Jacmel, Haiti Case Study: Learning from AAA! Adaptations in a Caribbean Setting

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1. Background

A. Learning from SASA! Adaptations

SASA! is a community mobilization approach to prevent violence against women (VAW) and HIV, developed by Raising Voices in Uganda. SASA! works by supporting communities through a comprehensive process of social change focused on interrogating critically unequal power dynamics between women and men. The methodology is structured in four phases – Start, Awareness, Support and Action – and utilizes several strategies, including local activism, training, communication materials and media and advocacy. A randomized controlled trial demonstrated SASA!'s community-level impacts on preventing intimate partner violence against women and reducing social acceptability of violence.¹ With this evidence, global uptake of the methodology has grown dramatically; SASA! is currently being implemented in over 25 countries worldwide.

As the number of organizations implementing SASA! continues to increase, it is essential that we explore systematically how it is being used in different contexts and create tools that can support quality adaptation and implementation. To address this gap, we launched the three-year Learning from SASA! Adaptations Project (Adaptations Project) in 2016, supported by the UN Trust Fund. The overarching aim of the project is to strengthen global prevention programming by distilling learnings from SASA!'s adaptation in three diverse settings: the Caribbean setting of Haiti, a humanitarian setting in Kenya, and a rural setting in Tanzania. Through a case comparison approach, our core objectives are to explore: (1) the SASA! adaptation process; (2) context-specific implementation strategies; (3) the organizational structures and processes necessary for effective programming; and (4) SASA!'s progress against expected outcomes. Raising Voices is working in close collaboration with four partners (Box 2).

Box 1: Learning from *SASA!* Adaptations Partnerships



- Raising Voices: Overall coordinator
- Beyond Borders: SASA! partner in Haiti (Jacmel)
- International Rescue Committee (IRC): SASA! partner in Kenya (Dadaab)
- Women's Promotion Centre (WPC): SASA! partner in Tanzania (Kigoma)
- University of California, San Diego (UCSD): Research partner





B. Jacmel, Haiti and Surrounding Communities

This case study presents findings from SASA! implementation research in Haiti. Haiti has a long history of resilience in the face of colonialism, political oppression, and widespread destruction from natural hazards. Haiti was the first nation to fully abolish slavery (in 1793), which, coupled with its independence from France in 1804, helped inspire a global anti-slavery movement.

Jacmel and surrounding communities are located in Haiti's Southeast department. The estimated population of the intervention area around the time of *SASA!* implementation was between 82,700 and 92,000 people.² Although some of that population resided in the town proper, much of it was clustered in rural communities that have daily interactions with the town. Jacmel once flourished from active trade and tourism, but its economy and tourism have declined, in part due to the 2010 earthquake that just preceded the *SASA!* intervention. It is still considered a center for art and culture in Haiti.



The World Health Organization estimates approximately 1 in 3 women experience IPV worldwide.³ In Haiti, the 2016-2017 EMMUS-VI, a Demographic and Health Survey, found a 34% reported lifetime experience of physical, sexual or emotional partner violence among partnered women age 15-49.⁴ A national survey found 1 in 3 girls in Haiti experience violence by age 18,⁵ and it is estimated that nearly 1 in 5 girls in Haiti have a first sexual experience that is forced or coerced.⁶

Other data about VAW and IPV in Haiti stems from small-scale findings from studies conducted by non-governmental organizations, research limited to specific areas (e.g. Port-au-Prince, the urban capital and most populous city of Haiti) or specific groups (e.g. pregnant women or women displaced by the 2010 earthquake). For example, a 2003 study examining maternal and sexual health in the Artibonite Valley region found 44.0% of young pregnant women in Haiti experienced violence in the six months prior to interview; 77.8% of whom reported that the perpetrator was an intimate partner.⁷

A 2011-2013 comparative study investigated VAW among displaced women before and after the 2010 earthquake. High rates of physical, sexual and psychological partner violence were found both before (71.2%) and after (75%) the earthquake, most of which was perpetrated by men known to the survivor (i.e. boyfriends or husbands), and mental and physical health problems were closely linked with having experienced any type of abuse.⁸ This finding corroborates research from multiple other settings, demonstrating that IPV is highly associated with additional health complications such as depression, eating disorders, substance abuse, and increased risks of HIV.^{9,10,11} Most women in this comparative study (60 - 78%) said that while they believed VAW was unacceptable, they lived in a social context with limited community advocacy and involvement focused on preventing it.¹²

Available findings on VAW in Haiti offer compelling evidence that it is a serious problem warranting focused attention. Further, numerous global studies have shown a bidirectional relationship between VAW and HIV infection.^{13,14} This association is a key concern in Haiti, which has one of the highest HIV prevalence in the Caribbean, disproportionately burdening women. In 2017, it was estimated that HIV prevalence among Haitian women of 15-49 years was 2.3, compared to an HIV prevalence of 1.5 among Haitian men 15-49 years.¹⁵

C. Beyond Borders & SASA! in Jacmel, Haiti and Surrounding Communities

Beyond Borders is a non-profit organization committed to helping people build movements to liberate themselves from oppression and isolation. In Haiti, Beyond Borders supports movements to end child slavery, guarantee universal access to education, end violence against women and girls (VAWG), and replace systems that oppress the poor, with systems that support dignified work and sustainable livelihoods. Beyond Borders has been in operation since 1993 and currently hosts three in-country program offices located in Port-au-Prince, Jacmel, and on the island of Lagonav (Nan Josen). Beyond Borders' involvement in the Adaptations Project facilitates critical examination of the possibility and process of adapting SASA! in a Caribbean setting that is distinct from the urban sub-Saharan African context in which the original methodology was designed and tested. Challenges and opportunities that arise from this partnership will inform SASA!'s future global adaptations.

Beginning in 2010, Beyond Borders' Rethinking Power Program adapted the SASA! methodology to the Haitian context. In 2014, the organization published the entire SASA! Activist Kit in Haitian Creole, including the methodology's practical resources, activities, and monitoring and assessment tools for local activism, media and advocacy, communication, and training materials. Between 2010 and 2015, Beyond Borders conducted the first adaptation and full implementation of SASA! outside of Africa in five communities in the Southeast region of Haiti: Jacmel, Cayes Jacmel, Bosye, Menot, and Cap Rouge.

As a result of the knowledge and expertise Beyond Borders gained through the initial adaptation and implementation of *SASA!*, the organization now serves as a hub for *SASA!* technical assistance in Haiti. Specifically, Beyond Borders partners with several organizations in Haiti who want to prevent VAW in their own work. Beyond Borders offers technical assistance on the *SASA!* Activist Kit through sharing of materials, training courses and/or provision of long-term support to organizations fully implementing *SASA!*.

In 2017, Beyond Borders began using the adapted SASA! methodology alongside a new methodology named Power to Girls in eight communities in Lavalle, near Jacmel. Power to Girls was designed to focus more on girls' experiences of violence, combining girl-centered programming with a community social norms change approach; it maintains the four essentials that made SASA! successful: gender-power analysis, phased-in approach, holistic community engagement (i.e. circles of influence), and activism.

2. Methods

A. Data Collection & Analysis

Capitalizing on Beyond Borders' long history of working with SASA!, we used a combined retrospective and prospective design to learn from the challenges and opportunities that Beyond Borders experienced when adapting and implementing the methodology in Jacmel and surrounding communities. Retrospectively, we conducted a secondary analysis of quantitative and qualitative data collected before the Adaptations Project was launched in 2016. Prospectively, we collected and analyzed original data from qualitative in-depth interviews (IDIs) and focus group discussion (FGDs) conducted between December 2016 and March 2017 with Beyond Borders staff, local community members and Community Activists (CAs).

Retrospective Analysis of Secondary Data

The SASA! Rapid Assessment Survey (RAS)

Beyond Borders' implementation of SASA! between 2010 and 2015 engaged nearly 90,000 people across five communities. Throughout this five-year period, Beyond Borders collected quantitative monitoring and evaluation (M&E) data through repeated cross-sectional surveys of community members based on guidance provided in the SASA! Activist Kit. The SASA! Rapid Assessment Survey (RAS) was the main tool used to collect these data; it consisted of 38 closed-ended questions designed to help organizations assess changes in knowledge, attitudes, skills and behaviors among community members. This tool was field-tested, revised and validated in Kampala, Uganda, and has been used extensively by Raising Voices and its other partners since 2008.

RAS Respondents

RAS respondents were adult (18 years and older) women and men drawn from public sites (e.g. markets, bus parks, etc.) in Jacmel, Cayes Jacmel, Bosye, Menot, and Cap Rouge. RAS questionnaires were administered over the course of four data collection periods, corresponding with each of the four SASA! phases. The starting month for each of the four data collection periods is shown below, along with the corresponding SASA! phase and number of respondents enrolled.

- July 2010: During Start phase 593 respondents (298 women, 295 men)
- October 2012: After Awareness phase 659 respondents (328 women, 331 men)
- July 2014: After the Support phase 702 respondents (352 women, 350 men)
- **January 2016:** After the **Action** phase 616 respondents (307 women, 309 men)



RAS Data Collection

RAS survey instruments were translated into Haitian Creole. Interviews were conducted by trained external research assistants selected from local communities. Male researchers interviewed men and female researchers interviewed women.

Use and Analysis of the RAS Data

RAS data were analyzed to understand trends in the SASA! outcome areas: knowledge, attitudes, skills and behaviors.

2010 RAS Data

The data collected in the 2010 RAS were gathered during the Start phase, before SASA! implementation started at the community level, to establish baseline levels of all outcome areas. It is important to note that after the 2010 RAS tool was used, Beyond Borders revised the instrument in response to feedback from the community that some questions were misunderstood in a way that may have compromised the data. This is elaborated in section 3.A: Key Learnings, SASA! Adaptation, below; it is mentioned here to explain that, due to differences between the 2010 survey and the survey used in 2012, 2014, and 2016, it is not possible to compare accurately all outcomes across all time points.

2012, 2014, 2016 RAS Data

RAS data were analyzed at the end of each follow-up period (i.e. 2012, 2014, and 2016) to assess changes in knowledge, attitudes, skills and behaviors among community members. The assessments were conducted during implementation so Beyond Borders could monitor changes and gauge if the community was ready to move to the next phase. In the analysis for this case study, we assessed changes at each time point and across the different time points; i.e. comparing outcomes between 2012 and 2016 to get a sense of the impact that exposure to SASA! had at the community level.

Analysis Plan

The data analysis consisted of using descriptive statistics to examine the socio-demographic characteristics of survey respondents at baseline and the outcomes of interest at each of the four time points. Differences across waves in socio-demographic variables were examined using chi-square tests adjusted for clustering. Logistic regression was used to estimate odds ratios of outcomes of interest across different time points.



Demographic Profile of RAS Respondents

Table 1 provides basic demographic characteristics of the men and women who participated in the RAS in 2010, 2012, 2014 and 2016.

Table 1: Demographic Profile of RAS Respondents

Characteristics	2010	2012	2014	2016			
Female respondents							
Age %(n)							
18-24	30.2(90)	23.78(78)	27.71(97)	24.76(76)			
25-35	28.86(86)	28.35(93)	30.29(106)	28.99(89)			
36-50	30.2(90)	26.22(86)	25.43(89)	27.36(84)			
51+	10.74(32)	21.65(71)	16.57(58)	18.89(58)			
Marital Status %(n)							
Single	20.74(62)	20.49(67)	9.28(32)	15.84(48)			
Co-habituating	20.4(61)	17.74(58)	22.61(78)	22.11(67)			
Married	50.5(151)	50.76(166)	57.97(200)	51.82(157)			
Widow/Divorced	8.36(25)	11.01(36)	10.14(35)	10.23(31)			
Education %(n)*							
None	NA	22.53(73)	15.68(53)	15.18(46)			
Some secondary or less	NA	61.11(198)	60.36(204)	61.72(187)			
Baccalaureate 1 or higher	NA	16.36(53)	23.96(81)	23.1(70)			
Characteristics	2010	2012	2014	2016			
N	lale respond	lents					
Age %(n)	-						
18-24	23.65(70)	19.64(65)	23.14(81)	28.48(88)			
25-35	28.04(83)	28.1(93)	30.57(107)	31.72(98)			
36-50	27.03(80)	24 40(404)	04.00(05)	22 (5/70)			
	27.03(00)	31.42(104)	24.29(85)	22.65(70)			
51+	21.28(63)	20.85(69)	24.29(85) 22(77)	22.65(70) 17.15(53)			
51+							
51+ Marital Status %(n)	21.28(63)	20.85(69)	22(77)	17.15(53)			
51+ Marital Status %(n) Single	21.28(63)	20.85(69)	22(77) 14.08(49)	17.15(53) 21.5(66)			
Marital Status %(n) Single Co-habituating Married Widow/Divorced	21.28(63) 23.91(71) 26.94(80)	20.85(69) 11.21(37) 25.15(83)	22(77) 14.08(49) 24.43(85)	17.15(53) 21.5(66) 27.36(84)			
51+ Marital Status %(n) Single Co-habituating Married	21.28(63) 23.91(71) 26.94(80) 47.81(142)	20.85(69) 11.21(37) 25.15(83) 56.97(188)	22(77) 14.08(49) 24.43(85) 60.06(209)	17.15(53) 21.5(66) 27.36(84) 47.23(145)			
Marital Status %(n) Single Co-habituating Married Widow/Divorced	21.28(63) 23.91(71) 26.94(80) 47.81(142)	20.85(69) 11.21(37) 25.15(83) 56.97(188)	22(77) 14.08(49) 24.43(85) 60.06(209)	17.15(53) 21.5(66) 27.36(84) 47.23(145)			
51+ Marital Status %(n) Single Co-habituating Married Widow/Divorced Education %(n)	21.28(63) 23.91(71) 26.94(80) 47.81(142) 1.35(4)	20.85(69) 11.21(37) 25.15(83) 56.97(188) 6.67(22)	22(77) 14.08(49) 24.43(85) 60.06(209) 1.44(5)	17.15(53) 21.5(66) 27.36(84) 47.23(145) 3.91(12)			
Marital Status %(n) Single Co-habituating Married Widow/Divorced Education %(n) None	21.28(63) 23.91(71) 26.94(80) 47.81(142) 1.35(4)	20.85(69) 11.21(37) 25.15(83) 56.97(188) 6.67(22) 9.12(29)	22(77) 14.08(49) 24.43(85) 60.06(209) 1.44(5) 5.52(19)	17.15(53) 21.5(66) 27.36(84) 47.23(145) 3.91(12) 5.67(17)			

Qualitative Research Conducted During SASA! Implementation (2010-2016)

The secondary qualitative analysis used data from FGDs conducted with male and female community members in 2010, 2012, 2014 and 2016, using the "Assessment Dialogue" guides provided in the SASA! Activist Kit. Thirteen FGDs (6 with men, 7 with women) were conducted in total. Participants were asked to share their experiences conducting community activism to prevent VAW and HIV risk, their perceptions on whether changes occurred in the balance of power between men and women in the community, and to provide suggestions for improving the intervention. Questions for each FGD were dependent upon the SASA! phase being assessed, which assisted in understanding phase-specific outcomes. However, this also made it difficult to compare data across time periods.



A Most Significant Change process¹⁶ was conducted by Beyond Borders upon completion of the *SASA!* cycle in 2016 and included an invitation to CAs and other community network groups to share positive or negative stories about their experiences with *SASA!*. Selected CAs or Beyond Borders staff interviewed interested participants, generating short stories that were then verified by the storyteller. A selection committee was formed, consisting of CAs and other network members from all communities. In a one-day workshop, the committee read and selected the most important story from each community, and one story that they felt best represented the change they saw in their respective communities.

Primary Qualitative Data Collection and Analysis (2016-2017)

Prospectively, we collected and analyzed data from five qualitative IDIs and six FGDs conducted between December 2016 and March 2017 with Beyond Borders staff, local community members and CAs (Table 2). To learn from their rich experience of delivering SASA! in Jacmel and surrounding communities, participants were guided through conversations about their experiences of implementing SASA! or seeing SASA! implemented; their understanding of SASA!'s evolution in the five communities; retention rates and perceived turnover of CAs; participants' assessments of which people SASA! reached most; barriers to intervention delivery; and other relevant activities and policy changes that occurred over the time period.

Qualitative Participants

The goals of this data collection were to identify promising practices for adapting and implementing SASA! in Haiti and assess organizational processes necessary for quality programming. FGD participants discussed which indicators did not improve and why.

Table 2. Qualitative research participants in Haiti					
Method	Participant Group	Sample			
IDIs	Beyond Borders staff	5 IDIs			
FCD	SASA! Community Activists	1 mixed FGD of females & males			
FGDs	Community members	4 FGDs: 2 female; 2 male			

Qualitative Procedures

All IDIs were conducted via telephone or Skype by the lead researcher at UCSD, with the assistance of a note taker. Interviews lasted 60-90 minutes. Three IDIs were conducted in English and two in Creole, with an interpreter and note-taker. All interviews were recorded with the permission of each participant. The FGDs were conducted in Jacmel by trained local research consultants recruited by Beyond Borders. Each FGD lasted 60-90 minutes and was facilitated by a moderator and assistant who took written notes and digitally recorded each session with all participants' consent. All FGDs were conducted in Creole. All IDIs and FGD participants provided oral consent to participate in data collection.

Both IDIs and FGDs were conducted using a semi-structured guide. Each guide highlighted major topics for discussion and suggested probes related to understanding the adaptation process, specific needs and/or contextual conditions present in the communities, understanding the implementation process, perceptions of change in the community, perceived barriers to more profound shifts, and overall experiences with SASA!. All IDI and FGD discussions were transcribed and translated into English using recordings to supplement what was written during the data collection session.



B. Ethical Considerations

Ethical approval was obtained from institutional review boards (IRB) at the University of California, San Diego Human Research Protections Program in the U.S. and *Comité National de Bioéthique* in Haiti. Both IRBs provided a retrospective waiver of consent to secondarily analyze the RAS and FGD data collected between 2010-2016 for the Adaptations Project because these data were originally gathered for Beyond Borders' operational M&E procedures, not for research. Thus, although oral consent had been provided by each participant, a formal IRB process had not been undertaken.

Apart from three in-depth interviews conducted in English with Beyond Borders staff members in 2016, all other prior and new data collection sessions were done in Creole by trained research assistants. All RAS respondents and qualitative participants provided oral consent to participate in data collection activities. All research planning and procedures were designed to adhere to the ethical guidelines for conducting safe research on VAW, emphasizing confidentiality, informed consent, and providing referrals to response services.¹⁷ Throughout the project, great care was taken to minimize the potential for distress or harm; for example, questions were worded carefully to ensure non-judgment. All IDIs and FGDs were conducted in private spaces. Comprehensive training was provided to all researchers, including clear protocols regarding how to respond if someone discloses violence or requests assistance or additional information. In addition, each potential participant was offered careful explanation about the purpose of the research, the voluntary nature of participation, and was provided the opportunity to ask questions before starting the FGD, IDI, Most Significant Change Process or RAS.

C. Strengths & Limitations

The case study benefited from an iterative, collaborative approach and comparison with the other project sites in Kenya and Tanzania. We have aspired to integrate the case study research with each partner's practice-based knowledge and expertise. Towards this end, we facilitated in-person discussions to engage with emerging findings, and an all-partners validation workshop at the end of the project to draw out implications and meaning. The mixed methods approach is also a strength, allowing for triangulation of qualitative and quantitative findings and more robust analyses. Our qualitative analysis complements the RAS findings and helps to interpret and expand on the quantitative survey results through narratives and rich, in-depth contextualization. Furthermore, our study had the significant advantage of utilizing highly skilled interviewers to implement the data collection processes.

Certain limitations should also be noted. Despite efforts to carefully introduce the research and build rapport, it is possible that some community members provided socially desirable responses. Further, the successes and barriers of the intervention were measured via rapid interviews, and various biases could have distorted responses. For instance, it is possible interviewees did not recall their memory accurately, or felt persuaded to inflate their experiences. However, participants did not receive incentives for involvement in the study. Therefore, there was no exterior motive to respond in any preferred manner. Another limitation is that although the surveys administered in 2012, 2014 and 2016 were identical, the 2010 survey had several unique distinctions. This limited our ability to have four complete cross-sectional databases for full comparison across the four time points. Beyond Borders used the RAS recommended by Raising Voices in 2010, but changed the version by 2012, in part due to community feedback about specific RAS questions, as well as due to Raising Voices' own learning.

Finally, self-selection bias may be present given that community members were only interviewed if they agreed to participate in the study sample. Therefore, feedback from *SASA!* participants who did not self-volunteer to participate in the study was not collected and thus could not contribute to the findings.

3. Key Learnings

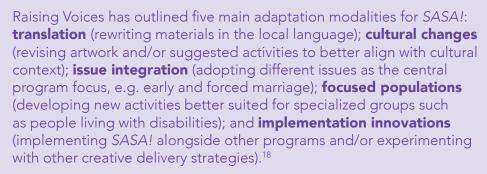
A. SASA! Adaptation

The socio-cultural and political context in Haiti differs sharply from the setting for which SASA! was originally created and it was necessary to adapt SASA! for Haiti and Beyond Borders' organizational structure (Box 2).

Box 2: The What & Why of Adaptation



Developing successful violence prevention programs for new contexts relies on a careful interplay between two aspects of implementation: (1) fidelity — the delivery of the program as intended, and (2) adaptation — changes to delivery and/or content to ensure a program's contextual appropriateness.







Adaptation Modality: "Cultural Changes"

Beyond Borders' adaptation can be considered a "cultural changes" modality because the key to its success was ensuring that SASA! was tailored to Haitian communities and reflected Haitian voices and culture in all aspects of programming.

Haitianizing SASA! to be Culturally Relevant

Beyond Borders and the SASA! CAs in Jacmel and surrounding communities quickly realized it was insufficient to simply translate the methodology into Creole and still respect the model's original spirit and intent. This was largely influenced by two main characteristics of Haitian culture: (1) Haiti is more of an oral than written culture, resulting in high levels of variation in literacy and language use and understanding; (2) there is a strongly felt legacy of slavery and foreign domination of Haiti. For SASA! to be fully accepted, it had to be "Haitianized," referring to a process of tailoring the intervention to make it salient to local values and social mores.





For Haiti, it's extremely important that the people feel that what they're working with is Haitian, or at least Haitianized. If people sense the tone of foreign power . . . there's this reaction against what's imported and forced upon us. Even when it's good we don't want it.

- Beyond Borders staff member

The process of "Haitianizing" SASA! involved translators, Haitian staff with deep connections to local communities and a Beyond Borders staff member with previous experience with VAW and SASA! in Uganda. Haitian artists and graphic designers were also brought in to support the team in transforming communication materials.

A key role in the Haitian adaptation of SASA! was a "Cultural Consultant" who provided information, strategies, insights, ideas, and perspectives to the Beyond Borders team, fostering the ability to "Haitianize" the SASA! methodology. The Cultural Consultant was a Haitian man who had spent an extensive part of his life in Haiti, the U.S. and West Africa. He brought a multi-cultural and multi-lingual lens to the project. He was described as someone who was "always listening." In addition to being an expert translator, he was skilled at reading people's expressions, interpreting the unsaid and seeking clarifications.

Colors, illustrations and artistic styles were aligned with cultural norms and assumptions. For example, the colors depicting the different *SASA!* phases were changed to avoid religious and political connotations. Facial features were added to some of the images because the originals (i.e. developed for use in Uganda) had no eyes; this detail was distracting because community members perceived the lack of eyes to be something negative.



We had a first draft of the poster with a person who did not have eyes. It was this cool style of art but when we asked people 'what do you see in this first drawing?' they said they saw a zombie! We were like, 'What the heck?!' Nobody was talking about violence, everyone was talking about zombies! We asked people what made them think it was a zombie, and it was because the person on the image did not have eyes.

- Beyond Borders staff member

Beyond Borders changed the SASA! posters so the illustrations more closely resembled members of the implementation communities. Beyond Borders sought to use proverbs to explain certain concepts when possible because of their value in Haiti. Beyond Borders added a new character to one of the community dramas to help people better relate to the people and story and also changed details on other communication materials to communicate strong cultural meanings.



There was a comic strip with a man in a yellow t-shirt and the shade of yellow used in the original design made people feel like this particular man was not to be trusted! It was the first time he appeared in this drawing, so we wondered, 'how do you know he's not to be trusted?' The community members told us it was because of the shade of yellow he was wearing. . . . It took some time and some question asking but it was typically through this process of testing in the office that allowed us to get things right.

- Beyond Borders staff member





Creole and Language Adaptations

A great deal of the adaptation process focused on language and words. Due to the oral nature of Creole and because it has only been a standard written language since the 1980s, we learned there can be multiple ways to translate a single word, that one word can be spelled many different ways, and both translations and spellings can vary from community to community. Participants explained that substantial differences often occur between the Creole used in urban versus rural regions of Haiti. It was felt that the Creole spoken in cities, such as Port-au-Prince, has been heavily altered by foreign influences and French and English expressions. Informants further explained that Haitian Creole relies heavily on proverbs, metaphors, and imagery.

To adapt SASA! to cater to Creole's unique variations in word choice and translation and capture its cadence and imagery, using proverbs where possible, it was often necessary to engage in lengthy discussions and work sessions. The Beyond Borders team spent extensive time figuring out which words to use to make SASA! "feel Haitian" and how to make the Activist Kit relevant to the implementation communities. The team also found that the language needed to be simplified for their audiences.



Creole has only been a standard written language since the mid-80s. It was written before that, but definitely had no standard. So, there are multiple different ways to write many words. Finding what was most accessible to the most people . . . involved what language to translate it into [French or Creole]. . . . Anything to keep us as close to what makes communities as comfortable as possible.

- Beyond Borders staff member

Adapting the SASA! Rapid Assessment Survey

Routine monitoring is a critical part of SASA! implementation, and the RAS is a standardized, validated tool for rigorously assessing how communities are progressing in the four key outcome areas (knowledge, attitudes, skills and behavior). Beyond Borders began implementing the RAS in the SASA! communities during the Start phase in 2010; this was the baseline of SASA! implementation. At this time, Raising Voices was still revising and updating the RAS and Beyond Borders went through their own process of pilot testing the survey for acceptability in Haiti.

Between the baseline data collection (2010) and first post-SASA! implementation data collection (2012), the RAS was revised. Baseline data collection took place between July and October 2010 and consisted of 28 questions. After the data were collected and the team reflected on the interview process and examined responses in line with the questions asked, some revisions were made to the questionnaire to account for various cultural and social aspects of the communities in Haiti. This resulted in a different RAS instrument that was subsequently administered in 2012, 2014 and 2016. This RAS, which is the current tool available for use with SASA!, consists of 38 close-ended questions.

Contextualization & Fidelity

In 2017, Raising Voices published a tool to help organizations <u>maintain fidelity to the SASA!</u> <u>methodology.¹⁹</u> Because Beyond Borders began its adaption and implementation of SASA! in 2010, however, these recommendations were unavailable to them. To help adapt SASA! so it could be used in a way that would adhere to its original design, Beyond Borders established its own set of procedures, which ultimately fed into Raising Voices' fidelity recommendations.

It is not realistic to maintain complete fidelity – i.e. implement the exact same program – when the program is taken to a different setting, as some degree of contextualization is essential to ensure resonance and viability in local communities. In general, however, preserving high levels of fidelity are important for program quality and effectiveness. Raising Voices has defined four "essentials" that *SASA!* adaptations must preserve: a gender-power analysis, a phased-in approach; holistic community engagement across the key circles of influence; and activism.²⁰

Findings from the in-depth interviews with Beyond Borders staff members, in particular, highlighted that the group made great effort to maintain high fidelity to these "essentials" despite the fact that adaptations were made to ensure the methodology was culturally and contextually appropriate for use in Haiti.

Gender-power Analysis

Responses from a variety of informants referenced how power was mentioned in most activities, and that most SASA! activities focused specifically on the type of power relevant to each phase of the intervention. The gender-power analysis was mentioned specifically as a key characteristic of SASA! that set it apart from other programming focused on preventing VAW, because it helped people understand not only that it was good to prevent violence, but why violence was happening in the first place.



SASA! showed me something different than other organizations, because other organizations don't balance power. They just talk about violence against women. But once you start in SASA! you learn how to balance power between women and men. I find this to be very important. Children don't know their rights. Little by little in your family, the boy comes to have more power than the girl. We learn there are things a girl shouldn't do and things girls should do but boys should not do. It is confusing but SASA! connects it all, in this sense. That is what encouraged me to participate [in SASA!] and now I do trainings to spread this message to others in our community."

- Female Community Activist

Phased-in Approach

The Haitian adaptation of SASA! was designed carefully to follow the phased process of change in SASA!. Materials were adapted during the four intervention phases, with new ideas phased in gradually throughout each stage. Simultaneous materials adaptation and activity implementation was felt to be important because the ongoing feedback and sharing of lessons learned (including from data collected via the RAS) enabled continuous learning, testing, revising and improving of materials. The length of time required for adaptation, however, was longer than planned. Several respondents cited the length and intensity of the adaptation process as a key challenge. To fit the needs of the community, the team meticulously adapted the materials phase by phase, to the point that adaptation, training, and implementation would at times overlap, creating heavy workloads and tight deadlines. Despite challenges, respondents recommended remaining open to changes and emphasized the importance of flexibility.



Activism and Holistic Community Engagement Across the Key Circles of Influence

The continuous engagement of both female and male CAs and other key community groups like journalists, religious and community leaders and health workers across all sectors of the community was maintained in both adaptation and implementation. This emphasis on respect for various community members was noted by research participants as a key factor contributing to SASA!'s success in the communities. Collaboration with community members in the iterative adaptation and implementation processes was reported to be essential to ensure that community members felt materials and concepts to be adequately "Haitianized." The community engagement style facilitated an inviting work environment and also allowed the SASA! team to form bonds, which were important for the success of the program.



SASA! will be implemented better if local people are involved in building the materials, especially in lingo and specific story. It was difficult, at first, to understand each session because the program had been [used] previously in Uganda. I think the creative materials are important and we [community members] participated in the creation of communication materials that specific to Haiti and different from other countries.

- Male community member

B. SASA! Implementation

SASA! activities throughout the four phases of implementation were largely facilitated by a specific, dedicated team including the VAWG Program Specialist, a Coordinator and two Local Activism staff (one female, one male). The implementation was originally structured within Beyond Borders' local partner organization, but due to administrative factors, the same team moved to Beyond Borders in 2013, partway through implementation. As in the original SASA!, most community activities were conducted by a pool of 120 unpaid CAs and a network of religious and community leaders, health workers, and journalists.

Decisions related to SASA! contextualization were largely influenced by two main characteristics of Haitian culture: (1) The great importance of personal social relations, with informal community networks often having much more power than formal institutions; and (2) community mistrust of organizations (particularly ones with non-Haitian influence) introducing programming, while still relying heavily on these organizations for economic opportunities and material resources. In this section, these factors can be observed as we discuss findings related to implementation strengths and gaps.

Organizational Assets

Beyond Borders boasts many organizational assets that made it ideal for SASA! implementation. The organization is well-established in Haiti, has been operating for nearly 25 years, and has close connections with the communities it serves. All of Beyond Borders' work aims to empower people, help them attain their full human rights, and live free from violence and oppression. Since the early 1990s, the organization has focused on issues of child servitude and violence against children. Integrating programming to address VAW was a natural addition. Many successes have been realized but there have also been challenges, including limited availability of local staff with experience in VAW prevention work, and limited funding in Haiti overall and, specifically, for VAW programming.



Given Beyond Borders' extensive background of working to prevent violence against children, and over two decades of community based programming in Jacmel – historically in partnership with a local organization in the area – the organization's staff members are intimately familiar with the local communities and cultural dynamics. In 2009, after more than a decade of work focused on creating social change to end child slavery, Beyond Borders began realizing a need to program around sexual violence against women and children. In their work addressing violence against children, a deep link became apparent between violence against children and VAWG. Further, these two typologies of abuse were observed both to independently and synergistically contribute to and exacerbate child servitude and other forms of VAWG. When a former Raising Voices staff member approached Beyond Borders with a desire to live and work in Haiti, the Beyond Borders team embraced the opportunity to use the SASA! methodology, seeing it as a natural fit with Beyond Borders' existing approach.



They [Beyond Borders] already had an approach that they were using. It was a methodology called Education is a Conversation – a popular education methodology. They have incredibly close relationships with the communities where they work, so the community mobilization approach was already quite familiar to them and something they felt was completely in line with their philosophy. So in a lot of ways it just seemed like a good methodological fit for what their strengths already were.

Beyond Borders staff member

Beyond Borders' entry into VAW work also created some staffing challenges. The organization was based in a rural area and there were few individuals available for hire who had experience with community-level VAW programs in general, and specifically from a prevention perspective. There were qualified candidates for these positions in other cities/regions, such as in Port-au-Prince. However, Beyond Borders strived to hire local women and men because they had strong community relationships and understood local realities best.



We either found people who were connected with others in the communities (where we were working) or people who had VAW experience and expertise but who came from other communities, like the capital. So, it was, 'do we want stronger community relationships and "in's" within the local rural communities and people who will adopt this [SASA!] as their own because they see it as a way for people from the community to get jobs? Or do we want people who have issue area expertise'? We opted for choosing staff who were from and living in the communities because we were kind of convinced culturally that it would be really hard otherwise.

- Beyond Borders staff member

The Beyond Borders staff members felt that hiring staff from the local communities was the right choice, despite the need for training to build their capacity to understand how to mobilize communities to prevent VAW. In fact, the VAWG Program Specialist said that the process of appointing local men and women, training them on SASA!'s methodology and supporting their leadership in the model's implementation "created unexpected activists." In other words, many community members with no past experience in VAW programming took on integral roles and became experts on VAW prevention through the process. This provides strong evidence for SASA!'s feasibility for delivery by organizations focusing on issues other than VAW.

In addition to SASA!'s impact on individuals, participants narrated how the program also influenced the organizational culture at Beyond Borders, and positively impacted other programs they offered.





A child protection program from Port-au-Prince came for a short course on principles of community mobilization and they started creating communication materials that are really cool that follow the Stages of Change, but are related to child protection. They are also integrating some of the discussion on domestic violence and its relationship with violence against children into the materials they are creating.

- Beyond Borders staff member

Strengths: Holistic Approach, Reach & SASA!'s Resonance

Beyond Borders staff, community members and CAs all noted how they appreciated the holistic approach that SASA! brought to community change. The way in which the methodology provided guidance on problem resolution was identified as a key programming strength by both female and male CAs during FGDs. In particular, these respondents narrated how SASA!'s approach helped make it possible for them to work within the community without "disturbing" or increasing tensions. Many activists were attracted to SASA! because it involves both women and men in affecting change.



I came to understand violence against women does not only concern women, but it concerns men as well . . . I set as an objective for myself to become involved and help fight the violence. I got involved and was motivated to balance power in my community, for my community to work better, for families to be better off. Even in school we developed a strategy to reduce violence. Schools are working better; school administration and churches work better.

- Male Community Activist



What motivated me [to become a SASA! CA] was I saw they met with men and women together, and had each person take the problem [VAW] into account and look at how they could resolve it. This really attracted me because there are organizations talking about violence, who want it to end, but they only think it is a certain group of people who suffer from violence, women. It is not only women who should speak out, but the whole community should say 'this is not right! Let's do this!' That is what motivated me because I told myself I don't want violence. Men started it. If we all work together, we can reduce the incidence of violence.

- Female Community Activist

CAs also appreciated how the SASA! approach focused on prevention and working to stop violence before it happened, as opposed to reacting and responding to acts of violence after they occurred. The emphasis on building connections with the community, rather than imposing a program on the community, was another key strength mentioned.

Most FGD participants were already working in their communities on other social issues before *SASA!* was launched, but they felt its methodology exposed them to transformative training and helped them develop new tactics to improve both their personal and community relationships. They believed *SASA!* gave them the confidence to speak openly and passionately about a topic that has long been taboo in their communities. In turn, this made their friends and peers feel comfortable opening up and seeking counsel from, and resolution with, them. *SASA!* was described as a tool that enabled CAs to become the leaders they wanted to be. It gave them pride in their work and ability to help others.





A person might have a little problem and they can't keep it to themselves. They come find you at home, they explain the problem to you, and you share ideas/solutions with them. You become a model in the neighborhood where you are living. Whenever there is a problem people seek you out to ask your advice.

- Female Community Activist

Beyond Borders implemented SASA! to engage members of the community on multiple levels, including the individual, relationship, community, and societal levels. The organization and its partners implementing SASA! throughout the region were committed to delivering the methodology to reach a critical mass for change. CAs talked about their commitment to doing whatever necessary for the program to attract its intended audience and maximize its reach. Their ability to achieve this (i.e. regularly reach a large proportion of the total population of the community) was narrated as one of the key achievements in Haiti.



We were able to reach everyone. In church, Vodou practitioners, all kinds of people. And we showed them about balanced power, what men can do, what women can do . . . Even if the men in the area were violent, the way we approached them, they said, 'Why is it only now we are hearing about this?' It's like an evangelist preaching the good news. That is what interested me.

- Female Community Activist

Challenges: Initial Resistance, CA Attrition & Donor Funding

Introducing SASA! brought on excitement and new activities. It also introduced change, which can be accompanied by resistance – at both the individual and societal levels. In Jacmel, CAs experienced initial reluctance through community members' lack of willingness to accept ideas and messages perceived to be in conflict with traditional attitudes surrounding gender and violence. Beyond Borders addressed this challenge by trying to understand the sources of people's concerns and strategize around them. CA attrition and lack of donor support to fund prevention programming were other challenges faced.

Participants talked extensively about Haiti's rich culture and how, in rural areas like Jacmel and surrounding communities, traditional values are still upheld by many people. Conservative gender norms and attitudes about VAW are reflected in some of these values. CAs explained how they encountered initial resistance, primarily by men, to SASA!'s messaging about the importance of balanced power. Promoting the idea that women should have increased power was interpreted by some men as a concurrent loss of their own.



The most difficult part of adapting SASA! was creating a way to talk to some men about 'power,' to tell them 'a man does not have the right to beat a woman.' Because men, they were born with power and they **do** think they have the right to beat her. This means that before you can help a man understand what power is, you need to convince him that his power does not give him rights he thinks he has. It was like an impossible task.

- Female Community Activist



Participants explained that some topics remained particularly challenging to address. Reproductive decision-making and sex, for example, were noted as subjects perceived to be taboo in rural Haiti. Simultaneously, women's autonomy over their bodies, when it comes to reproductive choice and when and how to have sex, were narrated as continued sources of women's disempowerment and violence.

CAs also reported assumptions among some community members that the CAs were motivated to mobilize communities in exchange for payment. Community members often assumed that CAs were well-paid employees of a local non-governmental organization. This was noted to be particularly true for male activists, as community members felt that men would not want to become involved in VAW prevention programs unless they were highly paid. CAs felt that these misconceptions made it difficult to engage some members of the community. CAs also felt that although they received training on how to engage men, it was initially difficult to do so because men seemed reluctant to be involved in the intervention and attend meetings. For example, some men expressed discontent if they were interrupted by SASA! activities while spending time with friends. CAs recounted stories of men making fun of them in public. They also found it difficult to engage with some community authorities who did not want to hear new ideas or felt that the topics were unimportant.



Sometimes people don't want to hear us, especially men who don't want to come to the meetings. They say we are making money with the SASA! method. They know it is us who will come looking for them at the cockfights, in the market, at church, in school, where they are playing cards, dominoes . . .

- Male Community Activist

Beyond Borders was able to mitigate these issues by including men at the organizational level, which leveraged respect and brought more legitimacy to the program. In addition, more men (e.g. religious and community leaders) were encouraged to join other parts of the network to supplement the CAs, resulting in more men being open to engaging with the ideas implicit to SASA!.

There was a strong emphasis on CAs being credible and consistent models in the community in their role as agents of change. A challenge occurred was when CAs dropped out of their role in SASA! due to life changes such as going back to school, employment, getting married, etc. For some, these changes led them to move from the intervention communities; for others, life changes meant they did not have time to continue in their roles. It was sometimes difficult for Beyond Borders' two full-time staff to coordinate hundreds of CAs (120 total, plus about 300 community action group members designated to support the CAs). It was challenging for the two staff to support this number of activists appropriately with strong mentoring relationships. Nearly five years of implementation was also a challenge and it became difficult to gather all CAs for monthly meetings, especially toward the end of the project. For these reasons, as well as to engage and communicate between members of other groups in the SASA! network (leaders, health workers, journalists), Beyond Borders began to hold monthly meetings for all active CAs. This allowed them to more easily keep track of progress and the diversity of implementation activities.

Financial challenges, such as not having enough money to sustain *SASA!* programming and afford the trainings, and donor inflexibility, were highlighted as key problems for comprehensive VAW prevention programming. Several CAs and Beyond Borders staff members talked about how challenging it was to fully implement an intervention like *SASA!* with insufficient money to support the activities required for all four phases. Inflexibility of funds was also mentioned as a key challenge to adapting the intervention based on community feedback.



Monitoring & Evaluation

The SASA! Activist Kit includes precise monitoring tools to measure community knowledge, attitudes, skills, behaviors, as well as rank the quality of SASA! mobilization and facilitation. A great deal of work and effort went into adapting the SASA! M&E tools. Participants emphasized how important it was to continually ensure (i.e. through the course of ongoing implementation) that the RAS questions were culturally appropriate, understood by respondents and that community member respondents understood the value of providing truthful responses. This was, in part, due to community members' high degree of mistrust of organizations and the intent of assessments. Some early efforts were required to ensure the data collectors were comfortable conducting the RAS. Training male data collectors was especially important given that some men did not feel confident asking sensitive questions to other men. This was particularly challenging in cases when the interviewer and interviewee knew one another. Beyond Borders addressed this challenge by offering an interactive training for all of the data collectors, not only on the survey questions but on the ethics of the research and the realities of the experiences of women and girls, both in and out of the context of VAW.

Another challenge faced by Beyond Borders was that the organization did not have the funding available to assign a dedicated staff member to M&E activities. Staff had difficulty filling out sufficient numbers of monitoring forms from which to draw meaningful results. At times, they assigned interns to attend community activities and complete the monitoring forms, but interns often lacked the experience and knowledge about the methodology to complete the forms with quality. Despite this, these forms (in particular the Monthly Reporting Form) were perceived to be helpful for tracking the reach and progress of SASA!.



You really have to have an M&E person if you want to collect enough of those [monitoring forms] in order to make any difference. It takes quite a bit of understanding of what we're looking for in order to rank those tools. They [interns] were giving everyone great rankings all the time. So, it just ended up being meaningless. And then our staff, because we were a small staff, can't just be going out to activities all the time if they're also doing trainings for different groups.

- Beyond Borders staff member

Accessibility to the SASA! communities posed a complication to both implementation and M&E. Two of the five intervention regions were further away from and less accessible to the Beyond Borders staff. This resulted in less frequent visits to these areas and/or encountering more difficulties in accessing these communities for both implementation support and monitoring.

C. SASA! Outcomes

In this next section we explore the extent to which SASA! outcomes emerged at the community level, drawing on participant reflections during the IDIs and FGDs with community members, community leaders, and the SASA! team (2010, 2012, 2014, 2016, and 2016-2017), Beyond Borders' RAS data (2010, 2012, 2014, 2016) and the results (i.e. "winning" stories) of a Most Significant Change process in 2016.



Box 3: Note on reported trends in SASA! outcomes over time





Note that some of the questions included in the 2012, 2014, and 2016 Rapid Assessment Survey were **not** included in the 2010 questionnaire. Because of this, the following sections, which focus on trends and differences seen over the course of *SASA!* implementation in Jacmel and surrounding communities, are limited to data collected between 2012 and 2016. The data collection in 2012 and 2016 occurred after the end of the Start (first) and Action (fourth) phases, respectively.





At the baseline in July 2010, available findings suggest there were already some progressive attitudes about relationship dynamics, while other topics were quite divergent from SASA! ideas.

For example, female FGD participants believed that a healthy relationship should be based on mutual respect and noted the importance of women having a voice in the relationship, both generally and particularly with regard to decisions about having sex.



Both men and women are people, so they should have the same rights in society

- Female community member

At the same time, some of the men's FGDs involved debate about whether or not women and men could truly be equal. Uncertainties were based on widespread beliefs about gender norms and religious teachings.



In human relationships, everyone should have the same rights, but according to the Bible men are always better off. He is the leader of the family.

- Male community member

It was noted in FGDs, however, that physical violence felt easier to address and intervene in compared to sexual violence. Many participants felt sexual violence was a taboo topic for discussion given its consideration as a "private" or family matter.



If it is her husband who is sexually violent with her, I might not know about it, but if it is physical violence, it's appropriate for me to help her.

- Female community member

With regard to decision-making, about half of all respondents reported that, in their own relationships, men and women had equal say in important decisions. Conversations around shared-decision making appeared more difficult with matters surrounding sex. Both men and women agreed it was uncomfortable to talk openly about things like condom use. It was commonly believed that a request for condom use in a monogamous relationship was an indicator of infidelity, leading to lack of trust and – sometimes – sexual violence or coercion.



If for whatever reason there is not trust in the relationship it is normal for the wife to require her husband to wear a condom, if she suspects he is cheating, she doesn't want to catch a disease, it's normal.

- Female community member







It's not possible for my wife to tell me to wear a condom, because sometimes you might be sincere with a person, and she has other partners, she is occasionally unfaithful, she might feel ashamed, that can lead to division between us.

- Male community member

Knowledge and Attitudes about VAW

Knowledge about Violence

Knowledge about violence increased among all respondents, in all categories measured, over the course of SASA! implementation (i.e. between the end of the second SASA! phase in 2012 and the end of the fourth phase in 2016). In FGDs conducted before the Start phase, both men and women shared examples of how they conceptualized partner abuse, such as beating and physical abuse, forced sex, verbal abuse, withholding money, and having multiple partners (without consent from all partners involved).

The most significant expansion of understanding over the course of SASA!'s implementation occurred in the domain of people's awareness about the ways in which violence impacts other outcomes. After being taken through all phases of SASA!, almost all women (96%) and 90% of men recognized that certain forms of violence (e.g. a man being unfaithful to his wife and having a second, concurrent sex partner while married) increased a woman's risk of contracting HIV. There was also a substantial increase in awareness about the fact that violence between a husband and wife can affect the children in the family. Almost all women (95%) and men (96%) said they believed that kids were impacted by witnessing beating, fighting and insults between parents.

FGD participants expanded on how they thought violence influenced children and agreed it was important to try to teach children to be non-violent. The most common suggestion on how to raise e.g. a child to learn not to use violence was to speak directly to him/her about power and violence.



Teaching non-violence starts in the household. As a couple, because the child follows the parents' example, parents should start [teaching their kids] from the age of 2 or 3 years. You start by talking with the child. What helps the most is to be a good example, don't do anything bad in front of the child. If you do [something bad] that will stay in his or her mind because the child learns from everything that happens, whether it is good or bad.

- Male community member

Attitudes about Gender roles and Violence

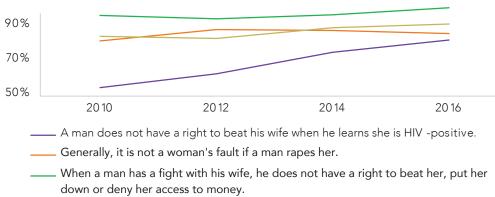
In 2010, most men and women reported baseline attitudes suggesting support of gender equitable norms and lack of tolerance of VAW. Because the RAS was revised, however, trends were measured between 2012 and 2016 only. With the exception of one response item, results from the RAS did not capture a significant change in attitudes regarding gender roles for both men and women between 2012 and 2016. The one area of notable transformation pertained to attitudes about women's decision-making surrounding sex. On average, the odds of men agreeing with the assertion that married women can refuse to have sex with their husband if they choose increased more than two-fold when comparing responses between 2012 and 2016.





Women's baseline attitudes were generally unsupportive of VAW; this intolerance of abuse grew over time (Figure 1).

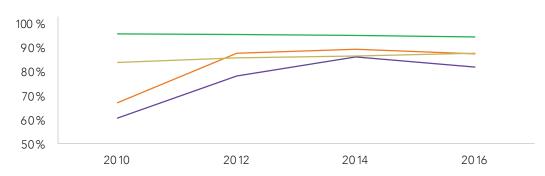
Figure 1. Trends in women's attitudes about VAW between 2010 and 2016 in Jacmel and surrounding communities, Haiti



— A woman should not tolerate abuse, humiliation and beating to keep her family together.

Between 2010 and 2016, men's attitudes (Figure 2) rejecting the acceptability of violence remained similar. In other words, a high proportion of men said they did not agree with certain examples of violence at both time points. For instance, the proportion of men who disagreed with the following statements increased over time: "When a man learns his wife has HIV, it is normal for him/he has a right to beat or abuse her" and "generally, it is a woman's fault if a man rapes her."

Figure 2. Trends in men's attitudes about VAW between 2010 and 2016 in Jacmel and surrounding communities, Haiti



- A man does not have a right to beat his wife when he learns she is HIV-positive.
- —— Generally, it is not a woman's fault if a man rapes her.
- When a man has a fight with his wife, he does not have a right to beat her, put her down or deny her access to money.
- A woman should not tolerate abuse, humiliation and beating to keep her family together.



An area where both women and men had attitudes less supportive of VAW survivors was related to offering public/social support. Fewer than half of the respondents interviewed in 2012 (35% of women and 26% of men) and 2016 (41% of women and 39% of men) believed a married woman who has been beaten by her husband has the right to tell others. Similarly, roughly half of the respondents believed others outside of a couple relationship should intervene if they know a husband beats his wife in both 2012 (56% of women and 43% of men) and 2016 (49% of women and men). Feedback from FGDs differed slightly in that participants generally felt community members were proactive in terms of intervening in situations where they saw violence occurring. Yet, several community members felt violence might still be frequently kept secret within families; if women in violent situations did not feel comfortable sharing about it and others were not aware of its occurrence, others were unable to help.



I can't say much about the violence happening here because I haven't seen it in the community. People can keep it inside their house and inside their marriage. The good thing is that, thanks to SASA! training, it [violence] can be prevented.

- Male community member

Skills & Behaviors

Women and men were asked a series of questions about their past year behaviors as they related to providing assistance in their community to help survivors of violence or speak out about the importance of preventing VAW. Findings indicate women were much more likely than men to offer direct support and assistance to women experiencing violence at home at all time points measured. The proportion of men who reported they had spoken out about violence in their community increased from 43% in 2012 to close to 50% in 2016. Women's activism went up between 2012 and 2014 (32% to 43%) but then dropped down to 31% in 2016.

It should be noted that Beyond Borders staff interpret the decrease in activism at the last data point as partly the result of a staff member secretly misusing the program meetings she led in that time period to promote a particular political candidate. These actions created mistrust and disinterest among the CAs and beyond, as well as a wish for some community members to disassociate themselves with the programming, and even a deliberate attempt by some to sabotage 2016 RAS results.



Trends in women and men's behaviors between the Awareness (2012) and Action (2016) phases of SASA! in Jacmel are shown in Figure 3.

surrounding communities, Haiti 90% 81% 78% 80% 76% 73% 70% 70% 60% 54% 50% 45% 43% 43% 40% 40% 32% 30% 25% 25% 20% 10% 0% 2012 2014 2016 2012 2014 2016 Women Men Helped a woman experiencing violence at home Heard or known of a neighbour beating a wife and did something about it

Figure 3: Trends in women's and men's behaviors between the Awareness and Action (2016) phases of SASA!: Jacmel and surrounding communities, Haiti

Across the FGDs, participants felt SASA! had brought on significant change to both men and women in the community. Participants felt women became more empowered to speak out about their experiences and knowledge about VAW and gender equity. One female participant felt that women had become more aware of themselves and their worth, less likely to stay with violent men and more likely to seek legal recourse for VAW due to exposure to SASA!. Participants noted changes in men as well, stating that they feel men had become more accountable for their actions.

■ Told others about physical abuse or forced sex by a man toward a woman



There are many changes in my personal life, in the way I used to speak to my wife and children too, how I treated students at school. There were certain kinds of jokes I used to tell that I don't tell anymore. Whenever I yell at the children or hit my children or students, my wife says, 'Be careful Pastor! What you are doing is violence!' Now I can't even remember when I last hit my children.

- Male community leader



Men have changed a lot because SASA! sat down with them together with the women and they started to understand that women are people too, same as men.

- Female member of SASA! network and leader of a women's organization that supports women experiencing violence



People come to know what violence is, there are things they just don't do now . . . now women have access to go to the doctor, their husbands can't pressure them anymore when they say they can't have sex, the men understand, and agree . . . If the person is having sex with her husband, and she tells him to put on a condom, he agrees and does so.

- Female religious leader and activist within SASA! network

Although the precise drivers of change are difficult to identify – as the RAS data is not prevalence data – community members in FGDs and the Most Significant Change processes consistently shared an overall perception of increased safety and non-violence within the home and community, with some making explicit links to SASA!.

Awareness of SASA!

Both men and women reported significant increases in their familiarity with SASA! materials and ideas. When compared to women in 2012, women in 2016 on average reported a three-fold increase in the odds of encountering SASA! materials during the last year and a 3.6-fold increase in the odds of knowing someone from their community who talks about SASA!. When compared to men in 2012, men in 2016 on average reported a 3.46-fold increase in the odds of encountering SASA! materials in the last year and a 2.36-fold increase in the odds of knowing someone from their community who talks about SASA!.

Posters and other SASA! communication materials were said to be incredibly helpful in terms of sparking discussion, raising interest and fostering critical reflection on topics related to knowledge, attitudes, skills and behaviors related to violence, gender and associated health and social outcomes, including HIV and AIDS. CAs shared that having flyers and other communication materials made them feel more confident to lead discussions and activities and helped them increase their reach to people in the community.



I have reached a lot of people. More than a hundred. It's more than that. For this reason, I see a lot of people because the population is really big. You spread the word everywhere. You can't keep it in a little drawer. You go out with a poster in your hand. Someone says, 'give me one of those!' They ask, 'what is this?' and invite them to look at it. If the person can't see, you take a moment to explain it to them, and they say give me 2 or 3 of them for me to take home with me. And the person says, 'I saw so-and-so coming along with something interesting,' and people in the neighborhood become interested also and ask, 'can you also give me 2 or 3? Can you come by and have a little talk with me?' You can't tell exactly how many people you have reached, because there are so many.

— Female Community Activist

4. Research into Action

This Learning from SASA! Adaptations in a Caribbean Setting case study illustrates the challenges and opportunities involved in adapting SASA! for the Haitian setting, which may be useful for organizations implementing or adapting SASA! in other contexts that share its characteristics (i.e. oral culture, importance of personal social relations, community mistrust of and reliance on organizations and history of slavery and/or foreign domination).

As the first SASA! adaptation outside of Africa, Beyond Borders' example points to many new learnings about the process of adaptation and implementation. When Beyond Borders commenced SASA! programming, Raising Voices did not yet have any systematic guidance on how to adapt the program to different settings and maintain fidelity to the original design. Beyond Borders responded quickly to this challenge, and effectively managed to establish a process of ongoing, concurrent adaptation and implementation in the five rural communities. Although this did not have major impact on the quality of programming or the group's ability to complete the full implementation of SASA!, it required the team a substantially longer time to get through the full cycle of intervention.



A defining feature of Beyond Borders' adaptation of SASA! was its "cultural changes" modality and the critical importance of tailoring the methodology for relevance to the Haitian communities and to reflect Haitian voices and culture in all aspects of programming. Although this adaptation learning process was time intensive, multi-staged, multi-faceted and involved a range of key groups and individuals, it was informative and educational. Beyond Borders' journey to go beyond a simple translation of SASA!, yielded rich, expansive knowledge about how the approach can be adapted to settings far different from Uganda. Beyond Borders' learnings are intended to guide and offer assistance to other organizations interested in adapting SASA! in their own context. We draw on the case study findings to propose five broad recommendations:

Recommendations

- 1. **Create a translation dictionary:** As SASA! has extensive materials that are often adapted over time, it is important to harmonize translations of nuanced terms to ensure consistency across documents. This is particularly true in oral cultures like Haiti, where language and vocabulary can change over time, from one location to another, and in response to historical and political changes.
- 2. **Implement before finalizing adapted materials:** Making changes and testing how they are received and understood in the community enables the team to incorporate findings into setting-specific activities and recommendations in an iterative manner. Also, the phased SASA! approach means that even staff leading the adaptation may not be ready to fully understand the nuances of the concepts until they reach that phase directly; waiting allows for higher quality and nuance in adaptation.
- 3. Let staff who are intimately familiar with SASA! and local communities tailor SASA!:
 Relationship norms vary by setting so all materials should be tailored to best fit the needs of each community. This includes images, language, etc. in materials and types of activities; not all activities need to be implemented if they do not work for a specific community.
- 4. **Engage the community respectfully and continuously:** Respectful, equitable power relationships among staff, CAs and other community members can be a model for the positive power described in SASA!. This is particularly important for contexts like Haiti where communities tend to mistrust organizations, and where there is a perceived history of organizations "importing" inappropriate programs and/or foreign domination. In addition, the strength of the bonds between CAs from different areas can facilitate greatly the success of implementation in communities, increase a sense of ownership, and sustain activism.
- 5. **Ensure adequate and flexible time and resources:** Sufficient human and financial resources must be available to ensure that the adaptation, implementation and evaluation of SASA! can be done comprehensively, in a culturally appropriate manner, and in a way that maintains fidelity to the original design. It is essential to the quality of a cultural adaptation that there be enough time and resource flexibility to ensure responsiveness to community feedback throughout the process.



5. Final Word

Findings from this case study highlight unique aspects of adapting and implementing SASA! for contexts like Haiti. Through the holistic and participatory process of "Haitianizing" SASA!, meaningful and lasting partnerships developed between Beyond Borders and community members living and working in and beyond the organization's areas of operation. The cultural adaptation and deep community engagement not only contributed to successful and complete implementation of SASA! between 2010-2015, but now Beyond Borders offers technical support to several Haitian organizations implementing SASA! throughout the country. Beyond Borders provides an exemplary case study for how SASA! can be adapted and implemented successfully in communities that are quite distinct from those for whom the model was originally developed. Overall, Beyond Borders's experience in the Southeast of Haiti demonstrates the feasibility of a "cultural changes" type of SASA! adaptation and reaffirms that community-wide mobilization and engagement is a viable and potentially transformative VAW prevention approach within rural, non-African programming.

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Acronyms

CA Community Activist
FGD Focus group discussion

HIV Human immunodeficiency virus

IDI In-depth interview

IPV Intimate partner violence
IRB Institutional Review Board

IRC International Rescue Committee

M&E Monitoring and Evaluation RAS Rapid Assessment Survey

UCSD University of California, San Diego

VAW Violence against women

VAWG Violence against women and girls

WPC Women's Promotion Center

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Endnotes

- 1 Abramsky, T., Devries, K., Kiss, L., Nakuti, J., Kyegombe, N., and Starmann, E. (2014). Findings from the SASA! Study: a cluster randomized controlled trial to assess the impact of a community mobilization intervention to prevent violence against women and reduce HIV risk in Kampala, Uganda. BMC Medicine, 12(122), pp. 1-17.
- 2 Estimates extrapolated from Republique d'Haiti Ministere de l'economie et des finances, Institut Haitien de Statistique et d'informatique (IHSI). (2012). Population totale, Population des 18 ans et plus menages et densites estimes en 2012. Port-au-Prince. Direction des statistiques demographiques et sociales.
- 3 WHO. (2013). Global and regional estimates of violence against women: Prevalence and health effects of intimate partner violence and non-partner sexual violence.
- 4 Institut Haïtien de l'Enfance (IHE) & ICF. (2018). Enquête Mortalité, Morbidité et Utilisation des Services (EMMUS-VI 2016-2017). Pétion-Ville, Haïti, and Rockville, Maryland, USA: IHE et ICF, p. 389.
- 5 Government of Haiti, PEPFAR, CDC. (2012). Violence against children in Haiti: Findings from a national survey. Port au Prince: VACS.
- 6 Bott, S., Guedes, A., Goodwin, M., Mendoza, J.A. (2012). Violence against Women in Latin America and the Caribbean: A comparative analysis of population-based data from 12 countries. Washington, DC: Pan American Health Organization, p. 74-75.
- 7 Small, M.J., Gupta, J., Frederic, R., Joseph, G., Theodore, M., Kershaw, T. (2008). Intimate partner and nonpartner violence against pregnant women in rural Haiti. Int. J. Gynaecological Obstet. Sep. 102(3):226-31. doi: 10.1016/j. ijgo.2008.05.008.
- 8 Campbell, D. W., Campbell, J.C., Yarandi, H.N., O'Connor, A. L., Dollar, E., Killion, C., Sloand, E., Callwood, G.B., Cesar, N.M., Hassan, M., Gary, F. (2006). Violence and abuse of internally displaced women survivors of the 2010 Haiti earthquake. Int J Public Health. Author manuscript; available in PMC 2018 Feb 19. Published in final edited form as: Int. J, Public Health. Nov. 61(8): 981–992. Published online 2016 Sep 14. doi: 10.1007/s00038-016-0895-8.
- 9 Kouyoumdjian, F. G., Findlay, N., Schwandt, M., Calzavara, L. M. (2013). A systematic review of the relationships between intimate partner violence and HIV/AIDS. PLoS One, 8(11), e81044.
- 10 Kiene, S. M., Lule, H., Sileo, K. M., Silmi, K. P., Wanyenze, R. K. (2017). Depression, alcohol use, and intimate partner violence among outpatients in rural Uganda: vulnerabilities for HIV, STIs and high risk sexual behavior. BMC infectious diseases, 17(1), 88.
- 11 Tsai, A. C., Kakuhikire, B., Perkins, J. M., Vořechovská, D., McDonough, A. Q., Ogburn, E. L., Bangsberg, D.R. (2017). Measuring personal beliefs and perceived norms about intimate partner violence: Population-based survey experiment in rural Uganda. PLoS medicine, 14(5), e1002303.
- 12 Campbell, et al., 2016.
- 13 Karamagi, C. A., Tumwine, J. K., Tylleskar, T., & Heggenhougen, K. (2006). Intimate partner violence against women in eastern Uganda: implications for HIV prevention. BMC public health, 6(1), 284.
- 14 Rhodes, K. V., Houry, D., Cerulli, C., Straus, H., Kaslow, N. J., & McNutt, L. A. (2009). Intimate partner violence and comorbid mental health conditions among urban male patients. The Annals of Family Medicine, 7(1), 47-55.
- 15 UNAIDS (Joint United Nations Programme on HIV/AIDS). (2017). Country factsheets: Haiti 2017. Retrieved from: http://www.unaids.org/en/regionscountries/countries/haiti/.
- 16 Davies, R. et al.
- 17 Ellsberg, M. et al.
- 18 Raising Voices. (2018). Adapting SASA!: Tips and Tools. Programming for Prevention Series. Kampala: Raising Voices. Available at http://raisingvoices.org/resources/#programming-for-prevention-series.
- 19 Raising Voices. (2017). Fidelity to the SASA! Activist Kit. Programming for Prevention Series, Brief No. 2. Kampala: Raising Voices. Available at http://raisingvoices.org/wp-content/uploads/2017/05/ProgramBrief2.FidelitytoSASA. RaisingVoices.may2017.pdf.
- 20 Ibid.