life for inmates, while they still behind closed doors treat inmates as if they are nothing, they are dirt and not to be trusted. That is what I experienced in prison for 13 years; hearing them talk to the public about taking care of prisoners, but treating us like that. Yesterday I met with two of them (went to Belleville prison) and told them that they did not make me what I became. They must not think they made me - I made me! (Wibooti, interview 2012)

This illustrates that working on a structural (policy) level and individual level goes hand in hand. Efforts from above and efforts from below must reinforce one another, for example communities must mobilize around equal rights to make sure the South African constituency is effectively helping people. On the other hand, researchers and policy makers should understand the reality people are living in, so new laws, policies or social interventions respond to what is actually needed. A second crucial point is not to lose sight of the fact that individual men and boys who transform their behavior have not 'been empowered', but rather empower themselves. The strength it takes to turn around and prove wrong those who never believed in you is much deeper than the power anyone can have to 'empower' somebody else, as Colvin expresses it: "*You may wish the world was different, but you can't shame or educate the problem away*" (interview, 2012).

Therefore, it is important to gain a holistic understanding of the work Sonke does in supporting peer-educators and creating spaces for men to search for new masculine identities as well as revealing structural barriers that they can address.

An evaluation of the OMC campaign that was ordered by donors and conducted by Colvin (2009) represented results about individual behavior. Even though I recognize the limitations of such studies based on quantitative data pre and post-intervention, the results indicate great success and significant changes in short-term behavior in the weeks following OMC activities. 25 per cent of respondents had accessed voluntary HIV counseling and testing, 50 per cent reported an act of GBV, 61 per cent increased their use of condoms, and over 80 per cent talked to friends or family members about HIV, gender and human rights issues (Colvin, 2009). Assuming that these individuals use their new knowledge and changed attitude to question gender norms and structures in their community, and assuming that they engage further as peer-educators and CAT members, Sonke probably achieves far broader results than this evaluation revealed. *“Both the activism and the donor interest are threats to deep reflection on the impact”* Colvin argues (interview, 2012). However, he recognizes that Sonke is interested in working with research and as long as they get hold of the necessary resources because: *“the better evidence they have (not just pre and post workshop) and the more theory that they have, the more they will be able to develop”* (interview, 2012).

OMC presents a set of practical, proactive educational and skills building activities to communities motivated to work with masculinities and gender justice (Van den Berg et.al., 2012). In the following, I will provide examples of the methods used in the OMC campaign. This thesis is not a full review of OMC or Sonke’s work, but an analysis on what can be learned from Sonke in order to understand how politicizing masculinities may be approached.

6.2.1 One Man Can toolkit

As a tool for all the different projects and the implementers within the OMC campaign, Sonke has developed a “One Man Can toolkit”. The toolkit is a set of resources that support men and boys in taking action to end domestic and sexual violence and to promote healthy, equitable relationships (Sonke, 2013 A). Of all

the components in the OMC toolkit, I understand that the manual is the most central in setting the agenda for how to conduct OMC trainings. As I will explain below, there are activities with different focus, however, they all revolve around the topics and the view of gender norms, violence and human rights, that is presented in this manual.

Components of the toolkit can be downloaded from their webpage, in five different languages. Among these are documents and case studies on different themes that the OMC campaign touches upon, as well as videos, podcasts, music and posters. Implementers of programs and workshops can additionally use the OMC training manual in print, titled “One Man Can: Working with Men and Boys to Reduce the Spread and Impact of HIV and AIDS” (Sonke, 2006). The OMC manual is the main resource on the OMC method and is used in the training of peer-educators. The training manual, in addition to OMC products such as t-shirts, brochures and a community action DVD, were produced in 2006 when the campaign was launched. Since then, updated material, current news, report releases and so on have been distributed through social media, other media and Sonke’s webpage. Sonke’s own or their partners’ research reports and achievements within policy work make up some of these news updates.

The OMC manual discusses gender, power, health, violence and HIV and AIDS. It is guided by the following principles (Sonke, 2006:3-4):

- *Domestic and sexual violence are against international and national laws and violate the South African Constitution and international human rights.*
- *Domestic violence and dating violence is everyone’s business, it is not a ‘private matter’.*
- *There are no accurate stereotypes when it comes to men’s violence against women.*
- *No one is safe until everyone is safe.*

- *There are lots of reasons why dating violence, sexual violence and domestic violence are issues that boys and men should care about and take action.*
- *Violence is learned; it can be unlearned.*
- *Violence is a choice and is a strategy for gaining power and control.*
- *Always promote victim safety and perpetrator accountability.*
- *Make sure the group is safe for all participants.*
- *Model equality in the group with equitable gender dynamics between facilitators, staff and group participants.*

Through these principles, OMC activities strive to create safe spaces for men in all their diversity, to open up and reflect around GBV and the stigmas attached to it that prevent the subject to be discussed among men in traditional fora. Edström argued that structural and cultural barriers that stand in the way for men's sexual health remain invisible, when men are represented as the problem in the discourses on gender that depicts men as predators and women as victims (2011). Additionally, agency to challenge or act differently from this stereotypical binary is totally ignored. More attention could be given to how men might promote gender equality in ways that assist women (Morrell, 2011), and in addition to promoting exactly that these principles also promotes that men can assist other men in preventing violence and promote equitable gender dynamics.

6.2.2 Community Radio Toolkit

The different programs that have developed within the OMC campaign have also created separate informational material. For example, a separate toolkit has been developed for community radios, with examples of how to structure radio shows about men's and women's experiences with violence, HIV and AIDS, HIV related stigma, child exploitation, alcohol abuse and fatherhood. The radio manual includes fact sheets, articles, and success stories, suggestions of relevant debates and actors to invite to the studio. Naturally, the many radio programs

broadcasted are also resources of their own. The Community Radio program is covers the broad spectrum of themes related to gender, GBV and HIV that are brought up in the OMC manual. Local community radios reach nearly ten million listeners a week. With the opportunity for people to call in anonymously and pose questions or comments, they also create relevant debates on changes that can be made locally as well as information that should reach policy makers.

6.2.3 Community Action Teams (CATs)

Community Action Teams (CATs) are responsible for keeping the OMC debate alive in communities all around South Africa. People that are a part of the implementing staff at Sonke are all expected to start CATs in their own communities and through the series of workshops they implement through Sonke. From the experiences gained in these groups, CAT members are encouraged to start their own CAT groups among peers. According to the OMC manual, a CAT is “a group of volunteers who decide to do something about an issue that bothers them in their community” (Sonke, 2006: 62). CATs choose different actions depending on their interest, purpose, resources, and community. What they have in common is the OMC toolkit principles and the overall goal to strive for gender justice and ending violence. The CATs have a defined focus and goals, gather regularly and carries out a series of actions and strategies. They work to create community change in individuals’ knowledge, attitudes and behaviors. This way they create new leaders and agents of change. Some also create change in institutional policies and practices. Through mobilizing the CATs not only does the OMC campaign reach out broadly, it also allows for direct interaction with the communities, feedback to Sonke on how attitudes change and a sustainability beyond the initial OMC workshops hosted by Sonke’s staff (Sonke, 2006).

According to Colvin, it is important for Sonke to build in more of the lived experiences because: “*It is easy to implement ideas, but more difficult to change behavior*” (interview, 2012). The Community Action Teams (CATs) are

designed with that kind of thinking he proclaims. *“The CATs should have a plan of action to interact in communities and do something tangible. The easiest way to change peoples’ attitudes and behavior is to work with them where they are, show them the better self that they could be”* (interview, 2012). Further he reminds us that it is radical to think that: *“A) you can quickly change your mindset because someone told you and B) that you can go and change your life substantially. You can’t change things too quickly”*, he argues (interview 2012). Therefore, Sonke should plan long-term interactions in communities. However, he warns: *“With using the implementers from the same language groups, there is the danger that Sonke mistakes that from being at the same level. Sonke staff is often behaving differently and they live and/or work in different conditions”*, (interview, 2012).

6.2.4 One Man Can clinic in Gugulethu, Klipfontein

With funding from the Western Cape Department of Health, to raise awareness and promote health services to men in the Klipfontein district, Sonke established Gugulethu men’s clinic in Gugulethu Township outside Cape Town. The clinic was launched early in 2012 and is situated next to Gugulethu clinic where, as I observed, mostly women and children seek health services. The OMC clinic is there to provide information about HIV and give advice about health issues, specifically targeted for men. The Gugulethu clinic provides access to a nurse and services such as HIV counseling and testing. Sonke provides staff for the clinic four days a week, with three staff members from the TCBCM unit, who provide information, workshops, support groups, public events and community outreach. Once a week, staff members from the clinic participate in a two-hour radio talk show where issues relevant to the community are discussed on Radio Zibonele. The team focuses on HIV, GBV and fatherhood. They also raise awareness about MMC as a means of reducing the risk of contracting HIV. Importantly, they include discussions about the potential gender implications of MMC and emphasize that men who are circumcised still need to practice safe sex (Sonke, 2013 B). During my visits to the Gugulethu clinic, I observed events

where they invited the community to participate and reflect upon gender - and health - practices; one where traditional leaders and young men debated the practice of traditional male circumcision, one where a panel debated women's rights, and a "Parenting day" where both parents and children contributed.

6.2.5 Refugees, Health and Rights team (RHR)

Currently Sonke implements the Refugee Health and Rights Program in Johannesburg and Cape Town. The team work with refugees and migrants with a focus on addressing their specific gender and HIV vulnerabilities, on challenging xenophobia and the frequent violations of rights faced by refugees and migrants, and finally on advocating for access to vital health and social services. They reach refugees in shelters or immigrant communities and conduct the One Man Can HIV prevention and gender workshops while also discussing issues pertaining to refugee rights. The RHR team also conducts workshops and activities in schools. In addition, they distribute male and female condoms and share HIV prevention messages at the Department of Home Affairs premises in appropriate languages for the different groups (Sonke, 2013 D). The RHR team brought me to one of their workshops at a shelter where they came back to work with a group over a few weeks. The OMC campaign was presented before we split into smaller groups to discuss the topic of the day, which was 'fatherhood'. All the RHR implementers have been refugees and encountered Sonke through participating in the OMC campaign. As I will present in chapter 7, they all have personal stories to tell with which they envision to inspire others in the refugee community to create change for themselves and others. This work seems to have strengthened their confidence and integration into the South African society, because they are engaged in the gender justice debate. Importantly, observed that this personal motivation triggered attention of participants.

6.2.6 Prison project and ex-prisoner support group

In the OMC Prisons project, Sonke collaborates with the provincial Department of Correctional Services and works with male and female inmates in 12 prisons

in the Western Cape on health issues. “Prisons across the country are host to distressingly high numbers of HIV-infected people, and corruption of prison officials, violence, gangs and rape, are rife in correctional facilities”, Sonke (2013 C) explains on their webpage introduction to the project.

The prison project focuses explicitly on improving the health-seeking behaviors of prisoners in local correctional facilities, through offering trainings and hosting events. Sonke offers OMC workshops and peer-educator training programs to both inmates and correctional officers within the prisons. Peer-educator groups within the 12 prisons are continually supported by Sonke’s Prisons team with follow-up workshops. One focus of the project is to reduce the HIV infection rate, besides covering other health areas including education on anal and cervical cancer, tuberculosis, diarrhea, contraception, and sexually transmitted infections. In addition, they seek to address the fact that the rate of relapse is high and that prison sentences often worsen the condition of ex-prisoners’ lives. In 2012, Sonke started an ex-prisoner support group, which convenes at the Gugulethu clinic every other week (Sonke, 2013 C).

A separate OMC manual was developed by Sonke in 2012 for the prison project, namely: “Addressing HIV and Sexual Violence in Department of Correctional Services Facilities: A guide for working with members of the Department of Correctional Services”. The prison manual states that “violence in prison fuels future violence, both inside and beyond prison walls” (Sonke, 2012: 7). Inmates experience high levels of physical, psychological and sexual abuse in detention. The OMC prison manual refers to research that indicates that inmates’ understanding of sex, sexuality and masculinity is drawn largely from their prison experience. The manual proclaims that: “Even inmates who are not raped are forced to adapt to an environment in which anyone not seen as hyper-masculine and dominant is at risk of sexual abuse” (Sonke, 2012: 7). Thus, many adopt negative attitudes and behaviors in the prison context, which they bring back to their partners, families and communities to which they return. As we have learned from Wibootis’ story, sexual violence in South African prisons is

linked to gang violence and its power structures. “Evidence suggests that prisoner rape fuels a cycle of victimization: once an inmate has been sexually assaulted, that inmate becomes a target for repeated abuse”, the OMC manual warns (Sonke, 2012: 7).

My informants in Cape Town also explained how prisoners describe these victimized inmates as ‘wifies’ (i.e. wives), and that especially younger and smaller men who are seen as more feminine (and sometimes suspected to be gay) are targeted. This reflects that gender roles from the outside are brought into the prison, feminine gender expression is devaluated and masculine strength is promoted as the ideal. The strong ones are seen as men and the weak are seen as women. Then, as explained above, the gender perceptions are additionally influenced by experiences of violence and power abuse within the prisons. Many ex-prisoners have to struggle on the outside to cope with memories of a violent environment and at the same time adjust to society on the outside. I observed a strong bond of support for each other in one of the ex-prisoner support group sessions. They seemed relieved to have space to open up about daily concerns.

My first experience was to join Wibooti and his team on a day of activities in one of the prisons where he served his sentence, the Goodwood prison. A debate took place between students and inmates and a panel of judges determined who had the best arguments on issues around HIV and AIDS. Secondly, there was a football cup of four teams: Goodwood prison, the high school students, Sonke staff on the prison project and the Refugee Health & Rights (RHR) team in Sonke. In Goodwood prison, I observed Wibooti back where he used to be a fellow inmate and gangster, returning as a One Man Can advocating for change in masculinity and violence. And it was obviously easy for the inmates to relate to Wibooti and his colleague who had both served prison sentences. I joined ex-prisoner support group on a climbing of the Lion’s Head on their last meeting before the Christmas holiday. This was a joyous first-time experience for most because they spent most their time in the Township, and a representation of the challenges they have overcome as a group. In a symbolic way, the reflections

many of them shared on our way up the mountain, showed their motivation to use challenges from their past and work hard to reach new heights together.

6.3 Implementing with peers as resources

The strength of Sonke's approach is that they turn those who in the NGO discourse are termed 'perpetrators' into human resources. People are not being told that their behavior is negative and 'risky'. Instead, those who participate in peer-educator programs, for example in prison, are met with respect for their life experience and asked to share how they arrived at the situation they are in. Sonke is strategic in engaging ex-prisoners in the prison project, ex-refugees in the implementation of RHR, community members in the Gugulethu clinic and so on. Because of this, they easily reach out to the target group and as will be explained below, most facilitators consciously use examples from their own lives to present the topics from the OMC manual. This way they inspire personal and critical reflections about structures they live in and how to develop agency to change them.

Although the OMC manual and the Sonke Capacity Statement defines a common ground of values, I observed discussions at the Sonke office for example around how gender norms can be transformed beyond how we understand today. There was an agreement on the problems with hetero normativity and gender normativity, and accept that some identify as trans or other genders, but the discussion went around whether one could move away from using he and she. No conclusion was reached on that instance, but it proved to me that new ideas are continuously being processed in the organization and Sonke does not work from the standpoint that they have already understood gender the right way. Instead, the Spectrum of Change in practice facilitates an ongoing process of information sharing between all parts involved in the movement.

To understand how Sonke achieves to motivate people to use their own experience and role in society to act as agents of change, I now turn to present

their own stories. I find the level of reflection, the individual capacities that each brings to Sonke and their ownership to the organization, particularly interesting.

7. Agents of change: Peer educators

Wibooti's recipe for inspiring change in others is clear: "*I believe you have to sacrifice some of your pride, open up entirely and represent what you have lived. Become the 'me' other people will want to identify with*" (interview, 2012). I believe this is true for many agents of change acquainted with the OMC campaign, as it is an essential part of the journey the program sets out to create for its participants. In this chapter, I will present a selection of testimonies from the informants behind this study, with the purpose of showing examples of personal motivation to change masculinity from Sonke staff and volunteers. Because the peer educators make up a corner stone in Sonke's work, their ownership of the OMC campaign and motivation to contribute is essential. There are many explanations in their testimonies, which are not usually addressed by big NGOs and policy debates. The question of how and why to work with masculinities and include men in addressing GBV and HIV, can best be understood from listening to the individuals who drive this emerging movement.

I refer to them as 'agents of change', because that is how they described themselves and also because I believe that they each are extraordinary driving forces for politicizing masculinity. First, we continue to follow Wibooti, then, I move on to what I learned from some of my other informants. I will show how these peer educators have been allowed and become motivated to turn personal experiences into resources for the OMC campaign, in fact to even identify themselves as 'One Man Can'. My findings will be discussed together with the theory from previous chapters, in order to conclude in chapter 8 with an answer to the research question: *What can be learned from Sonke Gender Justice Network in South Africa and the method they have developed for changing masculinities in order to achieve gender justice, prevent gender-based violence and prevent HIV?*

7.1 Welcome Wibooti - ex-gangster against violence

When I met Welcome Wibooti (31) for our interview, he skipped “hi” and went straight to telling me what he had in mind. *“I am trying to understand people. Why can’t they just be true to who they are?”* he said. - Maybe they don’t know who they are? I asked. *“True, but that is no excuse”*, Wibooti insisted. This is the story about a stubborn, but thoughtful young man who proves wrong the HIV and GBV debates that have become informed by the stereotype that women are vulnerable and men are aggressive (Edström, 2011). Wibooti describes himself as a previous ‘man's man’ and who has both read and thought in depth about how to change his identity and how to become an agent of change in his society. *“My past no longer holds me captive, I have grown to understand that mistakes are made, and I have also come to learn that responsibility needs to be taken. I am confident and as I continue to journey I am learning to share of my experiences thereby inspiring change in others”*, Wibooti writes on his own Facebook profile after openly telling about his background. Openness and honesty toward yourself and those around you is Wibooti’s key message. *“We have to win our internal fights. Be true to who we are. Become able to feel joy”* he told me, *“You can’t change people, but you can inspire change”* (interview, 2012).

Wibooti story also illustrates the underlying causes for how the masculine role can meet expectations of violence in return for belonging in gang environments. This is what Edström (2011) request is missing in the debate on gender equality, and contrary it is these stories that inform the OMC campaign. Above, Wibooti stated that: *“I’m moving on from a point of having the theory of the One Man Can program but also implementing that in my life on a daily basis”* (interview, 2012), which shows how the reflective exercises in the OMC campaign also encourage participants to move away from the stereotypical norms. What made Wibooti change was the combination of truly understanding the implications of violence, learning about the alternative masculinities and being trained to believe that he had the potential within himself to create change for others.

Wibooti was a high-ranking member of a central gang in prison, he reveals that: *“At the age of 20 I started accumulating my stars by stabbing, beating, asking others to rape etc. I had to become what I didn’t want to become. At the age of 24 (in 2006) I had accumulated all my stars and become the Colonel, next to the general, in gang 28, the one who basically runs the prison”* (interview, 2012). He describes taking on stereotyped masculine behavior and joining the gang, as a survival strategy behind the bars:

I have four stars tattooed on my shoulders to show this. There are three gangs: the 26, 27, 28. Gang 28 runs all the operations; the drugs trading, prostitution trading (the vulnerable and beautiful guys were forced to sell sex) and anything else that needs to happen within the prison. They keep the order in the whole prison. So the 26ers and 27ers need to ask permission from the 28. From the beginning, I was a member of the 28 number gang. My sentence was 13 years, and I was supposed to serve one third of it. But due to my behavior, I served maximum. I was lucky that I didn’t get added sentence, instead I got prolonged sentence. Since I was Connell, I was lucky that my knives could ‘disappear’ etc. because of people covering for me. (Wibooti, interview 2012)

Looking back at his experience, Wibooti stresses that being young both explain how he became susceptible to gangsterism and violence, but also helped him out of his situation:

I believe that I survived prison because I came in as a boy. I was flexible and had to think quickly as to - what is my role going to be in this place? Had to act now or never. Was a young man faced with an uncertain future. Chose gangs because I knew I could handle that, because I could learn. I grew up learning that knowledge is power, knew I could gain control of the situation through knowledge. If you walk into prison eyes closed, you get hurt. You need to learn the system, all the things to do and not to do, to avoid getting killed or raped. People are stabbed in prison, and some die. You witness violence all the time. You are locked in the room for 23 hours and you only get one hour training. Imagine a person who comes out after 30 years, they easily rape or kill and get back to prison because they don’t know how to handle it. (Wibooti, interview 2012)

Wibooti’s story can help to understand the need for the advocacy Sonke does to transform prison-policy in South Africa:

The South African prison thrives on the lock-up system. But when you put a puppy in a room, it comes out as a violent dog. It wants revenge and wants to hurt those who hurt him. This is how the lock-up system fails. The offenders are not taught how to survive without violence. They changed the name from prison to Correctional Services. And on paper there are a range of programs that are supposed to be implemented, but they are not. I had one prior to my release, but it was only two hours and then they just opened the doors and said that is the world, go. (Wibooti, interview 2012)

This again confirms how fundamentally Wibooti has created change for himself, despite his surroundings. When he got released in July 2012, Wibooti stayed with his grandparents, with whom he also grew up with and called ‘mom’ and ‘dad’, as well as his sisters. After this interview was conducted in January 2013, he got married and bought his own house. This was yet another decision made after critically reflecting on the social expectations of him as a man: *“I am the oldest brother and am supposed to inherit my mothers’ house, but I have said I don’t want it. I want my sisters to get it. This is the thing in Africa, the boy is supposed to inherit”* (interview, 2012).

In his position at Sonke, Wibooti describes that he is the OMC training assistance: *“My main focus is on the ex-prisoner support group. Facilitating and participating in the group, share my experience. The support group is a pilot project, so I make record of the process to see whether it can be sustainable. Whether we can continue and procure funds in the long run. Right now, we give the incentive by paying transport and providing snacks for the guys. Our main goal with the support group is to ensure successful integration and positive interaction in society”* (interview, 2012).

7.2 Saint Expedit Ondzongo - Ended use of violence

“What makes me do this work is the inequality I see in society, where I see myself as a part. Such inequality is driven by social factors and gender norms, which create attitudes that make men violent. You begin to see. You have sisters, a partner, if they have been beaten by their boyfriend, you will show your

masculinity and say that is not ok in my space”, exclaims Saint Expedit Ihamann Ondzongo (interview, 2012). This is yet another example of a man who has turned his behavior around because of the OMC campaign. He came to South Africa in July 2009, escaping the conflict in DRC where he had been a student rebel. Almost immediately he met Sonke’s Refugee Health and Rights project, where he now works. *“When I attended a workshop held by Sonke, and became exposed to other men who thought differently, it challenged my own masculinity. I learned how to express more peace and not violence as an individual and not as a man. We all long for peace”*, Ondzongo utters (interview, 2012), emphasizing that politicizing masculinities in essence is about human dignity and not about masculine pride.

Ondzongo is today a peer educator and a passionate gender and human rights activist committed to molding new male role models who respect women and children with dignity. He is a qualified teacher and he worked in Congo Brazzaville as a French teacher. Furthermore, he has also volunteered for ‘Health for Men’ where he was responsible for French and Lingala translations to HIV-positive clients, before he started working for Sonke as a volunteer in 2009. Although he had already been active in the HIV movement, it was when he arrived in South Africa and met with the Sonke RHR team that Ondzongo started to reflect upon his own relation to gender and violence. Ondzongo describes his background as follows: *“When violence is used against women to devalue them in front of children’, that is what I believe has become part of me. I grew up in Brazzaville, where we do not even have a domestic violence act, which means it is still normalized. I grew up with those facts and issues in front of me. I found it normal”* (interview, 2012).

“After beating your partner, you feel bad”, Ondzongo says with a serious tone. Before he goes on to explain why it still happens and why it happened in his own life:

Of course I have the experience of using violence, I don't know men who never used violence. It can be at a low level, but violence is there. I hit a girlfriend and found it quite normal. I was a man and if she didn't understand it was ok to hit. I was not a very violent man before I became a One Man Can. I grew up catholic. But because I was a man if my girlfriend was called by another man, because the girl belong to me she should not talk to other men (you forget she can have friends), you say you don't want to see her with that man. And you beat to show you are a man, you are not weak, to show that she must listen to her man. This is now a rubbish attitude to me! (Ondzongo, interview 2012)

As Edström argued, gender movements should engage men in conversations about the harms that norms of masculinity do to them because this will open ways to talk about privilege and oppression at a systemic level and allow men to work with women to overturn patriarchal ideologies and inequalities (2011). Although eventually it did, the OMC campaign did not immediately convince Ondzongo, he describes his first encounter with the campaign as follows:

The Sonke workshop I attended was on HIV and a little bit on gender transformation activities. I challenged the facilitators, on how wrong their perceptions of manhood were. I thought if you feel that you are safe, because this thing never happened to your sister, then one day you will see violence on the step of your door and then you might respond and that often takes men to prison. Society says the man is a protector, he should show his manhood and how he is a protector. So if you come home and find your mother raped, you want to fight back and get confirmation from societies' expectation. And show that you are the protector. (Ondzongo, interview 2012)

This describes the expectations men might experience from society. Although he explains a dynamic of men using violence as protection, he goes on to explore that violence directed at partners has a linked, but different explanation. He says as follows: *“The violence within families is another dynamic, it is about power and control. You need to define your manhood. Why, because you are powerful and that is because of social constructions, which says be a protector”* (interview, 2012). The difference is that within families the man is not protecting his loved ones in his lives if he uses violence, but it happens to demonstrate who are the head of the family, the provider and the protector against poverty or treats

from outside the home. Through the encounter and discussions with other OMC men, Ondzongo has realized that: *“Men do not want to lose their power, but they can become more powerful, not in a violent way, but in a way of accommodating everyone, being good fathers, good husbands”* (interview, 2012).

Ondzongo has come to terms with both the injustice that men have more power in society than women and the solution in addressing GBV and HIV, which lies in men utilizing exactly that role to initiate change. *“I believe the role that men play in society, is a role of power. It is a role of influence and in that role they can begin themselves as men and say that they will use this power and position given to them in society to make a change”*, he reflects (interview, 2012).

Secondly he argues, that even if men and boys learn to behave as protectors and to use violence when needed, it is essentially a choice each man has to make of whether or not to use violence: *“Young boys get exposed to violence everywhere. I learned violence in the street. Men will always say violence is in their mind. The same way as someone receives the legacy of resources, money and books. It is the same way men receive this legacy of violence, from their parents, friends and others. They saw violence, attitude and behavior of other men. It is like when you work for money, you should be critical towards what to do with it. We all have willpower. Also social norms shape men differently”* (interview 2012).

Ondzongo hopes the debate on changing the stereotype masculinity moves beyond Sonke and gets politicized. One organization is not enough, everyone in society should be educated to unpack gender identity and make healthy choices. *“Gender transformative work is very crucial, but Sonke is only one organization doing the work. For some men it will take time to understand. Last Saturday I spoke of changing the fact that women are afraid of men and their power because they are breadwinners. People need to take the social structure into account, in order to move forward”* (interview, 2012). He further elaborates how working with gender and politicizing masculinity, helps to redress other social issues: *“I find it interesting that if you deepen the gender ingredients, what the dynamic mean for men and society, you will discover that we are able to quicker*

address all Sexual and Reproductive Health Rights (SRHR), HIV, STIs and importantly economic inequality” (interview, 2012).

Every man has the choice to be a different and less violent man, according to Ondzongo. He states that: *“Even in war, men don’t need to join a rebel movement to prove their manhood. Look at the Congo now; they want to be protectors because they want to show their manhood. We can end all this, in being a gender activists”* (interview, 2012). For him it was the meeting with a new culture in South Africa, with other refugees and the OMC workshops facilitated by the RHR team that opened up a platform to discuss previous experiences and decide what man he wanted to be. Not only has Ondzongo become aware of how he can fulfill his gender role without anyone getting hurt, he also became a role model and change agent in his community.

7.3 Jean-Marie Nkurunziza – Proud to be non-violent

One man can turn his life around, challenge his own violent or abusive behavior and help others through a similar process, as Wibooti and Saint shared above. However, one man can also inspire other men as a role model of the alternative to violence. Sonke does not only focus on the transformational process of those previously convicted, they also recruit men who were never violent because their voices are needed in debates on masculinity. Nkurunziza’s story is about a boy who grew up in a family torn apart by violence and alcohol abuse. Today he is a husband, a father and a gender activist driven by his own exposure to violence, which he has chosen to share openly to help other men understand its consequences. This young man has big visions to politicize masculinities and place violence against women on the world’s political agenda: *“We need to create a platform for men to come together and talk, a platform for those of us who share the experience of violence. I thought I was alone when I was a child. Sometimes I feel like I wish I could confront my father, but I didn’t get the opportunity to talk to him before he died. In the absence of my father, I need to speak to other men about making a change. I have seen people cry when I speak*

in front of groups and give my testimony, but I don't need peoples' tears or hands clapping. I need action!" (interview, 2012).

Jean-Marie Nkurunziza (27) is originally from Burundi, but now settled in South Africa with his South African wife and their six months old daughter. After his own encounter with the Refugee Health and Rights team in Sonke he became a trainer, and when I met him he was responsible for the fatherhood program within his unit. In addition to his job, he is a global youth HIV activist, continuously working to creating networks and platforms where he can share experiences and discuss ways to end violence and change perceptions of masculinity. About his own childhood he conveys:

I grew up till I was five years old with my mother and my father who was in the army. At that time being a soldier in Burundi meant spending time in the camps. I can remember him coming back after long time without seeing him, expecting a good reunion with my father. But he would be drunk and start fighting with my mother. He beat her in front of us. I am the second of three siblings. The worst time was when he beat her so she broke her arm and leg. That is when my mother filed for divorce. It was difficult in the culture and the village for women to get divorced. She had already gone to her parents and been sent back many times, as was normal. But she finally refused to be in the relationship with my father. I have many memories of him coming in at midnight, after having been out, and start fighting with my mother. But when I was five and my mother couldn't take it, my father took me to stay with the aunt who he grew up with because he didn't have a relationship with his parents either. His father died when he was born. I call his aunt my grandmother and she brought me up.

So, I was brought up and taken to school by this old, poor lady who took care of me even though she had nothing. An uncle helped with money for textbooks and school was almost free at that time. But it was difficult. The school fees rose and I had to go out and sell eggs and nuts when I was in grade 7 (around 12 years old). I managed to get through school and I tried my best to be good at it, I wanted education and to become someone who would be able to speak up and make changes. It would be difficult just coming from the bush and without education. Your experiences don't get heard if you are nobody. Seeing what happened to my mother and how my grandmother managed, made me want to create change for women. Work for the rights of women. Already in 1999, when I was 14, I volunteered for the Red Cross. (Nkurunziza, interview 2012)

Nkurunziza proudly states: *"Today I have made my goal. I feel I have the privilege to have a platform where I can speak from my experience to other men. I get to challenge men every day. Challenge their beliefs and behavior. I want to be part of building this movement, but I feel we need to create a bigger platform for men to talk about this"* (interview, 2012). As Wibooti, he also underlines the agency every man and women have in them to choose a life without resorting to violence, and not to tolerate violence against themselves or others. *"I speak with my wife about my life experiences, she has cried, and she wants us to share it with our daughter. I will, but then she has to make her own decisions. I can only change myself and then be a role model, I have to be a good father and husband and a role model, but I cannot make the change for others. Everyone needs to make their own choices"*, he underlines (interview, 2012).

Then he turns to a question: - Would it make a difference if my father was present in my upbringing?

I don't think I became the activist I became because of someone else, for example because my father did not tell me how to be a man. I believe I am what I am because I felt it was wrong that my mother and grandmother were not respected, that they were violated. And I decided to educate myself and speak out. Though, yes many men before us have used violence because they thought it was right and traditional. We need to educate ourselves and challenge our mindsets. It doesn't make sense to me to beat my wife so I have to take her to hospital... and spend resources on that. And I know there are many strong women out there, women can do sports like karate. But if they are not violent to their partner even though they are strong enough to beat any man, why should men use violence? I usually ask men whether they would feel it was right to get disciplined by their wife by her being violent to them, they mostly don't. So then why should they do it? (Nkurunziza, interview 2012)

With this reply to his own question, Nkurunziza show how men whether they were raised by a good or a bad role model must know their own agency and ability to reflect upon what is rights. This is part of the OMC training. The challenge is not to repeat an example set by someone else, but to be able to stand up for and defend ones' own example of how to express masculinity regardless of expectations from society.

So, being an OMC man is for Nkurunziza about leading a better life for himself and with respect to his past, but equally important it has become part of something bigger: *"We need to create gender equality, get on the same level ground. That is the only way to fight HIV and violence. And we cannot address HIV and forget GBV. Or address GBV and forget HIV. They are both issues about our rights. We can't achieve one without the other"*, he concludes (interview, 2012). With this, Nkurunziza illustrates that the reason to work on GBV and HIV in the same movement is not only that one could lead to the other. More importantly, it is because the same solution applies to both, namely equal rights. In line with the argument by Edström, presented in chapter 4 where on politicizing masculinities, that alliances are needed to challenge aspects of patriarchal gender oppression, which have an impact on social justice, human rights and HIV (2011).

7.4 Aviwe Mtibe - One man can mobilize the youth

Aviwe Mtibe (24) is a young man with passion to influence his own generation of men and boys to be less violent than their forefathers: *“It is important to make sure what has happened back in history because of the patriarchy, will not happen again. Our mothers have been going on their knees for their men. Men were not appreciating, but punishing their women”* (interview, 2012). I discussed in chapter 4 that gender movements should engage men in conversation about the harms that norms of masculinity do to them. Mtibe exemplifies how gaining knowledge about the harms of misogyny can engage young men. *“We were boys growing up seeing that happening. We learned to believe it was a good thing. Now, with the knowledge and skills that I have, it has giving me the ability to see that we need to change”* he argues (interview, 2012). Mtibe joined Sonke's TCBCM Unit in September 2011, and now works at the Gugulethu clinic and as a One Man Can trainer. Before joining Sonke, he worked for the Treatment Action Campaign (TAC) from 2008 as a Men's Sector Coordinator and as a leader and spokesperson for the GBV Task Team.

The young activist grew up witnessing other men's violence. *“One of my neighbors who is ‘the man of the house’, each and every weekend when he gets drunk he will beat his partner and insult her saying, ‘you are the one who bring this thing of AIDS in my house, now look, my child has got AIDS because of you, and soon all of us in this house will die!’”*, he explains (Mtibe, 2012). At the point when he had heard enough, Mtibe contacted TAC, and immediately became a leader and started a Men's sector. They engaged with the neighbor and managed to bring about change in that house. *“That alone showed many young men out there that to be a man is not only to be known as one who has the power against women but a man who can speak for others and demand justice”*, Mtibe states proudly (2012). Importantly this positive focus on contributing for a better future inspires and leads to ownership of the movement. Like Cornwall suggested in chapter 4: “The growing interest in working with men to change the violent norms of ‘traditional’ or ‘conventional’ masculinity opens up for

mobilizing men to challenge their social, economic and political institutions that reproduce this violence from which they, too, suffer in so many ways” (2011:16).

Spring 2012, before I met Mtibe, he had travelled to New York and the UN Commission on the Status on Women (CSW) with Executive Director of Sonke, Dean Peacock. Together they held a presentation on how and why Sonke address men and boys to achieve gender justice. “*I feel very honored for being here as a young man who has been dealing with the issues of men and gender transformation*” Mtibe started (2012), before continuing with his own story about an absent father:

I came from the villages of the Eastern Cape in South Africa, where I was living with my grandmother at home with two elder brothers and one elder sister. My mother was in the farms by that time, working for the family. She was the one who was the breadwinner for the house, and my father was nowhere to be found. When my grandmother told me about my father she mentioned that my father saw me when I was only two months old and that was the last time he saw me, till when I was about to finish my Grade 12 when he came and said, ‘you know what, now you are old and now I am taking you to the initiation school where you will learn how to be a man.’ That’s when I met him, and he told me about how to be powerful. He told me that no woman should ever tell you what you must do and not to do. He said, ‘you are a man and you must be the head of everything and control women.’ Right after that I had gone through the initiation and traditional circumcision and I was a proud initiate, I left Eastern Cape and I again lost his contact. (Mtibe, 2012)

Further, he elaborates why he has done the job that he has done in TAC and in Sonke because of his experience of growing up without having a father, but also because of what his grandmother taught him:

My grandmother told me that if you want to live a long life respect comes first. And I looked at this in my society and found out that there are many women that are being disrespected by their partners, being raped, being killed, and I said to myself, you know what, I will strive for change. (...) I saw as important to go and talk to young men and boys about this. That's when I joined Sonke Gender Justice Network, where I work with young men and boys to promote gender transformation and women's rights, and where I'm engaging young men and boys to reduce and prevent GBV and training them on gender equality. (Mtibe, 2012)

After his speech at CSW, Mtibe had people coming up to him and say that 'this is what they wanted to hear'. The South African Health Minister was impressed to see that young men can try to make a change in the community and address these issues.

Mtibe explained to me that he is passionate to work with young men because he believes that they have an essential role to play and that they deserve to sit at the table and discuss the issues of gender equity and violence with their families, peers and community. "Also, gangsterism is an issue that we need to work with. I have had 'youth indaba' and I like to see that most of the youth participating are going back to school, listening to their parents, instead of joining gangs", he explains (interview, 2012). 'Indaba' is a Xhosa and Zulu word for a meeting to raise important issues. In the youth *indaba* Mtibe, not only focuses on the HIV and GBV issues, but also give the young boys other skills such as how to debate or speak in public. "Their behavior is improving in the direction that I want it to", he says (interview, 2012).

Mtibe uses his own background as a main source of inspiration as well as his most efficient tool to reach out to other young men and boys. "The most important thing in this work is to share your personal story. I don't want anyone to grow up without a father. I tell the young guys; if you are sexually active, please use a condom and remain faithful with one girlfriend that you trust. Not only focusing on HIV, but also on unwanted pregnancy. I ask; how is that going to make you feel, when you are still a child, not working and cannot provide for

that kid? That's why I am so passionate with working with men, young boys" (interview, 2012).

Mtibe not only exemplify that one man can turn negative experiences into opportunities to create change, but also that men and boys possess a key to understanding the underlying issues of masculinity. There seems to be little doubt that Mtibe has become a community leader. In addition to his Sonke job and duties at the Gugulethu clinic, he runs a CAT with 30 men in Gugulethu and in Khayelitsha, and he has initiated a youth *indaba* with 30 boys in the school. *"People are appreciative. Parents tell me 'thank you for being who you are', some parents are worried for their sons and daughters, others need a wakeup call"*, Mtibe can proudly say (interview, 2012). In his job for Sonke, he has also had to intervene to stop violence: *"I met a father beating up his son. If this father had met an intervention before, he would not do that. We intervened and said 'talk to your son and show him the way, if you want him not to take the drugs. By beating up your child you are pushing him away and not showing him love. Tell him that you love him. You are a father you must be a role model, even if you are out of work'. We need to change the attitudes and realize that men are also responsible for pregnancy"* (interview, 2012). Mtibe goes on with examples of successful interventions as well as couple trials on sexual violence, where he has supported the victim in the slow process of getting through the justice system. He is proud of all the interventions he has witnessed, that mark a step in a positive direction, but states clearly that: *"A lot that still needs to be done"*. Regarding his own life journey he states that: *"I don't know and don't look for the answer about my father. What I can do is to make sure I am growing myself"* (interview, 2012).

7.5 Gail Roman - mother in violent community

Gail Roman joined Sonke in October 2009 as the Operations Administrator. She started her career in the NGO sector in 1998 as an office assistant at the Resource Action Group. She has trained as an office administrator and completed a course in Human Resource Management. Roman is also a trained life skills facilitator. *"I*

work with human resources, and do not interact so much with the project sides of Sonke. However, we are to a certain extent up to date on the programs in the operations unit because we read through proposals written by the implementers” she explains (interview, 2012). Roman represents one of the many women who assist in the mobilization of men and boys, either in the administration at Sonke, at home, in the community or in other spaces. I have included her voice and show that even though Sonke politicizes masculinities, the vision is for men and women to support each other and achieve gender justice. Sanger and Nkosi are other women who make unique contributions, which I will get back to under.

Although she works with administration at the office, she brings the One Man Can principles home to conversations with her sons and nephews. *“Because I am raising a son I reflect a lot upon how we raise our kids according to gender”* (interview, 2012). This experience has given Roman the passion to contribute to an organization that works addressing men and boys, she reflects as follows: *“I think this work with men and boys gives a new perspective to the work already done by so many women’s organizations. We need to address the role of the men. There are so many challenges and the problems women face with HIV and violence continue to happen, even though we work with the women”* (interview, 2012).

At home, her strategy is to expect the same from her boy as the expectations she and other women face in daily life. Roman consistently makes it clear that every individual is responsible in his or her own life and this way perhaps also tries to teach her son about agency. *“I do raise my son to understand that the tasks you have do not depend on your gender. As long as you know how to pick up a brush and soap, you can wash. My son and nephews know that I will not pick up after them. They learn that they will need to do that for themselves and not expect of someone else to do it for them”*, she tells me (interview, 2012). In addition to taking away the meaning of gender in questions like ‘who can do dishes?’, she still makes it clear that boys particularly need to reflect upon how they treat women and girls. *“I teach my son to act respectful to the girls, not because they*

are girls, but because we are all human beings and equal in our rights. He is turning 14 and it is going to be even more challenging and interesting to see what happens when he becomes aware of the girls and all that” (interview, 2012).

She sounds like a confident and grounded mother, but Roman worries about her son not having a male role model at home or in the close family. His father died a few years ago, and Roman’s own father died around the same time. *“I believe they would have been good influences if they were around”*, she tells me (interview, 2012). Not that her son necessarily need one, but Roman worries because so many kids who feel the need to go and look for a role model find bad influence. *“Those are the issues we face. So many kids in Cape Town grow up without fathers. Either because they are dead or in jail, away working or they left the mother. And these kids might look for confirmation or belonging that they feel is missing in other places. There are many gangs and lots of young boys get involved with that”*, she states. To nuance her statement with regards to fathers who expose the mothers to violence, she adds: *“For some of the kids growing up without their father, it is better than how their lives would be if their fathers were there, but not for all”* (interview, 2012).

“Stories like Welcome’s are scary”, Roman says seriously (interview, 2012), witnessing how the staff members at Sonke are strengthened by learning from each other’s life experiences. To prevent her son from entering a life of crime, she says she *“talks openly about a lot of issues and teach him good values”* (interview, 2012). However, she remains realistic about the statistics in Cape Town and takes her precautions. *“All mothers want to see their children keep out of trouble and I can’t even imagine how I would feel if my son entered gangsterism and he was sent to jail. Knowing about the terrible conditions and how the boys live inside will suddenly change if they get raped in jail,”* Roman contemplates. And goes on: *“I talk to my son about these things and about the stories you hear for example about boys in jail. He thinks I am being ‘heavy’ and serious, but he may just think that. It is important for me to at least know I try my*

best and I am very open about these things. If my son does get into gangsterism at some point, he may at least look back and know 'this is not what I learned from my mother'" (interview, 2012).

On an even more serious note, Roman remarks that she also prepares her son of the eventuality that the both of them can become victims of violence if the gangs come to close. Again, her aim is to protect her son from him feeling guilty if they were to lose each other. She say: *"I tell my son that he must not worry about anything happening to me, if someone comes to hurts me that is just what can happen in this life. Sometimes life has its hard ways, but he must learn to handle that. I tell him this because you hear stories that boys get threatened if they don't participate in crime that their family members, for example mothers may get killed. Kids in our neighborhood know that this is real, because killings happen all the time"* (interview, 2012).

In the South African context, racism negatively affects health and race is often conceptualized as social class. Racial and class differences exist independently, but also operate synergistically, also with gender dynamics (Birn, 2009: 332). Roman, as most of my informants, experiences on a daily basis how race informs the community and culture they live in. In the colored township neighborhood Roman is from, no matter how much parents want to protect their children, violence is a part of life. *"In our neighborhoods we can witness stabbing or shooting every day. A colleague in Sonke came back from an intervention in a colored community one day, and told me he was traumatized from witnessing stabbing, but for me that's normal. I don't think it is as bad now as when I grew up. Maybe it is as much and just different, less knives are used now but more guns and drugs. It is more sophisticated"*, she utters and also explain one of the differences between colleagues at Sonke (interview, 2012).

Being exposed to violence on a daily basis definitely influences the way of life in a Township. *"I try to not let the kids run around outside and see those things too much, but then you don't want them to stay in and see too much TV either. They*

do all the violent stuff on TV as well. So, they do get exposed. With all that we teach our kids, we can still not know where they choose to search for influence. Or what may come their way. We can only try our best to equip them with our reflections and with skills. I talk to my son about the responsibility one has to take for oneself in the end”, she concludes (interview, 2012). As argued in the introduction, while politicizing masculinities and addressing structures in society, we should still hold those responsible accountable for the violence they exercise. Therefore, I found it very interesting that this was the main message Roman promoted to her son and other kids, *to take responsibility*. This way of thinking is clearly in line with the OMC principles that were laid out in the OMC manual: no one is safe until everyone is safe; violence is learned, it can be unlearned; and always promote victim safety and perpetrator accountability (Sonke, 2006).

7.6 Malwande Luzipho - Returning dad after three years

Malwande Sylvester Luzipho (31) works for Sonke as a trainer, implementing One Man Can activities in the Klipfontein district of Cape Town. He also runs weekend camps with the Men's Trust. From 2005 to 2010, he worked at TAC and was part of starting the ‘Positive Minded Men United’ (POMU) support groups. Working with men inspires Luzipho, because he wants to change men's mindset and the patriarchal system. “*Gender is about power in South Africa*”, he claims: “*It is a social phenomenon to hit women. Men have the view that they can do what they want, and men demonstrate that they are dominant when they use violence*” (interview, 2012). Silberschmidt (2011) argued that marches organized around AIDS-related issues have attracted sizeable support in South Africa, from men and women, black and white. Everyone agree that HIV and women’s rights seriously needs to be addressed, but men’s political role in the big picture has been ignored. At the same time, Sonke provide an alternative to a patriarchal society and to all the NGOs in South Africa that mobilize around HIV prevention, because of the comprehensive and inclusive approach on gender justice.

Although Luzipho affirms that he never used violence himself, he says that he grew up learning that it was normal: *“I am the second to youngest among my siblings, we are eight. My parents could not afford to raise all the kids and I moved to my uncle when I was 10, with the other two youngest. I was beaten a lot by my uncle and believed what he did was the right thing to do”* (interview, 2012). Experiencing this and witnessing the patriarchal system everywhere around him has inspired Luzipho. In addition, Luzipho has the wish to correct one of his own mistakes, one that he shares with many South African men, namely abandoning a child. *“In 2003 I ran from Easter Cape after I had impregnated a woman, because of fear of telling my father and the uncle I lived with. At the time I was running, I was confused. September 10th 2006, I went back to see my son, who was then three years old. I saw my mistake and wanted to do right. It was after hearing people in workshops calling their fathers animals that I decided to face my fears and take responsibility,”* he tells me (interview, 2012).

Luzipho always wanted a closer relationship with his own father, his role model, and realized that he could also become a better father himself. He explains: *“I don’t want to see my children grow up like we did and experience what we did. My father is a pastor. He is very supportive. He listened to me and told me to go see my son after I told him what I had done, and even gave me money to do it. My father is and would have been a good role model when I grew up, if he had been there”* (interview, 2012). His own experience of the revelation that he could face his fear and make a change for his own life as well as people around him, has given Luzipho his determination to awake other men. *“One Man Can touches on the issues of social norms and values. It reveals to the community the issues of date rape, homophobic rape, GBV, women relying financially on men leading to sex without condom. And that the lesson to ‘act like men’ comes with traumatic issues - kids are afraid of their fathers. My favorite part of OMC toolkit is to reveal these issues. I expand from the material and use my personal experience”*, he explains (interview, 2012).

Sonke works from a human rights framework to support men and boys in taking action to promote gender equality, prevent domestic and sexual violence, and reduce the spread and impact of HIV (Sonke, 2012). Revealing stereotypes about gender, masculinity and violence is Luzipho's favorite part in the OMC workshops. *"Gender-based violence, human rights and HIV and AIDS are our key focus areas in Sonke. When I do a workshop on violence I would dwell mostly on gender and sexual violence. And if I do it on HIV, I will dwell on sexual violence and the health issues with HIV. One issue is that young girls are vulnerable to older men. These guys know that they are HIV-positive, but have the mentality that if they make love to a virgin they get well"* (interview, 2012). Further he elaborates that HIV and violence are taboos even though it happens daily in the South African society. *"We are talking prevention every day in the health services and distribute condoms, but every day, new transmissions of HIV and other STIs happen. Same applies to violence"*, he says (interview, 2012).

One of the methods Sonke uses to raise people's awareness about this is to arrange loud discussions in public places and tries to get people involved. They call this ambush theater, Luzipho shared the following example: *"Sonke did an ambush theater in a taxi [slang for minivan bus], speaking on a condom message 'Unite as One', which also focused on the xenophobic issues. I acted the protesting role, saying I did not want to receive the condoms and said they were bringing HIV from their countries and taking our wives. There were people who supported what I was saying and other people who were opposing. This lasted 10-15 minutes before we said we were from Sonke and did this to raise awareness"* (interview, 2012).

When the guys from Sonke do this, they bring members from their CAT to help. If it happens in a big public space, they bring as many volunteers as they can to get reactions from the audience. Even though they do attract attention around the OMC themes, the main outcome of this exercise seems to be raising awareness about Sonke. Long-term follow up in communities is necessary in order to change attitudes and behavior. *"When we do ambush theater, we can hear people*

sharing that they have information that we would not expect them to know. People understand, but at the same time they continue to violate the things they know they should do - use protection and stop violence”, Luzipho remarks (interview, 2012).

Luzipho works at the Gugulethu clinic every week, both receiving the men who show up with inquiries and mobilizing men to stop by the clinic for check-ups or events. This effort is necessary because men traditionally pay less attention to their own health than women do. Luzipho assumes that men are not going to the clinic because: *“(1) they do not want to be attended by women, (2) it takes time to wait in line, and (3) it is far to get to the clinic” (interview, 2012).* Also, his experience is that the norm among South African men is to hesitate about having an HIV test. *“When it comes to HIV and men, it is about ignorance. They always associate HIV with women rather than men. The stereotype man can never see himself accepting being HIV-positive. He doesn’t want to take charge in taking care of his own health and preventing HIV. He will accept it only at the time he is very sick, but at the moment he is feeling strong he will say he does not have HIV”, Luzipho tells me (interview, 2012).*

When men do take the test, they might deny their own responsibility for their status: *“You will see that if a man is diagnosed with HIV, he will blame that on the wife or something. Men will never admit that they went out and had multiple partners, that it was their fault. They will point fingers at their partners. And they will not inform their other partners after they got the diagnosis. Instead they will continue to chase women and have sex with them. There are more women who tell their status, and they fear being blamed for unfaithfulness. The man will say that I am not HIV-positive, it is only you – the women – and he will never go to the clinic” (interview, 2012).*

This demonstrate an important point about the gender norm in relation to HIV status and testing, however I also find that it is a witness of yet a stereotype that one must be aware of. Namely, the blaming and shaming, as long as HIV is

linked to shame perhaps it stands in contrast to the masculine stereotype of a proud and strong man. Working with masculinities and addressing HIV stigma then, goes hand in hand. Luzipho clarifies Sonke's strategy to address the shame, as follows: *"In our activities we talk about men's health in general. Men have to stand up for their own health, so they can have healthy relationships and have a healthy life and preventing others from being HIV-positive"* (interview, 2012).

As mentioned, Luzipho and the other guys at the Gugulethu clinic also follow up Community Action Teams or CATs. Usually, they go to churches, schools, clinics, taxi ranks or football fields to recruit people. Luzipho has mobilized a CAT of 25 guys. He explains that one of the reasons he managed to mobilize so many men and boys, is their lack of employment. He clarifies: *"We have more men who are volunteers now compared to last year. Most come with the mentality of looking for work, some come with the mentality of making change. But most, even though they came looking for experience, we try to convince them that they can also take responsibility in the community. Many men say that they got their eyes opened though Sonke. They get an understanding of what needs to be done and they end up feeling the spirit of what we are doing as well"* (interview, 2012). From this one could learn that telling people 'they have to change' does not resonate with all even though some people are looking for help. On the other hand, creating platforms for people to come together with peers and get a diverse set of experiences, as well as showing up at spaces where the target group is already gathered, might get the message across.

Luzipho is optimistic about the future because he believes a change has already happened for the next generation and because he believes he can contribute: *"I want to see my children getting education and good jobs. I was not able to finish school due to having to help out at my uncle's farm, and I would get beaten if something went wrong. The generations before me were uneducated, traditional and used violence and discipline"* (interview, 2012). At the same time, Luzipho warns against the recruitment of youth into gangs and violent crime. *"Today more kids finish school, but now more youth get involved in crime"* (interview,

2012). The formers must be encouraged while the latter is a challenge the communities must address. This is linked to the high rates of unemployment faced even by educated youth.

7.7 Siyanda Maso - Dreaming of investment in youth

Siyanda Maso (29) knew Luzipho from before and is one of the members in Luzipho's CAT and one example of an unemployed young man in Gugulethu Township, who prefer to use his time to try and create change – he is an agent of change. *“Poverty, inequality - seeing and experiencing bad stuff makes me want to make a change instead of doing nothing. I want to go through a process of change. What I see as most important is youth, development and education”*, he proclaims (interview, 2012). Maso was recruited to Sonke in May 2012, than he mobilized friends to his own CAT in August the same year. *“We have had activities on teenage pregnancy, TB, drugs, parenting. In June I also joined another NGO called ‘Mzansi skills share’. I have been active in many organizations since 2008, TAC, Youth development council, Urban groves, Social justice coalition. I moved from TAC to Sonke because I wanted new challenges”*, he says (interview, 2012).

The Community Action Teams (CATs) are designed with the idea that it is important for Sonke to build on the lived experiences, as Colvin conveyed: *“The easiest way to change peoples’ attitudes and behavior is to work with them where they are, show them the better self that they could be”* (interview, 2012). A myriad of organizations are looking for volunteers to share knowledge in the communities about for example HIV. Maso chose Sonke because he believes in the message and because it challenges his peers. *“Men’s health is inspiring to work with because of the openness you experience when you talk to men. When I talk to a group of men I learn a lot and I experience that men tend to stay if there is a place to talk about health. Men don’t go to female HIV counseling or testing. Women have more knowledge on health because they share more with each other”* (interview, 2012).

He also believes violence is a big problem because of the situation many men face with unemployment and poverty, like himself. *“Violence often happens when men lose their job and some find it difficult to find a girlfriend without a job. You get respect based on what you have and often violence goes together with not feeling respected”* (interview, 2012). This is an issue Maso has seen and intervened with himself, he shares with me: *“GBV happens a lot in the township, especially in the weekends and around the Shebeens. I always try to intervene when friends beat up women. For example I had a fight with my aunts’ boyfriend. Men warm up and talk to us in CAT about their issues. It’s the issue of comfort, creating comfortable space, having talks and workshops with men. We talk about human rights”* (interview, 2012). Maso is optimistic: *“Ubuntu makes life easier, realizing that we depend on each other”* (interview, 2012).

7.8 Mkuseli Dlulane - To respect and be respected

Along with Maso, I met Mkuseli Dlulane (21) a few times at the Gugulethu clinic. Both are young and unemployed, but Dlulane phrased himself more pessimistically, saying: *“Our generation is lost already. We will die fighting for the youth”* (interview, 2012).

For Dlulane, the main inspiration to become a change agent through Sonke was to raise awareness among men about HIV. *“Men prefer not to know their HIV status. I see youth get tested more than adults. I often stand outside the clinic and talk to people walking by. I work on peoples’ conscience. For example, telling couples that it is not enough to trust the boyfriend or girlfriend, or not enough that one is tested. I love getting tested. I do it all the time, and it has worked for me so far. Better to know, there is nothing scary about that”,* he says (interview, 2012) and explains that the topic is very personal to him: *“My mom died of HIV when I was 11 years in 2001. That is why I get tested all the time. I wish more people were like me and took responsibility. Instead of the complaints and protests we see where people are busy burning tires in the streets. I know many*

people have similar experiences and worse than mine. Some never got to meet their mom, because they died during birth or something. Many tell me their stories because I open up to people” (interview, 2012). Dlulane lives with his grandmother and his dad lives with his new wife. All his four siblings grow up in different single parent households. *“Many young people do bad things because of an upbringing like that”*, he admits (interview, 2012).

Dlulane imagines that it would be easier to grow up as a girl and have a father, because girls tend to be protected by their father. His own relationship to his father was based on distance and respect, but he believes this is right for a man. *“If I have a son, I want to raise him the way my father raised me, be a role model to him and make him respect me and love me even though I don’t say it. I have great respect for my father, love him and care for him. If he comes into the room when I am drinking, I hide the drink just out of respect. I am not afraid of him”*, Dlulane reveals (interview, 2012). He feels he got an upbringing based on discipline and less emotional expressions.

When my mom was alive, from I was around seven years old I was slapped if I did something wrong. I knew I would get slapped if I got into trouble, but then my mom would set me down on her lap and explain why she had to do it and that she didn’t want to have to do it again. It was discipline, not abuse. I know some abuse their children as well, beat them to ill, and that is wrong. But a slap is just the way we raise children, and I believe it is right. You learn not to do wrong next time. They have an age where it stops, for me it was around 12. I didn’t get slapped a lot by my grandmother after my mother died. (Dlulane, interview 2012)

Men’s roles and identities are increasingly contradictory (Silberschmidt, 2011), and the masculine identity crisis needs to be politicized and seen in connection to women’s rights. Men’s authority has come under threat and so have their identity and sense of self-esteem. Above, I described how men who went through the One Man Can program changed their masculinity and how parents in Sonke try to teach kids a different expression of masculinity. However, Dlulane demonstrated to me how the debate is still alive within the organization, he was the first to tell me he admired traditional masculinity: *“I want people to see me in the streets*

and think 'he is the man', nothing can describe that sentence, it is the goal. To be respected for what I do and who I am, for being a man" (interview, 2012). I found it interesting that Dlulane fought so eagerly to improve women's position and at the same time wanted to identify as the one in charge to protect and decide over a household. In response to this, it is important to understanding men's sexuality in relation to the dynamics of economy, power relations, gender relations and other social structures as we were reminded by Silberschmidt above (2011). Again, this is why Sonke must continuously be informed by the realities on the ground through active involvement of the CATs.

It would be interesting to ask Dlulane a year later if he still agrees with his own statement. Anyway, what I learned from this is that it is important for Sonke to allow activists within the CATs to have different opinions and to take their time to contemplate on what changing masculinity means. This allows them to develop new perceptions in their own past and gain ownership of the movement. As mentioned above, to Dlulane it first and foremost meant encouraging men to be responsible about health. At the same time he did strike me as an openhearted and emotional man, who turns his anger into activism instead of using violence: *"I don't believe in the stereotype that men cannot cry. I cry. Except I have not been able to cry lately, since my mother died. After my mom died, I was not happy enough to play or to be around other people, so I keep to myself a lot. I had a lot of anger inside me, but now I don't complain. I want to contribute instead of being angry"* (interview, 2012).

"We see a lot of violence around us where we grow up", Dlulane states and tells me about the first time he experienced a friend dying, a 20 years-old who got shot at his own home (interview, 2012). An example that illustrates yet another reason for young men and boys to carry anger and fear in the townships, and one of many illustrations of the normalized violence in South Africa. Dlulane elaborates: *"He had gotten into a stupid fight with someone over a girl. And a few weeks later someone told his uncle that they wanted to kill the boy that night. The safest would be to keep him at home. So the uncle drove him around in the*

car the whole night, but they ran out of cash and when back quickly for the boy's wallet. The guys were there and he was shot three times” (interview, 2012).

Dlulane goes on to reflect on how this could happen and, as Wibooti and Roman talked about above, how this stems from a search of belonging. *“People end up fighting and killing each other for no reason. They don't even remember why. You have group leaders who end up not liking each other, and they might have 20 people behind them who then fight against each other, with no reason except their group belonging. People have been shot for walking into the wrong neighborhood”*, he exclaims and shakes his head (interview, 2012).

Further, Dlulaneg tells me that to him *“One Man Can means that men can change and be responsible”* (interview, 2012). He is sure that he will never beat a woman and neither will he get into a fight with a guy either. However, he shares that he has been provoked into fight and defended himself twice before. *“The first time I ended up in a fight where someone was beating my Muslim friend, Mustafa. I generally lie about the scar I got and say I fell, even though people say I should tell the story, that I was a hero. I think that is non-sense”* (interview, 2012). This statement is interesting, because Dlulane on the one hand has stated that he wants to be noticed on the street as a respectable man, but on the other hand he does not want to be associated with violence. It seems that respect is the keyword he is looking for, and respect to him is about being in control and avoiding confrontations.

He further elaborates how he envisions being a man in his own family: *“The man in the house always has the last to say in a decision. I also expect to have the last word in my household, although I respect women and will listen to my wife. Even though I will help out in the house, when we have visitors it would be expected that I sit down with them. It would look stupid if I walked around getting food and drinks for people. Right?”* (interview, 2012). However, on the question of violence, Dlulane clearly takes his stand. It is unacceptable to use violence against women. *“If my friends use violence against girls, I will confront them on that. It does not make sense. Like when a friend of mine says that his girl got*

slapped because she was speaking back to him, I will tell him “that is called a conversation”. Back in the days when I went to school, that was at least called a conversation. We were taught to listen and talk to each other” (interview, 2012).

7.9 Mzamo Sidelo - Change for the next generation

“I always have the hope of making life easier for those who come after us”, says Mzamo Sidelo (38) who is currently working for Sonke as a One Man Can project trainer, focusing on training peer educators recruited from social clubs in Guguletu and Nyanga. Before he joined Sonke in 2006, Sidelo was a youth counselor; he was involved in the facilitation of the Men’s Trust weekend camps and worked with the Mamelani Project as a youth at risk project coordinator. Sidelo is a founder member of HIV and AIDS Learners Network currently called Future Generation Network where he worked as a coordinator and facilitator from 2001 to 2006. Sidelo does his work with love and passion and believes in using his energy constructively in the development of communities. As all my informants, Sidelo has been shaped by racial divide and inequality in South Africa, one of the first thoughts he shares with me is that *“black South African kids have to grow up faster”* (interview, 2012).

Sidelo does not have formal, higher education (only elementary school). But even without the papers, he claims that he has enough experience for other people to come to him for advice. *“For example my friends who are teachers, always come to me”,* he says (interview, 2012), perhaps because of his vast experience of working with youth in the community. Education was dropped because of financial issues and instead Sidelo decided to work and support the family so his younger siblings could enter school. However, he says: *“I have this dream inside me to finish my education and get my degree, because I just feel like something is missing, even if it is not necessary for me to have”* (interview, 2012). Like Maso and Dlulane he started his engagement to work in communities, by becoming a volunteer.

“When I was out of work I volunteered my time, to keep myself busy, gain experience and knowledge. I worked voluntarily with young prisoners before, and only got a little stipend. Then I applied for the job in Sonke”, Sidelo explains (interview, 2012). He now works half time on the prison project and half time at the Gugulethu clinic. In addition to being a very passionate CAT leader, he elucidates: “I wish Sonke could invest more in support groups and the CAT and spend more time on them and invite external trainers. They should make sure they are really well capacitated to start making a change of their own. I love to see the growth and change in the guys. Even I have changed a lot since I started. I have gained experience in working with people from doing it” (interview, 2012).

On the one hand, this shows that Sonke does succeed in creating change agents, but at the same time that there is potential for improvement and more follow up over a longer period of time. This is in line with the argument promoted by Sonke the study claiming that the two values of engaging men and working systemically to scale up existing interventions therefore need to be combined as one holistic intervention. (Van den Berg et.al. 2012: 11) For Sidelo, the goal is clear: *“I want to see capacity building in those guys that I work with. I want to see them being able to go out in their community and be a change” (interview, 2012).*

Sidelo started talking about fighting HIV in his early twenties. *“At that time not many people wanted to hear it, but now it is more normal. More information and more activists are out there”, he says (interview, 2012). Today he talks a lot to his friends about the connections between HIV and violence against women. He emphasizes that violence comes in many forms including sexual, and encourages everyone to see the opportunity of change. “Men use violence against women, but also between men. However, what is learned can be unlearned. We try by all means to create awareness, create spaces for talking. One has to look at how we have created the monsters. The more stressed, the more we are depressed. This*

culture is also promoting men's promiscuous behavior. We must not allow abuse against women as a result of that" (interview, 2012).

Sidelo is inspired by the notion that he can share his passion and create more change agents, and this is what drives him and Sonke. *"What inspires me is making change and having an impact on individuals. We grew up with the same challenges and need to let youth be engaged and stop complaining. To make sure you push and drive yourself out of poverty it is the only way forward. Youth live on their mother's or grandmother's grants from the state these days. Change might not come in 50 years, but I think about what I am doing to promote that change"* (interview, 2012). Although young people are dependent on their elders and help from family members, Sidelo worries that the modern family is becoming individualized. *"My family was never gathered together around the dinner table, we all lived independently. Many kids grow up not seeing their parents much because they work a lot, and have to figure out their own issues. The parents may not have the time or resources to help. Community is supposed to take part in giving information to the kids about life, that is how it was traditionally, but society is becoming more individualistic"*, he remarks (interview, 2012).

Furthermore, he shares that he recently broke up with the mother of his 8 years-old daughter, and struggles with the feeling of being close but not present. Worried, he shared that many men in a similar situation chase their freedom: *"A lot of guys don't care, they would ask the women to please take care of the kid for them and never see them. Some of my friends in the same situation as well, they ask me 'don't you want freedom?', but I need to stay in my daughter's life"* (interview, 2012).

Sidelo lets me join one of his support group sessions for former offender, where ten men participated. They meet every other week at the Gugulethu clinic. The day I listened in, they had a discussion on having sex with teenage girls, regarding power relations in a relationship with someone younger. Most of the

guys participated in the discussion, took different positions and challenged each other, and in the end they all agreed that it is an issue of unbalanced power. *“As adults we must take responsibility to teach youth, for them to make good decisions -based on our life experience because we have been where they are and know how it is to want to experiment. If we see a chance to reach out to young men, do it. And act as an example”*, Sidelo told them (interview, 2012). I could observe that the support group was a space for the ex-criminals to be safe and to speak their mind with peers, and I was told that it is both a space for recovery and for inspiration to be a resource in their communities. Because I joined the last session before Christmas break, Sidelo left the group with the following words: *“There will be always be challenges, so you need to balance your life. Learn to know yourself. Find support in someone. Some of us will meet these festive season challenges, so we need to talk about it. Position ourselves”* (interview, 2012). After the support group Sidelo told me:

Those guys love the group and say they wish they could come every week. I love it to, but it is important to me that they own the space. They need to get respect and then they give me respect back. Some of them were never allowed an opportunity like this to come and talk about the issues they experience in daily life. And the community views them as criminals. We felt it was important to start a group like this because the work we do in prison is something very different. That is about the life people experience in there, about protecting themselves in prison. (Sidelo, interview 2012)

7.10 Cherith Sanger - experienced violence for 2 years

Cherith Sanger today appears as a strong human rights' advocate, but she also carries personal experience with violence and talks openly about her background.

The personal is political for me. I found myself in a physically abusive relationship from age 18 to 20 and ended up in hospital having to undergo an operation on my breast to have an abscess removed which developed due to an injury to my breast. I was ashamed to talk about it because I grew up in a politically conscious home and was fully aware my rights and the gender issues with domestic violence. I now understand that violence was perpetrated against me precisely because I am extremely opinionated and questioned issues and the abuser's behavior in various circumstances. It was a very complex situation at the time as my family was experiencing difficulties. We were all recovering from my parents' divorce and my father's business having gone bankrupt. I grew up in an impoverished colored and urban area known as Mitchell's Plain community. There were gangs in the neighborhood. They stole and took drugs. I never experienced direct violence at the hands of these gangsters. (Sanger, interview 2012)

Sanger is a lawyer, with a specialization in gender, health and human rights. She was admitted as an attorney in 2007 and worked among other places for the Women's Legal Centre from 2008, providing legal advice to indigent women in the areas of GBV, labor and land law. Sanger has written publications aimed at informing women of their constitutional and other legal rights on housing and evictions, sexual offences and LGBTI rights against discrimination and has conducted training sessions on these topics. Since July 2012, Sanger has been the Policy Development and Advocacy Manager in Sonke's Policy Development and Advocacy Unit. She conducts legal and policy advocacy for gender transformation and women's rights, including advocacy for the integration of work with men and boys into law and policy and for the implementation of such laws and policies. "The whole organization does research and I do legal research, analyze the laws and policies and identify where the gap is. We advocate for what the law should be, for example we make inputs to Parliament", she explains. Also she says: "There are several systemic failures in our criminal justice system. The utopia is that all is equal, but not all people have equal access to the criminal justice system in South Africa due to being economically disempowered" (interview, 2012). Sanger is proud of her work place: "Sonke is unique to the extent that it has created a space for open and

robust dialogue on sensitive political issues. Both among the staff and in the work Sonke does” (interview, 2012).

Sanger conveys that Sonke lobbies the state to support and roll out programs and initiatives aimed at working with men and boys, because of the impact it has on women and society at broad including in relation to health outcomes. They monitor the existing responsibilities of the state, such as the performance of the Commission for Gender Equality, and advocate for obligation or policy commitment to be placed on the state, the private sector and individuals. *”For example, under the prisons advocacy project, we lobby the Department of Correctional Services on improving conditions in prisons that manifest the spread of HIV and AIDS and sexual violence in correctional centers”*, she says (interview, 2012). Sometimes, this work involves holding people in positions of power accountable for their actions and public statements, which sends out the harmful gender messages to the public. *”For example, we raised public awareness in the media about the problems with statements that Malema (then ANC Youth League President) made around how rape victims should respond to rape”* Sanger explains (interview, 2012).

Sonke is one of the two or three organizations in South Africa that advocate around masculinities Sanger remarks. However, they also work with women because the two are inseparable. *“Preventative work involves identifying and addressing the root causes of gender inequality. In the case of violence against women, we need to understand why men commit violence against women”*, she argues (interview, 2012). Sadly, she believes the reality for many South African women is that it is hard not to experience gender-based violence. In a study from 2009, it was found that 25 per cent of men admitted having raped a woman and between ½ and ¼ of women experience some kind of violence in their lives - and that *”therefore there is a need to change men’s conduct and to talk about this”*. Further, Sanger states: *“We need more prevention-based efforts informed by a feminist framework to succeed with shifting men’s attitudes”* (interview, 2012).

Feminism shapes her inspiration for working with men: *“I identify as a feminist and live my life as a feminist. Part of my feminist ideology is to work with men for change. Men don’t only have a responsibility not to commit acts of gender inequality but also have a duty to support women in the plight for gender equality. Besides, gender equality will benefit men too”* (interview, 2012).

In her previous career, Sanger worked with radical feminists, and she describes the experience of coming to Sonke as been a change because they: *“take more of a ‘gender equality’ approach which can mean different things depending on how and why the work is being done”* (interview, 2012). Colleagues in other organizations challenge her about this sometimes, *“I have to defend the work with men and boys”*, she says and goes on: *”Some feminist and women’s organizations view work with men as a threat to women’s rights work particularly in relation to the funding that men and boys work has received. I however see it as an extension of my gender work”* (interview, 2012). In this debate, Sanger experience that there is often a confusion about what work with men and boys is about, but she is clear about one thing: *”What it certainly is not about, is men’s rights over women’s rights. It is about gender equality and women’s equality in relation to men”* (interview, 2012).

Coming back to her own experience and inspiration to do this work, Sanger says: *“My reasons for doing the work is partly because of my experiences of domestic violence but I would probably have been doing this work anyway, because we have always talked about human rights and racism in my family”* (interview, 2012). Not only did she know her rights, Sanger has also long been an activist: *“In my mid to late teenage years and early twenties involved much discussion about gender and women as my older sister who now holds two post-docs in gender studies introduced me to gender studies content. Growing up, I even provoked kids at school when pointing out the use of derogatory language and discriminatory treatment of each other, and particularly ‘Black’ (African) children”*, she conveys (interview, 2012). The fact that Sanger experienced a violent relationship despite this background, demonstrates how knowledge and

‘empowerment’ of women may have limited effects in violence prevention. No matter how informed they are, women might still be assaulted and violated, and then feel stigmatized.

Sanger makes it clear that she does not speak on behalf of all women. *“The experience and impact of violence differs for different women, though, based on our social status and standing and where we find ourselves in terms of race, sexual orientation and gender identity, class, education etc.”* (interview, 2012). In South Africa especially, but probably everywhere, one needs to understand that gender expression, sexuality and violence is just as complex as the society as a whole. There is no ‘one size fits all’ solution and one must accept diversity.

The experience of violence is socially and culturally dependent and complex. For some a question around reporting rape is ‘Will I be stigmatized in my community because I have been raped?’ Poverty, lack of employment and the lack of education is a contributing factor. Child abuse in family is also not reported. For example, a child might be abused by the stepfather who the mother is economically dependent on and the child might be led to believe it is her or his own fault and the parents might have been exposed to child abuse themselves. (Sanger, interview 2012)

Sanger continues to reflect on how South Africa came to find itself in a position with more violence and HIV than other countries. *“We don’t know for sure whether gender roles and norms and patriarchy were as harmful to women as they are now prior to colonization, but I am sure colonization and apartheid had an impact on gender and violence in our society”* she says (interview, 2012).

Black Africans were enslaved in their own country, and according to Sanger that had severe consequences. *“Peoples’ dignity and integrity was taken away and it has an impact when that happens within a country. Violence becomes the order of the day in terms of dealing with conflict and asserting power over others”* she conveys (interview, 2012). With this quote and with her own experience of violence despite all her knowledge, Sanger illustrates Cornwall’s point that we should see power as a structural relation and be critical to the use of empowerment as a tool to address gender inequality (2011). Investments to

address gender, GBV and HIV should not be made without consideration of the broader social changes that need to take place. The embrace of gender accompanied by a tendency to play down challenges to the status quo and play up the benefits of instrumentalizing women in the service of development, has proven problematic (Cornwall, 2011) and therefore we must create spaces for men to participate in the gender justice movement.

7.11 Zinhle Nkosi – We must create a space for men

Zinhle Nkosi joined Sonke in October 2012 as the Monitoring and Evaluation (M&E) officer, to focus on strengthening M&E processes, data quality management, data dissemination and data use. She has experience from a number of key organizational functions, including research, setting up of M&E processes, conducting routine data quality assessments, resource center development, training, community mobilization, data management, networking and partnerships. She gained her experience from working with the Centre for AIDS Development Research and Evaluation (CADRE), LifeLine Southern Africa and Grassroot Soccer South Africa. In addition, she has studied psychology and anthropology.

Nkosi is working on monitoring and evaluation and explains that: *“At the moment Sonke does ‘knowledge and attitudes monitoring’. We have no control group yet, but we aim to strengthen our own facilitators and for casual knowledge the monitoring. This is not random sampling, but we deal with the people who come to workshops”* (interview, 2012). Based on previous experience, Nkosi works to improve Sonke’s system for capturing this information about results of their work. She goes on to say that: *“We are now building a new system, have more resources on M&E and have become more professional. We are starting to create the M&E culture. Once people are used to submitting data, I will start to ask questions we still need to follow up”* (interview, 2012). There is lot of transition in the organization, and there is now more resources and staff to do M&E. For Nkosi, this is important. *“The*

possibility of evaluation excites me and I need people to see that also”, she states (interview, 2012). The data is used in different ways. “For me it is a need for internal use and to invite our facilitators to be inspired and for us to improve”. She adds that: “We also share data with donors, during conferences or interactions with communities, for example on the local structures and HIV councils. We can use that conversation to share the need of the communities” (interview, 2012).

Nkosi hopes that more knowledge will be developed in this field and that the debate to politicize masculinities will live on:

I personally need someone to go and do research that includes the psychological perspective. We lack an understanding of the emotions. People in general act and react because of feelings they hold inside, that is also true with acting in violent ways. Men keep their emotions inside, every day, trying to be strong and no one cares! They work with helping the women. For me it is important to understand the men. (Nkosi, interview 2012)

Nkosi is eager to make a change within the area of gender and violence, she says: *“I could be working with perpetrators and survivors, but I went to the prevention side with working in Sonke” (interview, 2012). Her interest for working with men grew when she worked on a research proposal ‘Caring men in culture’ for Mark AIDS Leadership Fund Fellowship, focusing on men. Understanding masculinity is a personal and important topic for Nkosi. “It is a part of me in life to try to understand these issues in a space where men are comfortable to share. We should create those spaces, times are changing!” she states (interview, 2012). Nkosi is worried that not all young men are able to get jobs or get love. She asks: “How do we deal with men’s emotions? They are dealing with anger, which can come out violently” (interview, 2012).*

In addition to creating the spaces to understand men’s challenges, Nkosi suggests that: *“We must talk about what men don’t want to talk about. For example some men only use sex as punishment to their wives, if they are unhappy about something, instead of using it as pleasure. And some gang-rape to make a woman*

feel degraded, for example after she has cheated” (interview, 2012). According to Nkosi, like Cornwall (2011), gender equality is influenced by culture and patriarchy. “For example the belief that being a man you can have multiple sexual partners is obviously influenced by those who have cultural power, decision power, and economic power” she says (interview, 2012). This is where Sonke intervenes to change the perceptions. As Nkosi points out two four-days workshops are not enough, “we are talking about socialization, talking to someone about their way of living. It is good that Sonke also has all the advocacy work for example over radio” (interview, 2012).

Also in her personal time Nkosi acts as an agent of change: *“I tell my male friends it is ok, give them a free space to let out feelings. It is about what is in our hearts and soul, which informs our head and mindset. As human beings we are first of all hearts and souls” (interview, 2012). Zinzhle is worried that the lack of spaces for men to express feelings and pose concerns about sexuality not only affects men, but entire societies. HIV prevention efforts have focused on sexual behavior patterns and women’s ability to negotiate safe sex instead of focusing on men’s abilities to make informed choices. The underlying reasons for men to be ‘the driving force’ have not been fully understood. To counter this development, Nkosi hopes to be a role model for friends and to raise a role model: “I have a son who is four and I want him to become a man who knows he can and should be emotional. I also tell him to be true to who he is, fulfill what he wants to be. Not let anyone put boundaries on him or what he wants to achieve, but move forward” (interview, 2012).*

7.12 Papy Molembe - I am the first man in my daughters’ life

Papy Molembe is originally from DRC. In 2009 he came to South Africa and had his first encounter with Sonke as a CAT member. He is a father of two, a 3 year-old daughter, and a son who is two months old. I want him to have the honor of rounding off this chapter, because he offers such a warm and inspiring way of

summing up what it means to be a One Man Can. Molembe conveys: *“I am the first man in my daughters’ life. So, if she feels love, she will open up enough in society in order not to be scared of masculinity. A girl will identify as a woman if her dad looks at her and love her like he does her mother. The most important value to give her is love”* (interview, 2012). This quote talks about letting go of the stereotype, patriarchal masculine pride and put love and caring first. Then, if women and girls feel loved and safe, that gives a good reason for a man to be proud. In line with how Cornwall encouraged us to envision “a world of equitable social relations in which masculinities and femininities are points of gender identification available to all” (2011:16), this shows that men can learn not to be afraid to be caregivers on an emotional level.

Molembe was trained as a peer educator and has been employed in Sonke since 2010, first as Refugee Health and Rights peer educator and then as a RHR program trainer. At the university in DRC, Molembe gained experience in human rights issues as an active member of ACADEMIA and Organization World Religion Union. Molembe holds a Bachelor of Education from the university in DRC and is currently working towards completing a post-graduate diploma in Career Counseling. I first got to know Molembe at an event, where he talked in the breaks about why he decided to continue working with Sonke and made the comment *“When you talk to people about these issues, you also question your own behavior”*. He struck me as a reflected One Man Can, hungry for change in his own and other people’s lives. During our interview, I asked him again about how he reflects upon being part of Sonke, and he answered: *“It is challenging to go deeper and understand the roots of the ideas and values that friends, family, society has given me. But asking questions around that opens up a space for reflection, it questions the ideas in someone’s mind”* (interview, 2012).

Asking questions is also what drives Molembe’s workshops with other men and women. He explained his experience of facilitating the OMC method as follows: *“We create a space for both women and men to talk about the issues that affect them. I like the space and the debates. Especially when participants feel like they*

don't want to go, they want to continue to talk and deepen into the topics. You listen to what people say to understand why people understand the male-female relation in this way, and why they behave the way they do" (interview, 2012).

This shows that the focus on relation between the genders is essential for Sonke.

Regarding violence against women, Molembe elucidates that: *"It is likely that a man who used violence against his partner is a drug or alcohol abuser, that he has multiple partners and uses his power over his wife"* (interview, 2012). This lack of balance in the relationships between men and women also applies to the risk of being infected by HIV. *"It is likely that men will not agree to use condom. For women to negotiate the use of condoms is difficult. It puts women in a difficult situation, if they don't know their status"*, Molembe says (interview, 2012).

Another important part of the thinking in OMC is, as Molembe precisely formulates it that: *"The social institution anchor gender inequality"*. Further he elaborates: *"My view is that in workplaces women are more often harassed. In the clinics there are more women coming for services. In the police, army and parliament most are men. So, working for gender justice in the community is my favorite topic to facilitate. It is also where the participants can talk longer"* (interview, 2012). These differences have created a distance between men and women it seems, Molembe talked about the problem with how society teaches gender roles and he proposed to rather act in line with everyone being a human being. *"Most men will tell you I have learned I must be a man. Women say they learned to be submissive. We should look at each other as equal human beings, having the same rights"*, he says (interview, 2012).

"Xhenophobia is also everywhere", Molembe remarks. This creates yet another division among people in South Africa. He can explain where it comes from: *"There are two reasons for it in South Africa, first economy and business opportunities and the second is the community leaders, who push the young people to do what they do - beat women, attack foreigners, break shops"*

(interview, 2012). He adds: *“When I was in DRC I had heard about refugees, but I didn’t know how it was to be one before I became a refugee myself”* (interview, 2012).

Molembe is concerned about the consequences of this hostility and calls for the different ethnicities to also work together: *“I think the issues with men, women’s empowerment, HIV and TB is the same, it can affect you as long as you are human, so cut across whether you are Congolese, Zulu, Xhosa”* (interview, 2012). On the other hand, Molembe shared his observation of a difference from DRC: that in South Africa everyone talks about their mothers and not their fathers, because of the absent fathers. *“In DRC the ones who grew up without their father, but knew him, will talk about him. They would have an emptiness inside because they didn’t know their father”*, he says (interview, 2012). This explains the particular situation in South Africa with reduced expectations to men as fathers, and shows a lack of openness around the longing many carry to belong.

Regarding his motivation to be a Sonke trainer, Molembe says that he likes to learn from others and express his own views. As a true change agent he says:

I like the Monday meetings in Sonke when I come and learn something new. And I am also motivated to facilitate topics because people are going to be talking and have constructive discussions on the topics. Also, when I talk I will change my perceptions and get inspired. This makes me understand how the world looks for other people, issues that they know in their ways. Then I can explain them in the context I know. It inspires me.
(Molembe, interview 2012)

As a facilitator Molembe doesn’t try to lead, but to give the floor to other people and to ask questions. Though it takes time to make a change, this seems to be the way to inspire new agents of change. He remarks that: *“You can see that they understand, but their behavior change takes long. Once there is a new participant the others will challenge the new one, but they will still have some misconceptions”* (interview, 2012). Molembe believes in change and concludes with the following: *“There is still a lot of work to do, and gender work concerns*

everyone. There is a possibility that we can create just communities, families and work places if both men and women participate” (interview, 2012).

7.13 OMC agents for gender justice

The aim of politicizing masculinities is to contribute to shifting the gender agenda back to a concern with the fundamental structural inequities, and to contextualize the internal aspects of masculinity with sociopolitical power structures (Cornwall, 2011). Therefore, my interest has been to understand the individual OMC change agents’ personal motivation and their ownership of Sonke. This chapter has shown how Sonke staff and peer educators find inspiration to bring the movement for gender justice forward. They all emphasize their wish to be role models and teach other what they have learned from being challenged by the OMC campaign to look themselves in the mirror and redefine their gender role in relation to health and human rights in society. Molembe found it challenging to understand the roots of values he has learned in society, but as he explained above: *“Asking questions around that opens up a space for reflection”*. A space, I will argue, which is needed to counter historical and cultural heritage.

Understanding the contexts the OMC change agents’ came from and how they arrived in Sonke has revealed how historical, cultural, structural and socio-economic factors play a part in how people express their gender role. Many of my informants first encountered Sonke as workshop participants, where a space has been created for them to talk about the issues that affect them, their communities and their country. Because of this and due to the office environment at Sonke where colleagues continuously challenge each other, they have all changed into gender conscious role models. Some changed dramatically, coming from a violent background, others changed their activism from traditional NGO efforts of ‘empowering’ women or people living with HIV, to embracing Sonke’s holistic “Spectrum of Change” approach and addressing the underlying issues of GBV and HIV. As argued by Cornwall above, the gender agenda became

stripped of the original concern with inequitable power relations and reduced to interventions that were not genuinely transformative, as it was taken up by development agencies (Cornwall, 2011). Exactly with the intention to counter this, Sonke encourages men to take active stands against domestic and sexual violence and to changing gender norms (2012).

Wibooti and others along with him explain that the aim is to inspire transformation by representing the change they want to see. *“I believe you have to open up entirely and represent what you have lived. Become the ‘me’ other people will want to identify with”*, Wibooti explained above (interview, 2012). As peer educators, they encourage peoples’ agency and develop new leaders based on the resources they have in personal experiences. As opposed to teaching and ‘empowering’ men and boys to behave less risky, this approach demonstrate respect for everyone’s potential to act as positive agents of change for gender equality. This is achieved through building on values of promoting the rights of women and girls; helping boys and men to see the benefits of transforming gender norms; including and responding to diversities among men; exploring ways to transform gender relations by engaging both women and men; and addressing structural and social determinants of gender inequality (Sonke Capacity Statement, 2012: 7).

Colvin, uttered: *“What is valuable with OMC is that they get people to reflect on masculinity, what they can change in their own lives, and to be invested in that process. When the members of a CAT say that it is their personal process as much as it is Sonke’s’, it becomes more than making them recipients”* (interview, 2012). The pride my informants from Sonke demonstrate both in what they do and with regards to the journey that life have taken them, seems to resonate in the communities they work with. Through building on the fulfilling experience of pride about departing from traditional gender norms and *‘transcending into a gender-equal platform’* (Wibooti, interview 2012), OMC successfully mobilize new agents of change. Stigmatized as the issues of GBV and HIV are, such positive approach makes it easier for people to come forward, share their views

and worries and contribute to the discourse around changing structures in their communities.

Sonke is only one of many organizations in South Africa that addresses the issues of gender, HIV and violence, but as mentioned it is quite unique for its holistic approach to these topics and for the focus on masculinities and engaging men. As this chapter has shown, many of my informants had a background from other NGOs and most started out engaging with issues around HIV. From my point of view it seems that they were drawn to start working for Sonke (or be engaged in Sonke and other NGOs at coincidentally) because Sonke addresses the underlying causes for power-inequity in gender, GBV and HIV. They also offer the opportunity to reflect upon men's role in challenging the sociopolitical power structures. So, in some ways Sonke differs from NGOs with focus on the 'victims' of GBV and HIV. The case of HIV has unfortunately become a vicious circle of victim blaming, but Sonke gets attention by rather focus on positive role modeling. Because of this, they also manage to gain fruitful partnerships with a diversity of NGOs that strive for social justice in other areas than masculinity. Some of my informants were familiar with creating agency for justice from the movement for HIV treatment (Treatment Action Campaign). Perhaps that is why they were attracted to work with Sonke rather than other HIV or gender justice movements, when they transitioned from focusing on treatment to prevention.

8. Conclusion

“The first time I met the OMC team, in 2006, was the first time I felt I got in touch with myself as a man”, Wibooti states proudly before he continues:

First I thought it was just another program, but when I participated in the workshop I realized what it means to be a man. I thought providing was putting food on the table, but OMC told me that providing was supporting, caring, being compassionate etc. Me, being very aggressive against women - they were just objects that I could use as I liked - I thought women should be submissive to me. That was how to be a man and to own the domain. OMC taught me that this was a form of emotional violence, which I wasn't aware of. This is how I learned to change. It was a difficult process to learn how I could let women have a place in my life where they could also be free. The OMC program was a journey of transcending to a gender-equal platform. (Wibooti, interview 2012)

In this thesis I have argued the involvement of men and boys' matters in addressing GBV and HIV in South Africa. It is not enough to address men only with messages about their individual responsibilities. Masculinities must be contextualized, and Sonke's 'spectrum of change' contributes with an example of how to politicize masculinities in practice. We must move beyond viewing men as perpetrators and unfaithful partners, and politicize masculine gender norms in their own rights. We need to recognize that men are key agents in engaging their communities for change. In order to encourage men to reverse violent and risky behavior, society and especially their peers must deliver the message to men that masculine transition is wanted and supported. As Colvin expressed it: *“You may wish the world was different, but you can't shame or educate the problem away”* (interview, 2012).

8.1 Lessons learnt from Sonke Gender Justice Network

In conclusion to the main research question for this thesis, *What can be learned from Sonke Gender Justice Network in South Africa and the method they have developed for changing masculinities in order to achieve gender justice, prevent*

gender-based violence and prevent HIV? I will argue that there are five main lessons to be learnt from Sonke's method in order to change masculinities and achieve gender justice, prevent GBV and HIV. They are as follows: having a bottom-up approach informed by local experiences; developing ownership and agency for change in peer educators; strategic implementing with community peers as trainers; promoting positive messages and alternative masculinities; and having a holistic approach where experiences from communities inform research and policy advocacy. In the following, I will discuss how Sonke achieves these four elements through contextualizing gender in sociopolitical power structures and developing agents of change, by referring to what was presented in chapters 6 and 7. Then I turn to how they communicate with communities, policy makers and NGOs in a better way than typical approaches that were presented in chapter 5. Finally, I argue how Sonke's work can be understood within the theoretical framework of politicizing masculinities that was presented in chapter 4.

8.2 Contextualization, peer education and ownership

Sonke invites men to share their own experiences, build peer leaders and provide alternative masculinities based on experience and local knowledge. They stress that critical debate around interventions directed toward men and boys is needed. As Edström (2011) argues, the literature on gender roles has been too descriptive and not able to reflect on alternatives. So, contextualizing people's experience and building strategies for creating sustainable change both in individual lives and in community structures that shape their lives is one way of politicizing gender. Peer education allows participants to gain ownership of the movement they are a part of, in order to develop new agents of change and to move OMC forward. My informants, many of whom first encountered Sonke as workshop participants conducted by peer educators, developed such ownership and now work full time with OMC. As Wibooti, Dlulane and Roman mention, one reason for youth to be attracted to gangsterism is their search for belonging. In order to create change, peer educators must belong and own their transformations and the

project they work for. Motivation and optimism are the key elements in Sonke's model.

By allowing men to regain power over their own lives and become the change they want to see, Sonke help men to gain ownership and to experience that they can be a resource rather than a perpetrator. As Sidelo explained, one must not allow abuse against women to be a result either of men's stress and depression or their motivation to fulfill cultural expectations of being strong men. "*Gender is about power in South Africa (...) and men demonstrate that they are dominant when they use violence*", Luzipho claimed. Similarly, as Maso explained, violence often goes together with not feeling respected. So, there needs to be alternative ways of gaining respect and alternative role models. As Luzipho nicely phrased it, Sonke's interventions are about men standing up for themselves and their own health in order to have healthy relationships and a healthy life. This will benefit the rest of society. Roman explained that work with men and boys gives new perspectives to the work already done by so many women's organizations. "*We need to address the role of the men. The problems women face with HIV and violence continue to happen, even though we work with the women*". To sum up, is it possible to engage men for gender justice? The recipe is quite simple: "*We need to create a platform for men to come together and talk, a platform for those of us who share the experience of violence*", as was argued by Nkurunziza. And these platforms can successfully be guided by peers with an understanding of the situation in the community they are working in.

8.3 Linking the perspective of communities and NGOs

In chapter 5, I highlighted how gender analysis in HIV programming characteristically emphasize how inequalities constrain women's ability to protect themselves and how men's social roles increases women's risk of HIV infection. This is a blame game with no fruitful outcome. The main consequence of such individualizing in gender analysis is that people remain in roles defined by society, in a sense both men and women become vulnerable as stereotypic

gender expectations continue. Sonke and the OMC campaign, on the other hand, manage to promote a personal sense of responsibility while at the same time addressing structural barriers in communities. The language used in the OMC manual and research material by Sonke, is easily understandable to the grass-root. However, it manages to speak to NGOs at the same time, through the OMC manual based on a framework for social change, the Sonke Spectrum of Change, and through documenting effects in their research and policy statements.

Sonke provides an example of an organization that has managed to combine working in collaboration with other NGOs, politicians and researchers, while remaining a close partner with the grass-root activists in communities. Sonke achieves their results by investing in a bottom-up approach, rather than educating communities to avoid risky behavior. Human resources drawn from experience are crucial in order to achieve change. In this way, Sonke has managed to accomplish what Morrell asked for, namely that more attention could be given to how men might promote gender equality in ways that assist women (2011), rather than pointing at men as the problem with explanations linking GBV and HIV (c.f. as figure 2).

8.4 Politicizing masculinities for change

As pointed to by Edström, gender analysis in the literature has been informed by the stereotype that women are vulnerable and men are aggressive, rather than addressing the underlying causes for these roles (2011). I have argued in this thesis that Sonke succeeded to counter exactly that with their framework, the spectrum of change. I have argued that the way HIV has been handled previously has contributed to an individualizing and victimizing way of handling gender. Individuals are blamed for violence, vulnerability and risky behavior. Edström proclaims that the problem with using vulnerability in dealing with masculinities in HIV is that it forces the analysis back to individuals at the expense of power relations, structures and dynamics beyond the personal (2011). As demonstrated by the experiences of Sonke staff members and volunteers, focusing on power

and inequality and the agency individual men have or gain within the structures in society reveals the possibility of moving beyond vulnerability and instead create agents of change. In this way, masculinities become politicized and handled within a debate about changing societal norms and structures, rather than victimizing individuals.

As pointed out by Cornwall: “The aim is to contribute to shifting the gender agenda back to a concern with the fundamental structural inequities” (2011:2). In other words, within the framework of politicizing masculinities, internal aspects of masculinity are contextualized with sociopolitical power structures (Cornwall, 2011). This is necessary, because as argued, men’s roles and identities are increasingly contradictory (Silberschmidt, 2011). The masculine identity crisis described by Silberschmidt needs to be politicized and seen in connection to women’s rights. Importantly, NGO programs on gender equality must incorporate the discussions around how gender is relational (Edström, 2011). Gender identity is not about the individual, but is related to the dynamics of economy, power relations, gender relations and other social structures (Silberschmidt, 2011).

Politicizing masculinity in South Africa also intersects with redressing discrimination and inequity. I will conclude by arguing that OMC peer educators contribute by creating solidarity among men and spaces for them to share experiences and developing ideas for change. Importantly, a lesson to take away from Sonke’s work with the OMC campaign is that they managed to create the necessary agency from participants through convincing them that the experience from the grass-root is essential for Sonke’s goal and vision. Creating ownership and continuously debating what works and not, is perhaps more essential than being guided by a scientific model of who are victims and who are to be blamed. Sonke believe that it is people like Wibootei that can create a change in masculinity. Even though that only represents part of the solution, it is a very important acknowledgement. Wibootei and his peers definitely seem to be capable of making some mountains move. As argued, I found that the comprehensive

approach where Sonke combines research and a diverse set of activities are important to their success. However, I will conclude that the peer educators who become agents of change make up the corner stone in their work for gender justice, because they are the ones driving the transformation forward.

8.5 Summing up

I have argued that the following are main lessons to take away from Sonke:

1. having a bottom-up approach informed by local experiences;
2. developing ownership and agency for change in peer educators;
3. strategic implementing with community peers as trainers;
4. promoting positive messages and alternative masculinities;
5. having a holistic approach where experiences from communities inform research and policy advocacy.

Based on my interviews and observations in Cape Town, I will conclude that these were important explanations for how men and boys within Sonke could find inspiration and motivation to address GBV and HIV. Through this thesis I have also shown that transformation of masculinity through behavior change among men supplement the promotion of women's rights in the fight for gender justice, because men represent a key resource for changing gender relations and power structures. For one, because men can discover new ways to express masculinity, decide not to tolerate oppression of women in their own lives, and refuse to be 'victimized' as trapped in poverty, unable to meet the expectations of being the family provider. And secondly because the movement for gender justice obviously will grow and stand stronger when both men and women align in fight for equality. Human rights and better health for all can be a common goal, rather than working parallel with separate strategic gender interests or practical gender needs (c.f. as in the previous WID and GAD approaches).

The Spectrum of Change identified mutually reinforcing social change strategies that move beyond an exclusive reliance on individual change to additionally

promote changes at the social, political and economic levels of people's lives (Van den Berg et.al., 2012). Hopefully, the successes Sonke are experiencing in mobilizing more and more men and boys, producing and publishing material and research that demonstrate change in individuals, communities and sociopolitical power structures, will inspire further attention on politicizing masculinities. Hopefully, the OMC change agents will continue to inspire and gain increased implications for further work on gender justice. The area of politicizing masculinities is still fairly new, much remains to be explored and new tools are yet to be developed. However, to sum up the lessons from Sonke in one describing sentence, I will leave you with the quote by Colvin:

“You may wish the world was different, but you can’t shame or educate the problem away” (interview, 2012).

Bibliography

- Barnett T. and Whiteside A. (2002): *AIDS in the Twenty-First Century: Disease and Globalization*. New York: Palgrave Macmillan.
- Birn A., Plillay Y. and Holtz T. H. (2009): *Textbook of International Health. Global Health in a Dynamic World*. Oxford: Oxford University Press. Third edition.
- Bond, Patrick (2004): "From Racial to Class Apartheid". In *Monthly Review: An Independent Socialist Magazine*. [online] Vol. 55 Issue 10, p45-59. URL: <http://ccs.ukzn.ac.za/files/BondMonthlyReviewMarch2004.pdf> [cited 9. April 2013]
- Chigwedere P, Seage GR 3rd, Gruskin S, Lee TH, Essex M (2008) "Estimating the lost benefits of Antiretroviral drug use in South Africa", In *Acquir Immune Defic Syndr* Volume 49, Number 4, 2008: 410-415. [online] URL: http://journals.lww.com/jaids/Abstract/2008/12010/Estimating_the_Lost_Benefits_of_Antiretroviral.10.aspx [cited 31. August 2013]
- Colvin, Christopher (2009): "Report on the Impact of Sonke Gender Justice Network's "One Man Can" Campaign in the Limpopo, Eastern Cape and Kwa-Zulu Natal Provinces, South Africa". Sonke Gender Justice Network. [online] URL: http://www.genderjustice.org.za/resources/doc_download/285-report-on-the-impact-of-sonke-gender-justice-network.html [cited 9. April 2013]
- Connell, Raewyn (2011): "Organized Powers - Masculinities, Managers and Violence". Chapter 7 in Cornwall (2011): *Men and Development: Politicizing Masculinities*. London: Zed Books Ltd.
- Cornwall A., Edström J. and Greig A. (2011): "Introduction - Politicizing Masculinities in Development". Chapter 1 in Cornwall (2011): *Men and Development: Politicizing Masculinities*. London: Zed Books Ltd.
- Edström Jerker (2011): "Masculinity and HIV - Di-vision of Bodies, Sex and Structural Context". Chapter 6 in Cornwall (2011): *Men and Development: Politicizing Masculinities*. London: Zed Books Ltd.
- Epstein, Helen (2010): "Intimate-partner violence and HIV in South African women". In the *Lancet*. Vol. 376 October 9, 2010: 1219. [online] URL: <http://download.thelancet.com/pdfs/journals/lancet/PIIS0140673610618715.pdf> [cited 30. August 2013]
- Goldberg, David Theo (2009): *The threat of race: reflections on racial neoliberalism*. Oxford: Blackwell Publishing Ltd.
- Good, Kenneth (2002): *The Liberal Model and Africa. Elites Against Democracy*. Hamshire: Palgrave.
- Izugbara C. O. and Okal J. (2011): "Performing Heterosexuality - Male Youth, Vulnerability and HIV in Malawi". Chapter 2 in Cornwall (2011): *Men and Development: Politicizing Masculinities*. London: Zed Books Ltd.
- Jewkes R. K., Dunkle K., Nduna M. and Shai N. (2010): "Intimate partner violence, relationship power inequity, and incidence of HIV infection in young women in South Africa: a cohort study" In the *Lancet* 376: 41-48. [online] URL:

<http://download.thelancet.com/pdfs/journals/lancet/PIIS014067361060548X.pdf?id=410a13c7e856fa01:-79c1b90a:13deea9fef5:-7ea81365508788421> [cited 9. April 2013]

Johannessen A., Tufte P.A. and Kristoffersen L. (2006): *Introduction to Social Science Method* (my own translation). Original title: *Introduksjon til samfunnsvitenskapelig metode*. Oslo: Abstrakt forlag.

Lindstad, Gro (2012): "Voldspandemi uten kur?" Editorial in *Women United no.4*. [online] URL: http://www.fokuskvinner.no/PageFiles/905/Kvinner_sammen_4.pdf [cited 9. April 2013]

Momsen, Janet H. (2004): *Gender and Development*. New York: Routledge.

Morrell, Robert (2011): "Men in/and Gender Equality - A conversation from South Africa". Chapter 9 in Cornwall (2011): *Men and Development: Politicizing Masculinities*. London: Zed Books Ltd.

Mtibe, Aviwe (2012): "Aviwe Mtibe: Representing Sonke at UN Commission on the Status of Women". [online] URL: <http://www.genderjustice.org.za/updates/highlights/2001000-aviwe-mtibe-representing-sonke-at-un-commission-on-the-status-of-women.html> [cited 30. August 2013]

One in Nine (2012): "We were never meant to survive: violence in the lives of HIV positive women in South Africa". One in Nine Campaign: Johannesburg, South Africa.

Pearson, Ruth (2000): "Rethinking gender matters in development" Chapter 18 in Tim Allen and Alan Thomas, *Poverty and Development into the 21st Century*. Oxford University Press.

Republic of South Africa (2012): "Global AIDS response progress report" [online] URL: http://www.unaids.org/en/dataanalysis/knowyourresponse/countryprogressreports/2012countries/ce_ZA_Narrative_Report.pdf [cited 30. August 2013]

Robinson, John (1996): "Falling Between Schools. Some Thoughts on the Theory and Practice of Interdisciplinarity". In Compendium: *Utviklingsstudier: SUM3011/SUM4011A research Methods I. Interdisciplinary Research and Writing Strategies*. (2009) Universitetet i Oslo: Senter for Utvikling og Miljø.

Scheyvens, Regina and Storey, Donovan (2003): *Development Fieldwork – A Practical Guide*. London: Sage Publications.

Silberschmidt, Margrethe (2011): "What Would Make Men Interested in Gender Equality? - Reflections from East Africa". Chapter 8 in Cornwall (2011): *Men and Development: Politicizing Masculinities*. London: Zed Books Ltd.

Sonke Gender Justice Network (2013 A): "One Man Can Toolkit" [online] URL: <http://genderjustice.org.za/tools/one-man-can-toolkit.html> [cited 28. September 2013]

Sonke Gender Justice Network (2013 B): "OMC Klipfontein Health Project" [online] URL: <http://genderjustice.org.za/projects/one-man-can/omc-klipfontein-health-project.html> [cited 28. September 2013]

Sonke Gender Justice Network (2013 C): "OMC Prison Project" [online] URL: <http://genderjustice.org.za/projects/one-man-can/prisons.html> [cited 28. September 2013]

- Sonke Gender Justice Network (2013 D): “OMC Refugee and Health and Rights Project” [online] URL: <http://genderjustice.org.za/projects/one-man-can/refugee-health-a-rights.html> [cited 28. September 2013]
- Sonke Gender Justice Network (2012): “Capacity Statement” [online] URL: http://www.genderjustice.org.za/resources/doc_download/101255-sonke-gender-justice-network-capacity-statement-2012.html [cited 9. April 2013]
- Sonke Gender Justice Network (2006): *One Man Can: Working with Men and Boy to Reduce the Spread and Impact of HIV and AIDS*. Cape Town: Sonke.
- UN (1995): “The Beijing Platform of Action” From the Fourth World Conference on Women. UN. URL: <http://www.un.org/womenwatch/daw/beijing/pdf/BDPfA%20E.pdf> [cited 29. October 2013]
- UNAIDS (2012): “UNAIDS Global Report 2012”. [online] URL: http://www.unaids.org/en/media/unaids/contentassets/documents/epidemiology/2012/gr2012/20121120_UNAIDS_Global_Report_2012_with_annexes_en.pdf [cited 29. April 2013]
- UNDP (2010) “Good practice guide: Improving access to treatment by utilizing public health flexibilities in the WTO TRIPS agreement”. [online] URL: <http://www.undp.org/content/undp/en/home/librarypage/poverty-reduction/good-practice-guide-improving-access-to-treatment-by-utilizing-public-health-flexibilities-in-the-wto-trips-agreement.html> [cited 31. August 2013]
- UNDP (2013): Data from “Human Development Report 2013”. [online] URL: <http://hdr.undp.org/en/data/explorer/> [cited 5. May 2013]
- UNiTE (2009): “Violence against women: the situation”. UN Department of Public Information, DPI/2546A. [online] URL: http://www.un.org/en/events/endviolenceday/pdf/UNiTE_TheSituation_EN.pdf [cited 19. August 2013]
- UNWOMEN (2013) ”Violence against women”. UN Entity for Gender Equality and the Empowerment of Women. [online] URL: <http://www.un.org/womenwatch/daw/GBV/v-inter-day.htm> [cited 19. October 2013]
- Van den Berg W., Peacock D. and Shand T. (2012) “Mobilizing men and boys in HIV prevention and treatment: the Sonke Gender Justice Experience in South Africa” Cape Town: Sonke Gender Justice Network
- World Health Organization (2010 A): “Addressing violence against women and HIV/AIDS: What works?” Geneva. [online] URL: http://whqlibdoc.who.int/publications/2010/9789241599863_eng.pdf [cited 9. April 2013]
- World Health Organization (2010 B) “Engaging men and boys in changing gender-based inequity in health: Evidence from programme interventions”. [online] URL: http://www.who.int/gender/documents/Engaging_men_boys.pdf [cited 22. August 2013]

Appendices

Appendix A: Interviews

Colvin, Christopher (2012): Researcher. Skype (S.A. & USA): December 7. 2012.

Dlulane, Mkuseli (2012): CAT member, , Gugulethu. Cape Town: November 29. 2012.

Ondzongo, Saint Expedit I. (2012): OMC trainer, RHR. Cape Town: December 11. 2012.

Luzipho, Malwande S. (2012): OMC trainer, Gugulethu. Cape Town: December 3. 2012.

Maso, Siyanda (2012): CAT member, Gugulethu. Cape Town: November 20. 2012.

Molembe, Papy (2012): Sonke employee, information. Cape Town: November 11. 2012.

Mtibe, Aviwe (2012): OMC trainer, Gugulethu. Cape Town: December 12. 2012.

Nkosi, Zinhle (2012): Sonke employee, information. Cape Town: November 12. 2012.

Nkurunziza, Jean-Marie (2012): OMC trainer, RHR. Cape Town: December 20. 2012.

Roman, Gail (2012): Sonke employee, operations. Cape Town: November 30. 2012.

Sanger, Cherith (2012): Sonke employee, policy. Cape Town: November 21. 2012.

Sidelo, Mzamo (2012): OMC trainer, prison. Cape Town: November 20. and 29. 2012.

Wibooti, Welcome Dennis (2012): OMC prison trainer. Cape Town: December 3. 2012.

Appendix B: Consent agreement

In the period October 26th till December 15th 2012, Anette Remme is at Sonke Gender Justice Network with the intention to do a research on working with men and boys. This is a form of consent for you to confirm that you understand the research you are part of.

The momentary research question is: “What is the value added by Sonke Gender Justice Networks’ work with men and boys to the fight Gender-based Violence (GBV) and HIV and AIDS in South Africa?”

Through informal conversation with staff and volunteers, formal interviews, observation and participation in activities in the field, Anette has collected qualitative data to understand the work of the organization. In addition, reports and literature will be used for the final research discussion.

The interviews focused on two central questions. The latter has a more personal character and I therefore ask below that you state whether you need/want to remain anonymous.

- 1. Understanding the share of responsibilities between staff, and get a picture of the collective efforts made by Sonke as a whole.*
- 2. Understanding the motivation that drives the passionate work for gender justice, including personal experiences off staff that perhaps brought them to Sonke.*

I understand that:

- Information I have given Anette Remme in this interview, regarding Sonke’s work and my own inspiration for taking part in it, may be used for a paper.
- The purpose is to finalize a Master thesis at the Center for Development and the Environment, at the University of Oslo.
- The paper will be available for other students and academics at the University of Oslo. It will also be shared with the Sonke staff and management.
- The paper is not going to be published, but parts of the information in the final paper could be referred to in other articles.

I consent and I ask (mark as many as you need):

	To remain anonymous and referred to with a pseudonym. (Unless you mark this field, you consent that I may use your real name)
	To be quoted only on my reflections around Sonke, but not my personal experience.
	To check the summary of my interview per e-mail, before it is quoted.
	With no ask, I consent that all information and full name can be used.

Date: _____ **Sign** _____