PROCESS EVALUATION OF THE DEVELOPMENT OF A COMMUNITY-BASED PARTICIPATORY INTERVENTION PROMOTING POSITIVE MASCULINITY AND PEACE AND SAFETY: ADDRESSING INTERPERSONAL VIOLENCE IN A WESTERN CAPE COMMUNITY

by

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DECLARATION

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I declare that ***Process Evaluation of the development of a community-based participatory intervention promoting positive masculinity and peace and safety: Addressing interpersonal violence in a Western Cape community*** is my own work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references.

_____   12 November 2015

SIGNATURE   DATE

(Mrs)

ABSTRACT

Given the high rates of male homicides, victimisation and the perpetration of violence by men in South Africa, the prevention of interpersonal violence among males constitutes a major public health priority. The lack of effective strategies to address the onset and effects of exposure to violence foregrounds the need for innovative strategies to address this problem in South Africa. Within this context, this doctoral study's primary research objective was to evaluate the processes and steps used to plan, design and develop a community-based violence prevention intervention that mobilised spiritual capacity and religious assets to promote positive forms of masculinity, and peace and safety. This doctoral research was part of a broader study entitled, 'Spiritual Capacity and Religious Assets for Transforming Community Health by Mobilising Males for Peace and Safety' (SCRATCHMAPS), which aimed to identify and mobilise spiritual capacity and religious assets, in particular communities in South Africa and the USA, in order to address interpersonal violence. This study was framed by a critical public health lens, and was guided by a Community-based Participatory Research (CBPR) orientation and community engagement strategy throughout every step of the development of the intervention and the initial evaluation of the manual development process. The overall research design was a participatory process evaluation. Methods used for this process evaluation included community asset mapping, surveys, focus group discussions, research-based workshops, diary reflections, a photo-documentary, meeting minutes, process notes and participatory observations. The analysis of the multiple sets of data was conducted appropriately, relevant to the particular data collection methods pursued and the demands of both qualitative and quantitative methods of analysis. Findings from this study confirm the utility and efficacy of using a critical public health framework enacted through CBPR for developing an intervention that addresses the complexity of violence. The results further demonstrated that a strength or asset-based, gender-sensitive approach, with men working alongside women, is conducive to promoting positive forms of masculinity to create safety and peace.

Key words: Community intervention; community-based participatory research; process evaluation; gender; masculinities; safety and peace promotion; violence prevention; spiritual capacity; religious assets.

DEDICATION

This dissertation is dedicated to my loving husband and best friend, Ihsaan, for his immeasurable emotional support, encouragement as well as his unwavering belief in me, especially during the most difficult time of both our lives. He has served as my greatest source of inspiration. He has supported, guided, inspired, nudged, pulled, pushed, and driven me as I have pursued my PhD. I cannot fathom the magnitude of his never-ending love, devotion, faith, friendship, and selfless sacrifices on behalf of my success amidst his own busy community and academic life. You deserve the greatest respect, love, and thankfulness for hanging in there while I took four long years to pursue my dream. Thank you!

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Forms of Masculinity

CHAPTER 1

INTRODUCTION AND MOTIVATION

You must not lose faith in humanity. Humanity is an ocean; if a few drops of the ocean are contaminated, the ocean does not become contaminated. Remain positive in your quest for social change.

(Adapted from Mahatma Gandhi, n.d. *Brainy Quote.com*)

1.1 Background of the Study

A cursory glance at global and local media reveals that violence is a major challenge across the globe, and has been identified as a leading universal public health problem (Jewkes, Flood, & Lang, 2015; Krug, Dahlberg, Mercy, Zwi, & Lozano, 2002; Rosenberg et al., 2006; Rutherford, Zwi, Grove, & Butchart, 2007) requiring urgent attention (Seedat, Van Niekerk, Jewkes, Suffla, & Ratele, 2009). Violence has been estimated to constitute 26% of all injury-related deaths globally (Krug et al., 2002).

Violence can be defined as "the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group, or community that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment, or deprivation" (Krug et al., 2002, p. 5). Ward (2007) asserts that this definition has a number of important implications. This definition, firstly, includes an explicit intention to cause harm and, thereby, excludes unintentional injuries; it secondly contains the word 'power' and the articulation 'use of physical force', thereby expanding the definition to include those acts that may ensue from the abuse of a power relationship, for example, threats and intimidation, typically associated with interpersonal violence.

Interpersonal violence, in particular, has been found to be one of the leading causes of age and sex-specific disability-adjusted life years (DALYs) causing around 1 million (6.5%) of all DALYs (Norman, Matzopoulos, Groenewald, & Bradshaw, 2007). Interpersonal violence, the focus for this study[1], denotes violence that occurs between individuals, and is subdivided into the following: (1) family and intimate partner violence, which includes child maltreatment and

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[1] The findings of this research do refer to other aspects of violence and safety and peace promotion, but this was not the primary focus for this study.

violence between intimate partners and elder abuse; and (2) community violence, which can be broken down into acquaintance and stranger violence (Krug et al., 2002). This type of violence covers violence that transpires between individuals who are unrelated, and comprises youth violence, rape or sexual assault by unknown persons, random incidents of violence, and violence in institutional locales such as schools, workplaces, frail-care homes and prisons (Sethi, Marais, Seedat, Nurse, & Butchart, 2004).

Interpersonal violence was ranked by the Institute for Health Metrics and Evaluation (2013) as the third highest amongst the top 25 causes of years of life lost (YLLs) due to premature deaths in South Africa in 2010. The latest South African Police Services (SAPS) statistics paint a bleak picture, indicating a steady increase in violent crime from 2014 to 2015, with unacceptably high levels of interpersonal violence. Reported cases of assault with intent to inflict grievous bodily harm increased by 0.1% from 182 333 cases in 2014 to 182 556 in 2015, attempted murder increased by 3.2% from 16 989 cases in 2014 to 17 537 cases in 2015, and murder increased by 4.6% from 17 023 cases in 2014 to 17 805 cases in 2015 (SAPS, 2015).

Notwithstanding the above, these published figures represent only part of the true picture on the extent and distribution of violence in South Africa. Due to underreporting and deficient violence surveillance systems (Krug et al., 2002; Sethi et al., 2004; Shabangu, 2011), numerous incidences of violence remain within the so-called "dark figure" of crime. Sethi et al. (2004) note that physical and sexual assaults occur daily, but exact national estimates are lacking, partly due to underreporting. According to Shabangu (2011), domestic violence and rape, for example, are regarded to be the most underreported forms of violence, with domestic violence regarded as the most common type of interpersonal violence. Official statistics are therefore regarded unreliable (Shabangu, 2011). It has been argued by Newham (2013) that the absence of regularly accessible and published crime statistics greatly undermines the capacity of communities, business, government departments and non-governmental organisations to identify and respond appropriately to emerging crime threats (including those associated with violence). Newham (2013) emphasises that South African crime statistics are not only outdated, but a present lack of regularly available data hampers the development, implementation and evaluation of interventions. Citing the example of Bogota, Columbia where the monthly release of crime statistics reduced the murder rate by 71%, through a multi-sectoral partnership (including the community, the criminal justice system, universities, government and non-governmental organisations), he suggests that the SAPS should follow

this example and make such information available on a regular monthly basis. This initiative led to numerous community-led violence prevention initiatives tailored to the community's specific needs.

Global evidence reveals that males are more likely to be killed as a result of violence than females (Krug et al., 2002; Norman et al., 2007; Rosenberg et al., 2006). According to the World Health Report on Violence and Health (Krug et al., 2002), males accounted for 77% of all homicides across the globe. This amounts to more than thrice the rate of homicide for females. The report also highlights that the highest rates of homicide are found amongst males aged 15–29 years (19.4 per 100 000). Of the total number of deaths, 34% are due to interpersonal violence (Rosenberg et al., 2006), with the highest incidence of intimate partner violence perpetrated by males against female partners (Krug et al., 2002).

In concert with global trends, the characterisation of violence in South Africa is also predictably gendered in terms of who the perpetrators are and who the victims of violence are (Morrell, 2002; Van Niekerk, 2011). The homicide rate for males in South Africa is 6.5 times higher than the homicide rate for females (Donson, 2008). Homicide rates are concentrated amongst young males aged 15 to 29 (184 per 100 000 of the population) (Norman et al., 2007; Seedat et al., 2009), placing South Africa's contact crime statistics amongst the highest globally. It is important to note that there are over 130 gangs in South Africa with a collective membership of approximately 100 000 (Zille, 2012). Gangs are grounded in a culture that promotes violence (Standing, 2005) where the affirmation of manhood is expressed by showing physical strength (Eriksson, 2011). In South African prisons, where 98% of the total number of prisoners (162 162) are male (Department of Correctional Services, 2011/2012), prison gangs are notorious for using the male body to structure gender and power through violence perpetrated against "weaker males". Gender refers to "the attitudes, feelings, and behaviours that a given culture associates with a person's biological sex" (American Psychological Association, 2011, unpaginated).

Numerous explanations have been proffered for interpersonal violence. Whilst various structural risks relating to the legacies of apartheid and socio-economic marginalisation (such as income inequality) are key risk factors for violence (see, for example, Altbeker, 2008; Brankovic, 2012; Davies & McPherson, 2011; Lazarus, Tonsing, Ratele, & Van Niekerk, 2011; Seedat et al., 2009), masculinities (a set of beliefs and expectations about what men should and

should not do in relation to the construction of manhood), has been identified as a major area of risk (Bird, Delgado, Madrigal, Ochoa, & Tejeda, 2007; Lazarus et al., 2011; Morrell, 2002). Direct associations have been found between violence and the construction of masculinities. These risks have been specifically underscored within contexts of historical colonisation (Brankovic, 2012; Lazarus, Ratele, Seedat, Suffla, & Paulse, 2009; Seedat et al., 2009). Violence represents grave immediate and future long-term consequences for health and psycho-social well-being for individuals, families, communities and nations (Krug et al., 2002). Victims of interpersonal violence are not only susceptible to physical injury, but also various behavioural and mental-health problems including post-traumatic stress disorder and high risk health behaviours such as smoking, substance misuse and becoming perpetrators and victims of violence themselves in the future (Sethi, Hughes, Bellis, Mitis, & Racioppi, 2010). The current high levels of interpersonal violence along with contributory risks and devastating consequences underscore the need for innovative strategies to address this problem in South Africa.

1.2 Violence Prevention Initiatives

The prevention of violence, including interpersonal violence, in South Africa has been identified as a public health priority (Butchard & Emmett, 2000; Peacock & Levack, 2004; Ratele, Suffla, Lazarus, & Van Niekerk, 2010). Sethi et al. (2010) note that to date, the bulk of societal responses to violence has been to protect people from violence by means of criminal justice response. A criminal justice approach to interpersonal violence prevention focuses on the deterrence of potential violence at the individual level through the threat of punishment for violence. This approach emphasises justice and deserved punishment. Sethi and colleagues (2010) contend that such an approach may be effective to deter violent behaviour at the individual level, but it is not adequate for the primary prevention and mitigation of the outcomes of interpersonal violence at the population level. Another shortcoming of a criminal justice approach is that much interpersonal violence remains outside the awareness of the criminal justice system. There has, however, been a shift in thinking to increasingly accepting violence as a societal problem that can be prevented through evidence-based action (Sethi et al., 2010).

Rosenberg and colleagues (2006) argue that even though the evidence base on how to prevent violence has been expanding rapidly, a huge gap remains concerning effective strategies for decreasing the health burden related to interpersonal violence. South African programmes are

often constructed on the grounds of what their champions believe to work in contrast to being informed by evidence (Parker, Dawes, & Farr, 2004; Steyn, 2005). Moreover, whilst there are available programmes in South Africa, Hurst (2002) highlights that numerous generic, standardised prevention initiatives have originated in the USA, which views and approaches men globally in a limited manner. He argues that these initiatives "present limited opportunities to understand and engage men at the local level around local issues" (pp. 8-9). Thus, there is a need for community-based alternatives for men to help change violent behaviour. He concludes that what is needed is the development of programmes that fit the local context, where local cultural issues pertaining to masculinity and engagement can be identified, understood and worked with. Others also emphasise the importance of consultations with traditional and religious leaders, local groups and prominent figures within communities when designing and implementing programmes (Krug et al., 2002), highlighting the need for participatory strategies to develop intervention programmes.

Despite the seriousness of this challenge in this country, very little has been done to mobilise people across boundaries to address this issue. David Bruce (2010), in his recent report to the Centre for the Study of Violence and Reconciliation (CSVR), recommends that in the same way as South Africans mobilised against political violence in the mid-1990s, the potential exists to mobilise community level activism against violence. He suggests that such initiatives could include utilising community leaders to advocate against violence, and working together with communities to develop and implement programmes of action against violence. Religious congregations in particular, according to Mayer (2002), have the capacity to mobilise and get people involved in tackling various challenges.

1.3 Motivation for the Present Study

Drawing on the aforementioned statistics, one can surmise that interpersonal violence is a gendered phenomenon. As indicated by Fagan and Browne (1994, p. 169), "men are more violent than women – both inside the home and in the public sphere," but men are at the same time also the predominant victims of violence (Lazarus et al., 2011; Mc Donald, 2009). Masculinity, which refers to the perceived and accepted ideas and standards on how men are supposed to or are expected to behave in a particular setting (Connell, 1995), is a cultural construct characterised by certain traits, including toughness, power, control, independence, restricted emotions, physical and sexual competence, and aggressiveness amongst others (Canham, 2009). Positive forms of masculinity have been argued to include male ways of

caring, perseverance, loyalty, healthy self-reliance, dedication, humour, positive fatherhood, male group orientation and worker-provider tradition (Kiselica, Englar-Carlson, Horne, & Fisher, 2008; Levant, 1992). Positive forms of masculinity can, therefore, be viewed as positive and peaceful ways of being and existing that are characterised by non-violence, gender equity, care, emotional responsiveness, resilience and positive fatherhood. The promotion of positive forms of masculinity is a fairly new field, suggesting that the development and evaluation of a violence prevention initiative focusing on the development of positive forms of masculinity is ground-breaking. Whilst it is essential to focus on women and girls in order to address the gender disparities in South Africa, Barker and Ricardo (2005) emphasise that gender mainstreaming has repeatedly disregarded the gender of boys and men.

Interpersonal violence prevention policymakers have highlighted the importance of documenting and evaluating violence prevention initiatives in order to propel long-term investment, ensure effectiveness and facilitate replication of such strategies (Matzopoulos, Bowman, Mathews, & Myers, 2010). Academics have, however, brought to light the paucity within the field of effective interpersonal violence prevention strategies for both preventing violence and addressing the concomitant health burdens (Dahlberg, 1998; Rosenberg et al., 2006; Seedat et al., 2009; Songer et al., 2009).

Whilst there are a number of local initiatives to address interpersonal violence, there remains a dearth in the evaluation of such initiatives in the South African context (see Parker et al., 2004). Based on a review of existing South African violence prevention interventions, researchers have highlighted that South Africa currently lacks sound evaluation research on violence prevention initiatives, with programme developers tending to have evaluations done afterwards (Farr, Dawes, & Parker, 2003). There is thus a gap between the knowledge produced through studies and the application and evaluation of such findings to enhance violence prevention practices. The Centres for Disease Control and Prevention (CDC, 2012) highlight that even though research determining what works in preventing violence has been growing steadily, translation of this knowledge is sorely lacking.

Whilst the literature endorses the promotion of positive forms of masculinity as an interpersonal violence prevention initiative (Barker & Ricardo, 2005; Bird et al., 2007; Esplen, 2006; Jewkes, Sikweyiya, Morrell, & Dunkle, 2011; Kiselica & Englar-Carlson, 2010; Lazarus

et al., 2011), it has rarely been translated into practice, and in the few instances where programmes have been developed, most of them have not been evaluated.

Promoting constructive, non-violent and egalitarian ideas of masculinity or positive forms of masculinity remains a relatively untapped resource (Kiselica & Englar-Carlson, 2010) that represents a possible protective factor and a key focus for violence prevention (Lazarus, Tonsing, Ratele, & Van Niekerk, 2009; 2011). By drawing attention to the positive, as proposed in this study, males can shift their focus to aspects of themselves that are good, ingenious, successful, capable, caring and kind (Kiselica & Englar-Carlson, 2010), and thereby contribute to community safety and peace.

Notwithstanding the role of religion in perpetrating violence, spiritual capacity and religious assets embody possible resources that can be drawn on to combat violence and promote peace and safety (Laher, 2008). Religious assets in this context denote locally entrenched religious images, principles, practices, people and organisations, which can be mobilised through local and outside agency to bring about action to heal and promote peace and safety (Cochrane, 2006). Spiritual capacity refers to "that which animates action, compassion, solidarity in the fullness of life, rooted in the remarkable human ability to imagine something that does not exist and bring it into being; transcending what is and anticipating what is possible, hence rooted in creative freedom… which can be turned to either destructive or generative possibilities, always in relation to others and our environment … and is expressed in various particular forms of spirituality" (Cochrane et al., 2015, p. 5). Using a spiritual capacity and a religious assets approach also constitutes an unexplored avenue that may be mobilised to promote positive forms of masculinity.

Numerous factors endow religions, religious practices, institutions and spirituality as a vast and under-utilised resource for violence prevention (Lazarus, Seedat, & Naidoo, 2009; Reychler, 1997). Religious communities are in command of large and inimitable social, moral and spiritual assets that can be utilised to transform conflict (Vendley, 2005) and address violence. The coordination and mobilisation of the collective assets of religious communities (both tangible and intangible) could enhance their effectiveness and usefulness (Vendley, 2005).

1.4 Study Aims and Objectives
It is clear from the above discussion that there is a great dearth of violence prevention

initiatives, a lack of sound evaluation of such initiatives, and a need to focus on the promotion of positive forms of masculinity as a method for addressing interpersonal violence.

This doctoral research was part of a broader study entitled SCRATCHMAPS (Spiritual Capacity and Religious Assets for Transforming Community Health by Mobilising Males for Peace and Safety) which aimed to identify, understand and mobilise spiritual capacity and religious assets in particular communities in South Africa and the USA in order to address the challenges of violence in general, and the involvement of men as perpetrators and victims of violence in particular. The overall objectives of the broader study were (a) to develop conceptual and theoretical frameworks, (b) to identify spiritual capacity and religious assets in local communities and to understand the processes and dynamics by which they work, (c) to develop, implement and evaluate an intervention that mobilises spiritual capacity and religious assets to promote safety and peace, with a particular focus on promoting positive forms of masculinity (the focus for this doctoral study), and (d) to contribute to the knowledge-base and practical understanding of community engagement as it is expressed through a Community-Based Participatory Research (CBPR) approach.

The primary aim of this doctoral study was to evaluate the processes and steps used to plan and develop a community-based violence prevention intervention that mobilises spiritual capacity and religious assets to promote positive forms of masculinity and peace and safety. The specific research objectives were as follows:

1. To conduct an in-depth review of the literature on best practices in violence prevention and safety and peace promotion relating specifically to the mobilisation of spiritual capacity and religious assets to promote positive forms of masculinity;
2. To record and evaluate the research preparation process conducted as the groundwork to developing the violence prevention intervention that mobilised spiritual capacity and religious assets to promote positive forms of masculinity and safety and peace;
3. To document and evaluate the planning and development of an appropriate intervention that mobilised spiritual capacity and religious assets to promote positive forms of masculinity and safety and peace, drawing on best practices identified through the literature review and the collective wisdom of the local community; and

4. To reflect on the CBPR community engagement process in the development and evaluation of the violence prevention intervention that focuses on the promotion of positive forms of masculinity and safety and peace by mobilising spiritual capacity and religious assets.

Whilst the broader SCRATCHMAPS project focused on the entire planning, development and evaluation process, including outcomes evaluation, this study only focused on the planning and development phases as well as the initial evaluation of the intervention manual.

1.5 Theoretical Framework

This study is framed by a multi-theoretical framework that comprises a combination of theories to provide a multi-theoretical conceptualisation to understand key concepts, and to guide the development of interventions. In a report released by the Crime, Violence and Injury Lead Programme (Lazarus, Tonsing et al., 2009, p. x), the authors highlight the need for a "responsive critical public health approach to understanding violence" and propose the use of an integrated framework that "intentionally brings together a systemic, multi-level approach with a critical analysis of power dynamics that cut across the levels" of the ecological systems. Accordingly, this study includes a combination of critical, public health and ecological approaches, embedded in an emergent conceptual framework which materialised as a key output of the broader SCRATCHMAPS study. The SCRATCHMAPS conceptual framework includes the concepts of health, peace and safety promotion; masculinity and violence prevention, and spiritual capacity and religious assets.

The central issues from a critical perspective include historical problems of domination, alienation, emancipation, transformation, social struggles, liberation, and removal of structural contradictions by taking a suitable course of action, and envisioning new and innovative possibilities (Babbie & Mouton, 2006). A critical approach is characterised by a human rights standpoint; a commitment to transformation, and a deliberation of issues like power and oppression, especially regarding racial dynamics, feminism and masculinity (Ratele et al., 2010). Contemplations of power in South Africa cannot be viewed without considering the country's historical context, which compels researchers to consider the effects of history, historically related trauma, and the effects of unemployment, unequal income, gender disparities as well as infrastructural and racial inequalities (Ratele et al., 2010).

It has been postulated that successful prevention approaches to violence utilise a public health approach that takes account of the size of the problem, the risk factors, and the evidence on what works and then implements these on a wider scale (Sethi et al., 2010; WHO, 2007). This includes a commitment to prevention, the application of scientific methods to attain this goal, and the conviction that effective public health actions call for and entail collaboration and cooperation across various scientific disciplines, non-governmental and community-based organisations, societal sectors and political entities at all levels (Mercy, Krug, Dahlberg, & Zwi, 2003).

An ecological framework has been used expansively by public health and other researchers and practitioners for investigating and understanding violence (Rutherford et al., 2007). The ecological systems perspective proposes that individuals are embedded within the context of a dynamic, interactive system of relationships that constitutes their environment (Paquette & Ryan, 2001). To understand the complexity of why an individual perpetrates or becomes a victim of violence, we must see the individual within the context of these environments or levels including the individual, relationship, community, and societal levels. Although each level represents a level of risk, it can also be viewed as a key point for intervention (Krug et al., 2002). Violence is multifaceted, so it needs to be addressed across as many levels of the system as possible or appropriate, founded on an assessment of essential levers for change (Krug et al., 2002; Ratele et al., 2010).

This study was guided by the values and principles of a community-based participatory research approach (CBPR), which is congruent with a critical perspective. Over the last decade, the field of public health has witnessed a proliferation in the use of CBPR as an approach for addressing public health priorities (D'Álonzo, 2010; Israel, Eng, Schulz, & Parker, 2005; Strickland, 2006; Viswanathan et al., 2004; Wallerstein & Duran, 2008) including developing culturally focused interventions through a collaborative research process that centrally involves communities in the planning, development, implementation and evaluation of such interventions (Ahmed, Beck, Maurana, & Newton, 2004; Balcazar et al., 2004; Minkler & Wallerstein, 2008; Sandoval et al., 2012).

It could be argued that proliferation in the use of CBPR emerged from a mistrust of academic researchers and scientific institutions that have been accused of conducting research that is manipulative, does not benefit community (Ahmed, Beck et al., 2004), and serves researchers'

own selfish interests in contrast to improving the lives of community members (Freudenberg, 2001; Higgins & Metzler, 2001). This tainted history has resulted in feelings of marginalisation, suspicion, distrust, and anger among community members towards academia and researchers (Eisinger & Senturia, 2001) giving rise to communities themselves not being easily disposed or eager to be researched or insisting on playing an active role in research (Ahmed, Beck et al., 2004; Eisinger & Senturia, 2001).

Impelled by a need to attend to health disparities, an increasing number of funding agencies and communities are stipulating the use of alternatives to conventional research to deal with complex health and social challenges such as violence (D'Alonzo, 2010). In light of the above, this study was intentionally guided by the principles of CBPR and the critical lens.

1.6 Summary of the Research Methodology

The research design for this study was a descriptive-longitudinal intrinsic community case study. It used a multi-method design that was analysed through both qualitative and quantitative methods within a participatory process evaluation framework. Participatory evaluation is consistent with the CBPR approach followed in this study. Both focus on empowerment and equitable community participation. This approach respects and values the voices, preferences, viewpoints and decisions of the most affected, marginalised and least powerful stakeholders and program beneficiaries (Rossman, 2000; Zukoski & Luluquisen, 2002).

The study took place in Erijaville, an under-resourced community in the Helderberg Basin about 4 kilometres outside Strand in the Western Cape. The specific strategy that was used for selecting participants in this study was non-probability sampling, in particular purposive sampling and convenience sampling. Data sources included literature reviews, community asset mapping workshops, evaluation questionnaires of the workshops and notes, focus group discussions, diary notes of academic researchers and of local research team members, research team and advisory committee meeting notes, photodocumentaries, the Delphi method panel process, and local Strand conferences. The data sets were used for the process evaluation of the initial community engagement phase (Phase 1), for the asset mapping phase (Phase 2), and for the intervention development and evaluation phase (Phase 3).

As part of the initial groundwork, this study undertook an evaluation of existing interpersonal

violence prevention initiatives by conducting a qualitative meta-synthesis in order to identify the best practices in violence prevention. This was followed by the initial community engagement strategies and focus group discussions (FGDs) with community members and service providers. Asset mapping workshops were then conducted to identify community conceptions of spiritual capacity and religious assets, identify spiritual capacity and religious assets within the local community, and to understand the processes and dynamics by which they work. This was followed by the collective and organic development of the intervention that focuses on the promotion of positive forms of masculinity by mobilising spiritual capacity and religious assets. The intervention manual was then developed and evaluated through various participatory methodologies.

1.7 Thesis Organisation

Chapter one contextualised the study by providing background information on the magnitude of interpersonal violence in post-apartheid South Africa, highlighting the phenomenon of 'masculinity' as a pervasive factor in the perpetration and victimisation of violence. It then foregrounded the need for effective interpersonal violence prevention initiatives. This was followed by a discussion of the motivation and justification for the study, and a presentation of the study's aims and objectives. Thereafter, a summary of the theoretical framework and methodology that underpins this study were provided.

In chapter two, a comprehensive literature review of scholarly works on violence prevention is presented. The review particularly focused on available literature that pays attention to violence prevention, the mobilisation of spiritual capacity and religious assets, and the promotion of positive forms of masculinity. This chapter outlines the risk and protective factors for violence, discusses strategies for addressing interpersonal violence, and deliberates on spiritual capacity and religious assets as resources for violence prevention and how these assets can be mobilised to promote positive forms of masculinity. This chapter concludes with a qualitative meta-synthesis of existing programmes, focusing on preventing interpersonal violence with a specific focus on the promotion of positive forms of masculinity and safety and peace.

Chapter three, the second literature review chapter, provides an overview of CBPR as a participatory approach to conducting research and presents a definition for CBPR. It outlines the historical origins of this approach and the core principles of CBPR. The chapter concludes with a summary of the key challenges faced by researchers using this approach, strategies for

dealing with these challenges, and evaluating and appraising the use of CBPR in community initiatives.

Chapter four provides insight into the theoretical perspectives within which this study is situated (i.e., the critical, public health and ecological frameworks). This chapter provides a brief overview of the origins and historical developments of each perspective, the major hypotheses of these theories, their perspective on the phenomenon under study, and their strengths and limitations. This chapter then provides the motivation as to why a combined approach, cutting across paradigm borders, would be more suitable to understand and addressing interpersonal violence involving males as both victims and perpetrators. Thereafter, the theories of change that inform violence prevention interventions are deliberated.

Chapter five describes the process evaluation methodology including the research perspective and research design that provides an overview of the phases of the research project. The chapter then provides an overview of the target population and community where the study was conducted, explains the selection of participants and context, and describes the data collection strategies as well as the methods used to ensure reliability and validity. The instruments employed to collect the data as well as statistical procedures used to analyse the data are then presented. Ethical considerations are then outlined.

In chapters six, seven and eight, the results and discussion of the study are presented in the form of a chronological narrative. In chapter six, the study setting is re-constructed, thereby providing the context for the study; the initial community engagement strategy pursued in this study is recounted; the establishment of the local structures and the research preparation process is evaluated; and the sequence and flow of the asset mapping process and the exploration of the key concepts is re-presented. Chapter seven provides a summary of masculinities and violence prevention initiatives extracted from a broad scan of the literature. Chapter eight then reflects on the collective and organic development of the intervention, and recounts the application of the CBPR principles and enactment of community engagement values in the research process.

Finally, chapter nine presents a detailed conclusion of the study. The chapter presents a summary of key research findings, provides recommendations, outlines the limitations of the study, and provides suggestions for further research and final concluding reflections.

CHAPTER 2

LITERATURE REVIEW:

PREVENTING INTERPERSONAL VIOLENCE BY PROMOTING POSITIVE

FORMS OF MASCULINITY TO CREATE SAFETY AND PEACE

Nonviolence means avoiding not only external physical violence but also internal violence of

spirit. You not only refuse to shoot a man, but you refuse to hate him

(Martin Luther King, Jr., 1986, *A testament of hope: The essential writings and speeches of*

Martin Luther King)

2.1 Introduction

The previous chapter provided an introductory background to the current study by rendering an account of violence in South Africa and abroad, demonstrating the paucity in the research that this study addresses. The key focus of this study was to evaluate the processes and steps used to plan and develop a community-based violence prevention intervention that mobilised spiritual capacity and religious assets to promote positive forms of masculinity and peace and safety.

This chapter presents a comprehensive overview of the most pertinent findings on violence[2] prevention as explored by other researchers. The review focuses particularly on available literature that pays attention to the mobilisation of spiritual capacity and religious assets, and the promotion of positive forms of masculinity in the context of interpersonal violence prevention.

This chapter commences with an overview of violence prevention and, thereafter, outlines the risk factors that predispose individuals to interpersonal violence, focusing particularly on negative forms of masculinity as a key risk factor for violence for males. This is followed by an overview of protective factors for violence, including information on positive forms of masculinity. Next, strategies for addressing interpersonal violence are highlighted, including violence prevention through safety and peace promotion, and the promotion of positive forms of masculinity as a violence prevention strategy. This is followed by a focus on spiritual capacity and religious assets as a resource for violence prevention, and more information on

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[2] Whilst the findings of this research also refer to other aspects of violence and safety and peace promotion, this was not the primary focus for this study.

promoting positive forms of masculinity are discussed. This is then followed by an important first step in the development of interventions, i.e., a methodical documentation of existing intervention programmes relevant to the focus of this study (see Craig et al., 2013; Rosenberg et al., 2006). This systematic documentation comprises a qualitative meta-synthesis of existing programmes focusing on the prevention of interpersonal violence with a specific focus on the promotion of positive forms of masculinity.

2.2 Violence Prevention

Violence prevention has been identified as a public health priority in South Africa (Butchard & Emmett, 2000; Peacock & Levack, 2004; Ratele, Suffla, Lazarus, & Van Niekerk, 2010; Seedat et al., 2009), and in the Western Cape in particular (Matzopoulos & Myers, 2014). This concern has triggered a call by many experts in the field of violence for the need to determine effective ways to address the onset and effects of exposure to violence (Dahlberg, 1998; Parker et al., 2004). In response to the extraordinarily high occurrence of, and health burden resulting from interpersonal violence (discussed in some detail in the previous chapter), the provincial Department of Health initiated a Provincial Violence Prevention Policy Framework that has been adopted by the Western Cape Government (Matzopoulos & Myers, 2014). Notwithstanding the adoption of this provincial policy framework, it has been argued that the prevention of interpersonal violence, the focus of this study, is challenging as the causal and maintaining determinants are complexly rooted within different ecological levels (see Lazarus et al., 2011; Matzopoulos & Myers, 2014; Parker et al., 2004).

Prevention in this context implies stopping acts of interpersonal violence from taking place by intervening to eradicate or decrease the underlying risk factors, and to bolster the protective factors, or to lessen the recurrence of additional violence and its occurrence (Rutherford et al., 2007; Sethi et al., 2004). Violence prevention, therefore, seeks to ward off the occurrence of or diminish the damage from violence (Cochrane et al., 2015). The primary goal of prevention is therefore to transform the balance between risk and protective factors so that the outcome of protective factors surpasses the outcome of risk factors (Hawkins, Catalano, & Arthur, 2002; National Institute on Drug Abuse 2003; Watson, White, Taplin, & Huntsman, 2005), thereby lessening the damage that may be incurred by violence.

The typology of violence prevention has been classified along two dimensions (Dahlberg & Krug, 2002; Flannery & Williams, 1999; Rutherford et al., 2007). One dimension relates to

time, and classifies interventions according to their location in the series of risk factors alongside the situational determinants that were present before the occurrence of violence as well as after the violence has taken place and the consequences experienced by victims and perpetrators. Three levels of intervention are identified on the time dimension: primary, secondary and tertiary prevention. Primary prevention includes any prevention initiatives aimed at stopping violent events before they actually occur, for example promoting respectful non-violent relationships. Secondary prevention includes strategies that focus on the immediate responses to violence, and is aimed at reducing the harm that comes about when violent incidents occur and immediately post-violence intervention; it thus focuses on preventing re-victimisation. Examples of secondary approaches include emergency services treatment for rape victims. Tertiary prevention includes all approaches aimed at long-term care following violence, which includes rehabilitating and treating victims and perpetrators, and enabling their reintegration into society. Tertiary prevention aims to reduce trauma or lessen the long-term disabilities linked to violence. These three prevention levels are defined in terms of their temporal aspect (i.e., whether prevention occurs before violence takes place, immediately afterwards or over a longer period).

The other dimension along which violence prevention strategies are classified concerns the target population, and spans from prevention strategies that involve everybody to strategies that target victims and perpetrators specifically, or particular high-risk groups (Sethi et al., 2004). Dahlberg and Krug (2002) and others (e.g., Kerns & Prinz, 2002; Sethi et al., 2004) differentiate between three strategies classified in terms of the target group of the intervention: universal, selected and indicated interventions. Universal interventions include approaches aimed at groups or the general population short of individual risk, and it includes intervention programmes delivered to all children of a particular age or community-wide media campaigns. Selected interventions include approaches targeting those considered to be at increased risk for violence even though early signs of violence may not yet have occurred. The selected facet may be any of a variety of factors, including exposure to domestic violence (Kerns & Prinz, 2002). Indicated interventions include interventions targeting those who have already exhibited violent behaviour, and these interventions include workshops for perpetrators of domestic violence.

Parker et al. (2004) propose a combined classification of violence prevention embracing both time and target population. They maintain that "primary prevention is universal and population-

based"; secondary prevention "target[s] selected groups at high risk for violent conduct due to their proximal extra-familial social contexts or interpersonal factors", and tertiary prevention targets "clinical populations who have already sought help and who have already been diagnosed with conduct or other antisocial disorders" (Parker et al., 2004, p. 17).

Seedat et al. (2009) note that, whilst considerable success has been accomplished in bolstering responses once violence has occurred, the biggest challenge in reducing the burden of violence lies in primary prevention. Numerous efforts to prevent violence have to date concentrated on secondary and tertiary responses. Whilst dealing with the immediate aftermath of violence is important, Dahlberg and Krug (2002) note that such responses should be an adjunct to primary prevention strategies. Sethi et al. (2010) highlight that the evidence supporting primary prevention initiatives that reinforce protective factors is more robust than the support for strategies that seek to reduce violence once it has emerged (i.e., referring to secondary and tertiary responses).

As mentioned in Chapter 1, this study adopted a public health framework for violence prevention. This approach is an interdisciplinary science-driven, multi-sectoral, population-based approach rooted in the ecological model, which promotes primary prevention (Butchart, Garcia-Moreno, & Mikton, 2010). Public health is characterised by an emphasis on prevention. Dahlberg and Krug (2002) note that public health emphasises prevention, which emanates from a strong conviction that violence and its outcomes can be prevented. Prevention approaches within this framework are oriented to preventing the occurrence of, or reducing the damage from, specific health problems (Lazarus, Tonsing et al., 2009).

The public health approach to violence includes four key steps that move from problem to solution (Dahlberg & Krug, 2002): (1) uncovering considerable basic knowledge about the various aspects (including magnitude, scope, characteristics and consequences) of violence; (2) conducting research to ascertain the causes and risks that predispose individuals to violence and identifying the factors that could be modified through interventions; (3) exploring ways to prevent violence, utilising the information emerging from the above investigation to design, implement, monitor and evaluate interventions; and (4) implementing and evaluating intervention programmes that appear promising in a range of settings, disseminating information broadly and ascertaining the cost-effectiveness of programmes. Adding to the

above, Rosenberg et al. (2006) emphasise that an important initial activity in promoting primary prevention is to systematically document existing prevention programmes.

Alluding to the importance of effective surveillance systems to record the characterisation, extent and distribution of violence (in concert with point number 1 highlighted by Dahlberg and Krug above), Sethi et al. (2010) emphasise that effective prevention necessitates high-quality information systems to understand the magnitude of the problem of violence, the characterisation of the victims and perpetrators, the place where it occurs, contributory factors, and whether interventions are effective in reducing it. Data collection on interpersonal violence for surveillance purposes has been defined as the capacity to regularly record, analyse and report data comprising the causes and consequences of interpersonal violence (Butchart, Phinney, & Check, & Villaveces, 2004). Increasing data-collection capacity is aimed at creating a system that continuously collects descriptive information on specific key factors that can be precisely and reliably measured for every new case, or for a distinctly identifiable subgroup of all new cases (Butchart et al., 2004). The information gathered via surveillance is most often used in the public health approach to prevention at the initial step to define and describe the magnitude, characteristics and scope of the problem.

2.3 Risk and Protective Factors

Prevention science is rooted in the hypothesis that empirically provable precursors predict the possibility of detrimental health outcomes (Hawkins et al., 2002), including violence perpetration and victimisation. Carlson (2005) emphasises that violence is an extremely complex phenomenon as regards causes, risk factors and impact on victims. The underlying risks and causes of violence and the bulk of its outcomes are located across various levels of society, involving several individual, socio-economic and political factors (Dahlberg & Krug, 2002; Sethi et al., 2004, Ratele et al., 2010). The same holds true for protective factors that are also located across various levels of the ecological system. Risk factors are those factors that increase the chance of being a victim or perpetrator of violence, while protective factors are those factors that decrease the risk or outcomes of violence (Sethi et al., 2004). Understanding the contributory risks and protective factors to violence is an important first step for gaining a deeper understanding and guiding the development of appropriate strategies to help change behaviour and structural factors. For example, in reflecting on lessons learnt about interpersonal violence over the last 20 years, Carlson (2005) suggests that effective prevention programmes hinge on an improved understanding of the risk factors that predispose individuals

to violence perpetration and the processes involved in the development of offending behaviour in order for intervention efforts to begin earlier.

2.3.1 Risk factors for violence

Numerous individual, relationship, community and societal level risk factors interact to increase an individual's risk of being drawn into violence (Sethi et al., 2010). Table 2.1 disaggregates the most pertinent risk factors for violence by means of the ecological systems perspective. Individual risk factors concern personal factors that influence behaviour; relationship level factors concern an individual's interaction with others; community level factors comprise the settings or institution within which social relationships take place; and the societal level looks at the broader factors that reduce an individual's inhibitions to violence (see Centres for Disease Control [CDC], 2012; Dahlberg, 1998; Krug et al., 2002; Sethi et al., 2004, 2010; Sethi, Racioppi, Baumgarten, & Vida, 2006).

Table 2.1

Risk Factors for Violence

INDIVIDUAL	RELATIONSHIP	COMMUNITY	SOCIETAL
• Gender, age & low level of education • Childhood aggressive behaviour • Low socio-economic status, unemployment • Mental health and behavioural problems • Alcohol & substance abuse • Masculine identity challenges • Normative views of violence • Family history of violence & victim of child abuse and neglect • Impulsivity	• Exposure to family violence • Intergenerational learning of violence & poor parenting • Association with violent and delinquent peers • Gang membership • Challenges to masculine identity & gender relations and roles • Normative view of dominant masculinities • Unequal distribution of power • Low socio-economic status and socio-economic stress • Family honour linked to masculinity	• High unemployment • Low income level • High population density • Limited job / economic opportunities • Normative view of violence • Lack of resources • Low social capital incl. connectedness to community & school and poor support • Social marginalisation • High levels of crime & violence • Availability of alcohol & drugs • Easy access to guns & other weapons • Lack of knowledge on violence • Poor & ineffective policing	• Socio-economic & political structure of society: Patriarchal & capitalist arrangement • Weak legal and criminal justice system • Social disorganization • Economic, education & health policies • Poverty • Poor living standards • Income inequalities • Cultural norms and values around masculinity ideologies, supporting violence, gender inequality • Media • Historical trauma • Conflict or post-conflict • Displacement

In an extensive review of the risk factors for interpersonal violence relating specifically to males, Lazarus and colleagues (2011) identified the following broad clusters of risk at the individual level: demographic factors; substance abuse and criminal activities; intra-psychic

and biological factors, particular emotional aspects; lack of specific proficiencies and skills; challenges related to masculine identity, and certain values and beliefs. Specific individual risk factors identified in the literature include the following: age, gender, mental health problems, childhood aggressive behaviour, being a victim of child maltreatment, normative views of violence, psychological or personality disorders, having experienced abuse and child maltreatment, impulsivity, low educational achievement, challenges relating to masculine identity such as power and control needs, loss of traditional masculine role, inability to fulfil male role expectations, as well as the link between masculine identity and guns (Butchart, et al., 2004; Krug et al., 2002; Sethi et al., 2006, 2010; Ward, 2007).

Young males between the ages of 15 and 29 are particularly vulnerable to becoming involved in violence as both perpetrators and victims (see Seedat et al., 2009; Sethi et al., 2010). The bulk of current levels of violence that include murder, rape, and assault have been perpetrated by adolescents and young adults in the US (Fields & McNamara, 2003). In terms of sex, Ward (2007) highlights that the increased level of intimate partner violence suggest that a violent type of masculinity has become widespread in South Africa. As opposed to learning a more nurturing and protective role, countless men have been socialised into believing that violence is a necessary part of being a man. Numerous researchers have highlighted the importance of negative forms of masculinity as key risk factors for violence (see for example Lazarus et al., 2011; Morrell, 1998; Ratele, 2008; Shefer, 2014) that will subsequently be discussed in more depth because they are a central focus in this study.

On a relationship level, mixing and socialising with violent and delinquent peers has been identified as an important risk factor for violence perpetration (Lazarus et al., 2011; Seedat et al., 2009; Sethi et al., 2010). Other relationship level antecedents include being exposed to harsh physical punishment and mortification, witnessing and being exposed to violence in the home and poor parental supervision (Sethi et al., 2006).

Risk factors at the community level may include unemployment levels, weak social welfare programmes, population density and mobility, and the presence of a local drug or gun trade (Butchart et al., 2004; Sethi et al., 2010). Evidence indicates that at the community level, young males exposed to high rates of crime and poverty in their neighbourhood are prone to violence (Sethi et al., 2006). There are strong relationships between using alcohol and drugs and being involved in violence and weapon carrying. Having weapons freely available in the community

are reported to enhance these risks (Lazarus et al., 2011; Seedat et al., 2009; Sethi et al., 2006; 2010). In the global burden of disease profile, alcohol use has been identified as the foremost risk factor in South Africa for premature mortality by the Institute for Health Metrics and Evaluation (2013). Carlson (2005) proposes that due to the high co-occurrence of alcohol and substance abuse with violence, a combined strategy focusing on both violence and alcohol and substance abuse simultaneously would be most useful.

Other community level factors include community disorganisation, lack of resources within communities, and low social capital (Sethi et al., 2010). Income and social inequality have also been identified as key risk factors for violence perpetration (Sethi et al., 2010). Social and cultural norms may support and reinforce violence in communities by tolerating violence through, for example, endorsing violence as a normal means for resolving conflict or for disciplining children (Lazarus et al., 2011; Sethi et al., 2010).

At the societal level, media depictions of violence may have some role in the perpetration of violence (Sethi et al., 2006). Other societal level risk factors include the political and socio-economic structure of society; demographic and political factors; societal and cultural norms and values; gender relations; social disorganisation; safety and security aspects, and historical trauma (Lazarus et al., 2011). Structural determinants identified as key drivers of violence include high levels of institutionalised socio-economic marginalisation, high levels of poverty, lack of access to basic services, and unemployment; these are seen as remnants from the previous apartheid dispensation that benefitted a minority racial elite (Brankovic, 2012; Dodson & Oelofse, 2000; Misago, Landau, & Monson 2009; Seedat et al., 2009). Apartheid has been described by Galtung (1969, p.171) as a form of structural violence that is "built into the structure and shows up as unequal distribution of power and consequently unequal life chances".

In concert with systems thinking, this study adopts the view that no one specific factor causes violence on its own, but that a range of interacting, interdependent factors at different levels of the system either predispose or cause individuals to resort to violence. Violence is too complex a phenomenon to single out one particular factor (Dahlberg, 1998). Altbeker (2007), for one, argues that the socio-economic conditions in South Africa (or poverty for that matter) cannot tell us why such high levels of violent crime prevails in this country as compared to other African countries with similar levels of poverty. He argues that violence is more related to the

dimensions of poverty (for example, overcrowding, family disruption, presence of alcohol and drugs and firearms) than poverty status per se. Accordingly, even though poverty and structural factors are precursors for violence, these alone cannot account for the levels of direct violence in general.

2.3.2 'Masculinities' as a risk factor for interpersonal violence

This study focuses primarily on masculinities[3] as a key risk factor for the perpetration of interpersonal violence amongst males. Particular risks relating to masculine identity identified by Lazarus and colleagues (2011) concern identity, power and control needs, lack of ability of men to live up to male role expectations, loss of traditional masculine roles, the relationship between masculine identity and guns, various demographic determinants (e.g., unemployment and low socio-economic status), and a normative view of violence linked to masculinity. They further highlight the following specific risks concerning gender relations and roles: gender inequities, power inequalities; inflexible gender roles or stereotypes; conflict emerging from expected role fulfilment; a normative view of dominant forms of masculinity; challenges relating to masculine identity and gender roles; and family honour associated with masculinity beliefs and 'traditional' cultural directives and expectations of men. It is clear from the aforementioned and the characterisation of violence outlined in Chapter 1 that violence is gendered, with males as the predominant victims and perpetrators.

Although Connell and Messerschmidt (2005, p. 832) maintain that violence "is in considerable measure a problem and consequence of masculinity" men are not inherently violent and not all men resort to violence when faced with challenges to their masculinity. Longwood (2006) and Courtenay (2000) propose that men are reared, socialised and habituated in a manner which compels and generates destructive violent behaviours that are injurious to themselves and others. Haen (2011), drawing from popular tomes that brought the need of boys to the fore, notes that detrimental components of male socialisation include society's desertion of boys, pressures laid on them to suppress their emotions, and the oppressive dictates of the boy code. Whilst some claim that boys and men are alexythymic (unable to identify and articulate emotion) and passive victims of socialisation (Levant cited in Haen, 2011, p. 15), others maintain that men and boys are active agents in the development, formation and performance

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[3] In this study masculinity is used interchangeably with masculinities. Masculinity used to be theorised as a single definition, but current theorising refers to a variety of masculinities.

of these representations in their own lives (Courtenay, 2000; Hearn, 2004) and that not all men are alexythymic (Haen, 2011). Masculinities are therefore constructed in an ongoing way (Schofield, Connell, Walker, Wood, & Butland, 2000) and are not static, and can therefore change over time and from place to place (Canham, 2009; Messerschmidt, 1993; Morrell, 1998; Everitt-Penhale & Ratele, 2015).

The involvement of males in violence can be regarded as the violent expression of certain categories of masculinity (Kenway & Fitzclarence, 1997). Hegemonic masculinity, in particular, has been implicated in the likelihood of men perpetrating and experiencing violence (Bird et al., 2007; Centre for the Study of Violence and Reconciliation, 2008; Lazarus et al., 2011; Longwood, 2006; Kenway & Fitzclarence, 1997). Connell and Messerschmidt (2005) note that hegemony refers to supremacy and domination achieved through persuasion, institutions, and culture, and may be maintained and reinforced by force and power. As a concomitant of domination, hegemonic masculinity is usually defined in relation to subordinate masculinities such as working class non-Western men of colour (Connell & Messerschmidt, 2005; Kim & Pyke, 2015). It is also defined in relation to being complicit (referring to those men who derive benefits from patriarchy, but do not enact a dominant masculinity) and marginalised masculinities (referring to those men who are positioned powerfully because of their gender) (Connell & Messerschmidt, 2005; Kim & Pyke, 2015). The concept of 'hegemonic masculinity' thus denotes the dominant and dominating types of masculinity that assume the highest status and enforce the greatest authority and power (Kenway & Fitzclarence, 1997).

Hegemonic masculinity is viewed as a configuration of masculinity practices that are associated with the leading forms of social power (Kim & Pyke, 2015). Hegemonic notions of masculinity generally define 'real men' as strong, in control, sexually promiscuous, disease free, emotionally independent (in other words, they are unable to express emotion), tough, fearless and as providers for their families (Skovdal et al., 2011). This form of masculinity legitimates patriarchy, domination, aggression and risk taking (Haenfler, 2004). Documented research indicates that men who conform to hegemonic masculinities are more likely to perpetrate violence against women or other men or even experience violence (Hong, 2000; Kenway & Fitzclarence, 1997; Mathewson, 2009; Santana, Raj, Decker, La Marche, & Silverman, 2006).

In South Africa, studies point out that 'real men' are expected to be tough, unemotional, aggressive, denying weakness, appearing physically strong, in competition with other men, and sexually unstoppable (Nzioka, 2001) with success demonstrated through the acquisition and control of female sexual partners (Jewkes & Morrell, cited in Morrell & Jewkes, 2011). This points to a hegemonic masculinity that is sexually risky and often very violent. Canetto (1992) opines that men have been socialised to think that they are able to control their world and manipulate and influence it according to their needs. Loss of control can therefore have a profound impact on a man's 'manliness' or, as stated by Canetto (1992), make him less of a man. This control is extended to men being in control of their emotions as well, as noted earlier, which is perhaps why some (e.g., Levant cited in Haen, 2011, p.15) claim that men are alexythymic. Men not only have to conform to these representations of masculinity, but they also play an active role in constructing such representations by recurrently demonstrating or reasserting their manhood (Skovdal et al., 2011) through acting out this masculinity script.

Another important gender issue in post-apartheid South Africa is the expectation of men as being breadwinners (see Connell, 2005; United Nations [UN], 2011). The underlying implication of the *provider, worker, and breadwinner role* is that since adult manhood is perceived to equal work, not having work would mean not being socially regarded as an adult man (UN, 2011). Without work then, the man is emasculated. For countless men, unemployment gives rise to a lack of social identity, shame, stress, depression, and increases the likelihood of delinquency, armed violence or various other antisocial behaviours by some young men in certain settings (UN, 2011). Since the demise of apartheid, there has been little progress in reducing the high unemployment rate in South Africa, with reports indicating conservative estimates of 26.40 percent in the first quarter of 2015 (Trading Economics, 2015). If one considers the high unemployment rate in South Africa, one can deduce the underlying impact it could have on men in certain contexts in this country.

A man's employment status plays an important role in deciding when he can start a family, whether he is able to contribute financially to his family and in certain instances, whether he lives with his children (UN, 2011). Again, if a man derives his identity and chief social function from his role as provider to his family, many questions remain: what happens when a man is without work or has insufficient income to abide by the social expectations laid on him as provider, or what happens under such circumstances to a man's participation in family life and his connection and engagement with his children and family formation (UN, 2011)? In this

regard, Lazarus et al. (2011) identified an important link between masculinity and broken family structure, family conflict and fatherlessness. Children in South Africa are typically raised within a single-parent household, with 40% being raised by a single mother and 2.8% by a single-father (Holborn & Eddy, 2011). The present-day lack of fathers or father-figures from South African households has led to the proclamation by Morrell and Richter (2005) that there is a crisis of fatherhood in this country. This, they assert, is apparent in the absence of male figures from households as well as the levels of violence among young people, implying that there is a link between fatherlessness and violence.

Jefthas and Artz (2007) examined the concepts of masculinity and femininity and the link these notions have to the legacies of apartheid, gang activity, school violence, sexual violence perpetrated against young women and girls, and violence within the home and family. These authors argue that violence, along with crime (which in the South African context is often violent), represent a means for young males to reclaim and affirm their manhood in a milieu in which masculinity is widely compromised. They further argue that in social settings where it is expected of men to be socially powerful, physically strong, and financially provide for their families, the high levels of unemployment, poverty, and powerlessness experienced by males under the apartheid and current post-apartheid regimes have emasculated men, resulting in them reasserting their masculinity through violence.

Violent manifestations of masculinity and unequal gender relations are frequently present in gender-based violence (Bird et al., 2007). Morrell (2002, pp. 37–38) highlights that "violence is gendered in all its aspects, not least because violence is invariably bound up with issues of power – used to enforce power, used to shift power, used to resist power". This can be ascribed to challenges to traditional masculinity that give rise to pressures that may in turn give rise to feelings of humiliation, both in a man's sense of self, as well as in his sense of how he is perceived by others (Dolan, 2002), compelling men to reassert their worth through alternate forms of masculinity. The perpetration of interpersonal violence by males can therefore be seen as an outcome emerging from attempts for empowerment in an environment in which the male identity is experienced as being in peril or challenged (Baumann, 2010; Pleasants, 2007); an example is their inability to live up to the breadwinner expectation (Connell, 2005; Lazarus et al., 2011).

Braithwaite and Daly (1994) highlight that present-day state interventions to regulate and address violence are gendered; from structures of response that glorify tough police officers, celebrate confrontational relations, and create an upright 'protective' state through the incarceration or in some states, killing 'the bad guys.' In South Africa, this type of masculinist strategy has been insidiously present both in the past within the apartheid police system where brutal force and detention without trial was a regular occurrence and, in recent years, has been evident in the various deaths emerging from police brutality during public protests such as the Marikana massacre, where many peaceful protesters within the mining sector lost their lives due to police brutality (Twala, 2012).

In light of the above, it is thus important that the theme of masculinities be an integral component in addressing the various risks associated with interpersonal violence in South Africa. Violence by young people emerges from a complex interplay between risk and protective factors within diverse environments and over time, which impact how young people learn behaviours (Ward, 2007). Individuals who are subjected to more risks than protective factors will likely use more violence, whereas those who are surrounded by more protective factors in relation to risk will more likely develop pro-social behavioural repertoires (Ward, 2007).

2.3.3 Protective factors for violence

The word 'protective' implies safety and security or a shield that prevents something bad from happening. With regard to violence, protective factors denote individual or environmental safety nets or fortifications that strengthen an individual's capacity to withstand stressful life events or predisposing risks, and encourage adaptation and competence (Small, 2000). They endow individuals with protection against deleterious outcomes and/or encourage competencies (Ahmed, Beck et al., 2004), indicating that the protective effect is only apparent when combined with risk (Lazarus et al., 2011).

An examination of the literature revealed that many studies focus on risks, but there is a glaring paucity in the literature on protective factors for violence prevention. Farrell and Flannery (2006), as well as Lazarus et al. (2011) have alluded to this paucity, highlighting that there have been very few attempts to identify protective factors. Lazarus et al. (2011) note that this neglect has transpired in spite of numerous calls to focus on this component for the purposes of devising effective violence prevention programmes. Farrel and Flannery (2006) argue that progress in

this area has been impeded by fundamental difference about the nature of protective factors. Some have, for example, merely regarded protective factors as the opposite of risks (Farrel & Flannery, 2006).

The following list (Table 2.2 below) outlines the possible protective factors against interpersonal violence that have been drawn from the literature (Barker & Ricardo, 2005; CDC, 2012; Krug et al., 2002; Lazarus et al., 2011; Sethi et al., 2004; Ward, 2007).

Table 2.2

Possible Protective Factors for the Prevention of Interpersonal Violence

Level	Example of protective factors
Individual • **Personal characteristics** • **Biological factors** • **Behaviour** • **Personal experience**	1. **Demographic Factors:** Being enrolled in school, higher education level, having employment, maturity or higher age. 2. **Intrapsychic and Emotional Factors:** Individual resilience, a sense of responsibility, self-reflection and insight, strong attachments (to parents and/or a school), a positive view of masculinity, the desire to be a good father, emotional well-being, expressiveness learning from the effects of violence.. 3. **Behavioural Factors and Skills:** Conflict management and communication skills, coping and job-related skills, good social skills, and health seeking behaviour. 4. **Cultural and Religious Factors:** Having a purpose in life, engaging in religious practices, having some kind of religion or spiritual belief and undergoing rites of passage.
Relationship • **Interaction between two or more people**	1. **Marital and Family Relations:** Positive family role-models, attachment and connectedness to parents and birth family, family support, father presence in the home, relationship skills and positive family norms and values. 2. **Peer Relational Factors:** Positive peer groups; belonging to a social group that espouses non-violent norms and values and constructive views of masculinity, thereby experiencing social support.
Community • **Settings or institutions in which social relationships take place**	1. **Social Capital Factors:** Community connectedness, having a prevailing sense of community, exposure to a safe and stable community, occurrence of trust within the community and cultural community resilience. 2. **Community Support and Networks:** Access to social support, community activities, active community structures, recreational opportunities, good child-care facilities, parent support networks, support groups, experiencing a sense of belonging. 3. **Community Mobilisation and Empowerment:** Community mobilisation and enablement, collective efficacy, a feeling of agency at the community level, and the cultivation of compassionate solidarity. 4. **School connectedness:** Young people feeling that they are being cared for within the school environment.

Societal **Factors that create a level of acceptance or intolerance for violence.**	1. **Policies and Legislation:** A human rights policy framework, laws to constrain violence, citizen participation, and a commitment to equity and social justice. 2. **Socio-Economic Protective Factors:** Employment and broad economic opportunities, affordable and adequate housing, access to social protection and health care. 3. **Cultural Protective Factors:** Values and norms that encourage gender equality, the promotion of positive forms of masculinity, non-violent enactment of male roles in the media, cultural respect, and spiritual values such as empathy and compassion.

Table 2.2 above highlights various possible protective factors that can buffer young people against interpersonal violence. These include demographic, intrapsychic and emotional factors, behavioural factors and skills and cultural and religious factors at the individual level. At a relationship level, marital and family relations and peer relational factors were highlighted with a particular focus on support and connectedness. At a community level, the literature highlights social capital factors, community support networks, community mobilisation and empowerment, and school connectedness as important protective factors for young people against violence perpetration. Broader societal protective factors that may generate a degree of intolerance for violence include social justice and human rights policies; laws that constrain violence (although South Africa has multiple laws in place, the implementation thereof remains limited), and socio-economic protective factors including the creation of employment and economic opportunities, social protection and adequate housing and healthcare. Other societal level factors include cultural protective factors such as values and norms that encourage gender equity, the promotion of positive forms of masculinity, non-violent enactment of male roles in the media, cultural respect, and spiritual values such as empathy and compassion.

Lazarus et al. (2011) emphasise that there is a need for a greater focus on protective factors, especially on the promotion of constructive, peaceful, egalitarian, responsible, and thus positive forms of masculinity as protective factors against interpersonal violence. Based on their findings from an extensive literature review, these authors highlight the following principles that are pertinent to interpersonal violence prevention: (a) embracing different views of gender roles; (b) building partnerships across gender lines; (c) involving men in violence prevention initiatives; (d) assuming a critical stance in looking at the 'problem', avoiding a deficit approach that criminalises men and locates the 'problem' in men. Barker and Ricardo (2005, p. ix) highlight the following protective factors for violence (a) a high level of self-reflection and space to rehearse new behaviours; (b) constructing a positive lesson from the experience of having observed the effects of violence on their families; (c) drawing on men's sense of

responsibility, care and positive engagement as fathers; (d) utilising traditions and rites of passage that provide positive mechanisms of social control combined with new information, values and standards; (e) supporting family members to role model more egalitarian or non-violent behaviours; (f) promoting school enrolment and employment; and (g) community mobilisation around the challenges facing young men.

2.4 Violence Prevention Strategies

Dahlberg and Krug (2002) propose a comprehensive response to violence which, on the one hand, safeguards and supports victims of violence, and on the other hand promotes non-violence, diminishes the perpetration of violence, and alters the environmental circumstances and conditions that induce violence in the first place. They argue that because violence is a multifaceted challenge with psychological, biological, social and environmental origins, it ought to be tackled on various different levels of the ecological system at the same time (see also Dahlberg, 1998; Lazarus et al., 2011). Others have stated that a developmentally appropriate, multi-level strategy for violence prevention utilising combined approaches is more likely to lead to a decrease in violence over time than an approach that is directed at only one level of the system using a single prevention approach (Barker, Ricardo, & Nascimento, 2007; Barker, Ricardo, Nascimento, Olukoya, & Santos, 2010; CDC, 2012). Within such a comprehensive strategy, each level in the system is regarded as having a large amount of risk, but at the same time is also seen as a key point for targeting interventions (Dahlberg & Krug, 2002; Ratele et al., 2010).

Seedat et al. (2009, p. 1019) propose that strategies for action should be directed at the recognised contributory factors of poverty, unemployment among youth, gender and other social inequities, the intergenerational cycling of violence, high alcohol consumption, and uncontrolled access to firearms. They further emphasise that the poverty and unemployment reduction agenda must include buttressing the education system and decreasing school drop-out during adolescence in order for more young people to complete school with the necessary skills as well as encouraging the development of more labour-intensive and less skills-intensive jobs; promoting self-employment and small business development can also be helpful.

Broad principles for violence prevention identified by Lazarus et al. (2011) include the development of a multi-faceted, holistic and comprehensive approach comprising collaboration

with key sectors; using various social change strategies; ensuring cultural sensitivity, including the value of religious and spiritual factors; using a public health ecological framework along with locating risk and protective factors, and focusing on safety and peace promotion.

Sethi et al. (2010) emphasise that many of the risk factors for the different types of violence are cross-cutting, with synergies existing in the approaches for preventing violence whether they deal with self-directed, interpersonal, or collective violence. Drawing on various systematic reviews, the Global Status Report on Violence Prevention (United Nations World Health Organisation [UN WHO], 2014, p.27) identified six strategies that can potentially prevent various types of violence including interpersonal violence, and lessen the chances of someone becoming a victim or perpetrator of violence. These are (a) developing safe, nurturing, and secure relationships amongst children and their parents and/or caregivers; (b) providing life skills training to children and adolescents; (c) decreasing the availability and detrimental use of alcohol; (d) lessening access to guns and knives; (e) encouraging gender equality in order to prevent violence against women, and (f) altering social and cultural norms that support violence. They further promote focusing on victims of interpersonal violence through victim detection, care and support programmes.

The following possible strategies (see Table 2.3 below) for preventing interpersonal violence, with a particular focus on promoting positive forms of masculinity, have been compiled from various sources (see Butchart et al., 2004; Dahlberg & Krug, 2002; Matzopoulos et al., 2010; Seedat et al., 2009; Sethi et al., 2010; UN WHO, 2014). Table 2.3 below includes possible strategies highlighted in the Global Status Report on Violence Prevention (UN WHO, 2014). Table 2.3 also highlights that programmes predominantly focus on education, life skills training, healthy generative relationship building, social and cultural norms change, community mobilisation, and media campaigns to address violence.

Table 2.3

Possible Strategies for Preventing Interpersonal Violence

Level	Example of Prevention Strategies
Individual • **Personal characteristics** • **Biological factors** • **Behaviour**	• Educational programmes ○ Promote attitudes, beliefs and behaviours that in the long run prevent violence ○ Promote a culture of non-violence and peace

• **Personal Experience**	○ Spiritual values education - which serves as an antidote to violence such as love, empathy, compassion, and respect ○ Promote generative masculinities and femininities • Life Skills training ○ Anger management skills ○ Conflict resolution skills ○ Active listening and non-violent communication • School-based violence prevention programmes • Drug resistance education
Relationship • **Interaction between two or more people**	• Programmes that promote healthy generative relationships ○ Mentoring programmes ○ Generative father/motherhood ○ Peer programmes • Relationship workshop on respectful communication strategies with couples
Community • **Settings or institutions in which social relationships take place**	• Community mobilisation to address risk factors and offer protective factors: ○ Make physical improvements to their neighbourhood ○ Neighbourhood watch programmes ○ Alcohol and substance abuse programmes ○ Community-wide educational campaigns focusing on safety and peace promotion • Monitoring public spaces such as schools, workplaces and neighbourhoods • Recreational Programmes for youth • Improvement in emergency response, trauma care, and access to health services for victims
Societal • **Factors that create a level of acceptance or intolerance for violence**	• Develop mass media campaigns on radio, television, newspaper and the internet to create awareness about violence and its implications and to change the way people think about violence • Addressing unemployment: ○ Community campaigns ○ School based career development programmes ○ Providing access to resources for small business development and self-employment • Change negative cultural norms that support violence • Obtaining government support

Programmes targeting youth violence (children aged 10–29 years) include preschool enrichment programmes, life skills training, mentoring and bullying prevention programmes. The most common approaches tackling youth violence (which includes acts of assault, bullying, slapping and hitting) are aimed at helping older children and adolescents manage anger effectively, resolve conflict peacefully and develop essential social skills to resolve problems. Such programmes that develop individuals' life and social skills from a young age have been shown to be effective in decreasing violence and reducing substance misuse (Sethi et al., 2010; UN WHO, 2014).

Dahlberg and Krug (2002) highlight the importance of shaping close personal relationships, creating healthy family environments, providing specialised assistance and support to dysfunctional families, and monitoring public places such as schools and neighbourhoods. Programmes targeted at gender-based and sexual violence include dating violence prevention in schools and universities, microfinance and gender equity training, and social and cultural norm change programmes as well as physical environmental changes (Dahlberg & Krug, 2002; UN WHO, 2014). Microfinance joined with gender equity training have been shown to reduce violence between partners, and centres on economically empowering women living in poorer communities (UN WHO, 2014).

Social and cultural norm-change programmes promote gender equity and focus on modifying the social expectations that predispose individuals to physical, sexual and emotional violence (UN WHO, 2014). Other sexual violence prevention programmes focus on developing healthy relationship skills and reducing attitudes that are tolerating and accepting of violence. Dahlberg and Krug (2002) note that it is also important to address the larger cultural and socio-economic factors that contribute to violence as well as taking steps to alter them, including methods to decrease the disparity between the poor and rich, and ensuring equitable access to opportunities, goods and services.

Community-based interventions do not just aim to change the way individuals think and behave, but they also mobilise the whole community to eradicate violence (WHO, 2010). The United Nations Entity for Gender Equality and the Improvement of Women (UN WOMEN, 2011) suggests that for programmes to effectively change harmful beliefs and practices, they should directly engage with members of the community. According to Freire (2000 p. 65), "attempting to liberate the oppressed without their reflective participation in the act of liberation is to treat them as objects which must be saved ... and transform them into masses which can be manipulated". The success of community interventions is therefore linked to communities taking ownership of the interventions (Harvey, Garcia-Moreno, & Butchart, 2007) through direct participation. Drawing lessons for best practices from Australian crime and violence prevention awards programmes, Anderson and Terer (2013) highlight the importance of community involvement. The five programmes identified by them were largely established from grassroots community action, were tailored to fit community needs, and involved the continuous engagement of stakeholders throughout and after the pilot period. It is thus prudent to utilise the ideas, initiatives and knowledge of local communities in developing

effective interventions (Krug et al., 2002) through participatory approaches that embrace different viewpoints. Participatory approaches are particularly suited to obtaining a deeper understanding of the strengths and limitations of the intervention, with the aim to improve their effectiveness (Jepson, Harris, Platt, & Tannahill, 2010).

Violence is a multi-faceted problem and thus requires comprehensive strategies that tackle the range of factors that contribute to perpetration including broader social determinants such as gender and economic inequality; programmes should be sustained over time (UN WHO, 2014). Knowledge alone does not determine behaviour, so providing facts about violence on its own may not be sufficient to change behaviour (Radebe, 2007). Barker et al. (2010) highlight that integrated programmes combining community outreach strategies, mobilisation, and mass media campaigns have shown evidence of being more effective in producing behavioural changes than group education on its own. Also, gender-transformative approaches and programmes that encourage gender-equitable relationships show more evidence of producing behavioural change than narrowly focused programmes (Barker et al., 2010). The concomitant use of multiple methods, including drama, role-plays, reflections on attitudes and behaviour, and community meetings and action including religious leaders are thus more effective (Barker et al., 2007; Harvey et al., 2007; WHO, 2010). The results of various reviews have thus led to the conclusion that multi-focused programmes are more likely to produce the best and most sustained outcomes (Barker et al., 2010; Parker et al., 2004).

2.5 Violence Prevention through Safety and Peace Promotion

Violence prevention initiatives are oriented to enhancing health and safety by reducing risk factors that contribute to an individual becoming a victim or perpetrator of violence, and increasing protective factors. Violence prevention is therefore a prerequisite for safety and peace and, by extension, health. Welander, Svanström, and Ekman (2004) contend that since safety is a fundamental right of human beings, safety is a requirement for the preservation and enhancement of the wellbeing of any population. They define safety promotion as a process that endeavours to guarantee the presence and preserve the conditions that are essential to reaching and maintaining an optimal level of safety. Safety promotion can be regarded as a way to promote peace, as safety offers a motive for solidarity and co-operation to enhance quality of life. There is a dire need for coordinated efforts across sectors of specialisation in safety promotion initiatives to achieve a high level of safety in the population (Welander et al., 2004).

Peace, a concept that is often used in relation to violence, is more than just the absence of violence. The concept of peace promotion embraces values, attitudes and behaviours that reject violence and endeavour to prevent conflicts by addressing their root causes with a view to solving problems through dialogue and negotiation among individuals, groups and nations (United Nations Educational, Scientific and Cultural Organization [UNESCO], 2002). A culture of peace focuses crucially on eradicating the roots of structural violence, whereby unjust and discriminatory social and economic structures deprive certain members of society of their basic needs (Toh, 1999). A culture of peace promotes non-violent solutions to conflicts and adopts a human rights approach in which the lives and dignity of all human beings are respected (see Toh, 1999).

Within this comprehensive approach to peace, three key strategies can be discerned: peacekeeping, peace-making and peacebuilding. Peacekeeping involves deploying armed forces known as peacekeepers to ensure the cessation of hostilities and implement peace accords (Bretherton, Weston, & Zbar, 2005; Cochrane et al., 2015; Lazarus, Cochrane, Taliep, Simmons, & Seedat, 2015). Peace-making is associated with conflict resolution (Cochrane et al., 2015; Lazarus, Cochrane et al., 2015) and includes stopping hostilities and implementing peace accords (Bretherton et al., 2005). Bretherton et al. (2005) indicate that in the short term, peace-making is evidenced through the resumption of normal daily activities in the long term. Peacebuilding is viewed by some, particularly non-governmental organisations, as embracing both peace-making and peacekeeping (Maiese, 2005). Peacebuilding is focused on the alleviation of structural violence and the development of justice and equity to foster peace (Cochrane et al., 2015; Lazarus et al., 2015). This includes peace education.

One strategy for preventing violence is through peace education, which can be defined as the following:

> The process of promoting the knowledge, skills, attitudes and values needed to bring about behaviour changes that will enable children, youth, and adults to prevent conflict and violence, both overt and structural; to resolve conflict peacefully, and to create the conditions conducive to peace whether at an intrapersonal, interpersonal, inter-group, national or international level (Fountain, 1999, p. 6).

From this definition, it is apparent that peace education is a comprehensive strategy that emphasises the importance of providing relevant information alongside necessary skills and values, simultaneously targeting the different developmental levels and the ecological system levels.

Bretherton and colleagues (2005) developed a peace education programme for use in Sierra Leone, a country struggling with the remnants of historical internecine violence, using a capacity building approach to mobilise schools, community and non-governmental organisations (NGOs) and mentors to work together to promote peace. They describe the capacity building approach of the programme as being guided by a definition of peace education that entails working at various ecological levels including the individual, relational, intergroup, national and international levels. They also draw on structuration theory, emphasising the unity between the agency of individuals and the structure of a system underscoring the need to be guided by the values of a culture of peace, working in concert with existing environmental systems and enhancing people's capacity to transform (Bretherton et al., 2005).

Onah (2011) highlights that in traditional African societies, peace is conceived of in relation to order, harmony and equilibrium in society and the universe. To live harmoniously within a community is viewed as a moral obligation encapsulated in the spirit of "Ubuntu" (I am because we are; and since we are, therefore I am). The harmony that needs to be preserved for humans to be able to experience peace is social and spiritual as well as cosmic. When things such as violence disturb the peace, peace needs to be restored by means of rituals. Religion, therefore, provides the foundation on which human life, peace and harmony is established (Onah, 2011).

The focus on peace promotion in this study (following the broader SCRATCHMAPS project) includes the mitigation of both direct and structural violence (Christie et al., 2014; Lazarus et al., 2015) and assumes a proactive, positive stance directed at building peace including incorporating and fostering the values, attitudes and behaviours that rebuff violence and actively promote peace (Britto, Gordon et al., 2014; Lazarus et al., 2015).

2.6 Promoting Positive Forms of Masculinity to Prevent Violence
This doctoral study proposes a positive, assets-based approach to promote positive forms of masculinity for safety and peace. Identifying and building on existing male strengths is a

method of replacing counterproductive masculine beliefs and behaviours typical of constricted forms of masculinity (Kiselica & Englar-Carlson, 2010). Whilst many men have come to understand the necessity for a volte-face of gender roles and expectations and are playing positive roles in ensuring congenial relationships in family, community and society, many others still play dominant masculine roles typified by a "macho" culture (Krieger, 2004). Masculinities are not fixed, but are susceptible to various contradictions and various possibilities for change (Schofield et al., 2000). Negative masculinities are implicated in violence perpetration and victimisation, so the unmaking of certain types of masculinities is paramount to violence prevention initiatives.

Findings from a review conducted by Barker et al. (2007) indicate that well-designed programmes with males show compelling evidence of leading to change in behaviour and attitude. They argue that males are capable of changing, and do change their behaviour and attitudes concerning their use of violence against females, as well as questioning violence with other men. This has been corroborated in a study by Hong (2000), who found meaningful, significant changes in attitudes and behaviours in relation to violence and traditional conceptions of masculinity.

When masculinity is connected to the promotion of constructive, peaceful, non-violent and egalitarian beliefs of masculinity, it constitutes a possible protective factor and focal point for violence prevention (Lazarus et al., 2011). The Women's Commission for Refugee Women and Children (2005) highlights that we can draw and build on positive values and norms that are part of masculinities across the globe, including supporting men as peacekeepers, as caring fathers, as nonviolent negotiators, and as supportive spouses.

Strategies for promoting positive forms of masculinity include working with young males as a primary prevention initiative, preferably using a "bottom-up" approach; reaching men in places that they frequent such as sports clubs; motivating boys and men to be aware of the oppressive effects of gender; providing safe spaces where men can meet and be themselves; promoting spiritual values, including compassion; drawing on men's sense of care, responsibility and positive engagement as fathers; providing young males with occasions to intermingle with gender-equitable role models in their own communities; and providing support to non-violent peer support systems that promote constructive views of masculinity (Barker & Ricardo, 2005; Esplen, 2006; Lazarus et al., 2011). Positive role models can offer a way forward whereby men

can know and see that there are other males who play positively active roles in building inclusive communities (Krieger, 2004) by role-modelling positive forms of masculinity.

Another key positive strategy for addressing violence identified by Religions for Peace (2009) is the participation of both men and women in violence prevention strategies. They also emphasise the importance of involving youth in prevention efforts as a key aspect in constructing a new culture embodying cooperation and respect for all.

A major benefit of adopting a positive approach is that, as opposed to alienating men by using language that leaves them feeling blamed or guilty (Esplen, 2006), drawing attention to the positive makes it easier for males to shift their focus to positive aspects of themselves (Kiselica & Englar-Carlson, 2010). Men also tend to seek out organisations or groups with positive messages that steer clear of placing blame, and tend to become involved in projects that empathise with their situation and are ready and willing to work with them, irrespective of their level of engagement (Bird et al., 2007).

2.7 Spiritual Capacity and Religious Assets as a Resource for Violence Prevention

Whilst religion has been incriminated in the disruption of peace through the promotion of violence and wars, many still regard religion as a guarantor of both individual as well as societal peace (Onah, 2011). Religious assets and spiritual capacity, in particular, have been identified as a fairly uncharted area for tackling violence and promoting peace (African Religious Health Assets Programme [ARHAP], 2006). According to the Lille Declaration on a Culture of Peace (European Council of Religious Leaders, 2009), religion is viewed as a fundamental resource for fostering a culture of peace. Religion nurtures the human spirit through spiritual practices to attain peace both within individuals and in society more broadly. The ethical dimension of religion fosters concern for human rights, justice, compassion and commitment to non-violence. The social dimension of religion, through its various structures and networks, provides great potential for communication and furthering a culture of peace (European Council of Religious Leaders, 2009). Likewise, Britto and Salah et al. (2014) highlight the capacity of religions, faith, spirituality, service, ritual and ceremonies to transform individuals in promoting peace. Religion and spirituality therefore constitute a possible resource for safety and peace promotion (Lazarus et al., 2015; Religions for Peace, 2009).

Amos (2010) identified various tangible and intangible religious assets relating to peace and safety promotion, including positive religious norms, beliefs resulting in hope and purpose, parents' religious values, religious services, activities, rituals and ceremonies, provision of safe spaces, pastoral counselling, peace actions through inter-religious dialogue, and the role of religious and spiritual leaders in facilitating and promoting peace. Cochrane et al. (2015) explain that tangible religious assets comprise something that can be directly or tangibly measured, found, or otherwise acknowledged as tangible (e.g., congregational programmes, care groups, non-governmental organisations, events, campaigns, healing movements, religious clinics, hospitals, dispensaries, etc.). Intangible religious assets indicate the motivational, volitional, and mobilizing capacity of religious belief, faith, behaviour and ties (e.g., values, vocation, hope, regard, motivation, trust, orientation, solidarity, cohesion and the like). Deeply rooted within many faith traditions is an emphasis on spiritual values such as loving-kindness, forgiveness, trustworthiness, fairness, mutual respect, and compassion, which are central to peace promotion and which facilitate the development of a sense of responsibility for one's actions, a positive view of and empathy for other human beings, and non-harming, compassionate and selfless action (Lazarus et al., 2015; Der-Ian Yeh, 2006; Esparanza, 2010; Mandour, 2010; Rayburn, 2004).

Longwood, Meusse and Skipper (2004) highlight that the spiritual realm has a high regard for values such as connectedness, emotionality, community and cooperation – values that they claim are often at odds with dominant masculine values. Ward (2007) maintains that even though the mechanism by which religious involvement protects individuals against deviant behaviour is not well understood, at least two religious factors deter antisocial behaviour: exposure to values and norms that discourage deviance and the impact of exposure to a peer group that demonstrates pro-social attitudes and behaviours. She further notes that young people with pro-social attitudes are less likely to act violently, and young people who participate in religious practices (particularly those that are practised in private such as prayer) also constantly show lower levels of deviance.

Little (2006) also refers to the "constructive side" of religion that can play a positive role in addressing violent conflict, contributing to official negotiations or the creation of conditions conducive to peace using strategies such as conflict resolution, mediation, arbitration, reconciliation, and other nonviolent techniques. Religious practitioners and leaders like Mahatma Gandhi, Martin Luther King, Jr., or Thich Nath Hahn have long had an interest in

and promoted the use of nonviolent techniques. Others like Bishop Tutu have been at the forefront in truth and reconciliation commissions designed to effectively and peacefully bring about change through restorative justice (Lazarus et al., 2015; Little, 2006). Spiritual leaders can play a meaningful role in promoting and advocating for peace and safety, facilitating dialogue across sectors, promoting positive norms and values, and providing ceremonies and rituals that heal and give meaning and hope (Amos, 2010; Religions for Peace, 2009). It is thus imperative to identify and involve specific religious leadership at the outset of a study to be agents of change, as this can help facilitate project implementation (UNFPA, 2013).

Hipple and Duff (2010) maintain that the mobilisation of religious leaders can have an extraordinary effect on key behaviours through their reach, scale, influence, sustainability and religious assets. They reason that the most effective marketing campaigns emanate from sources with credibility, regular access to the target audience to reinforce the messages, and sufficient reach to deliver messages to large numbers of potential customers. If one was to apply this analogy to violence prevention initiatives, religious leaders could be seen to be strategically placed to promote positive masculinity and deliver key safety and peace messages to the vast majority of people.

An example of religious leaders playing a central role in rekindling values underpinning peace promotion is evident in the South African 1989 interfaith Peace March against structural violence (Taliep, Lazarus, Seedat, & Cochrane, 2011). The mobilisation of the masses led by religious leaders in this particular march was not only an embodiment of peace; it was also a demonstration of positive forms of masculinity. In a society where institutionalised violence ignited a violent struggle for liberation, these religious leaders, consisting of individuals from diverse cultures and faiths, worked together across boundaries to enact a discourse of hope and altered masculinity under insufferable circumstances through peaceful means.

Religious leaders and communities are thus strategically placed to educate both themselves and the broader community on overcoming violence (Religions for Peace, 2009). Various attempts at mobilising religious leaders to address current levels of violence have sprouted across South Africa in recent years, including religious leaders calling for an end to and marching against xenophobic violence (SABC News, 2015; Woods, 2015) and gang related violence (Dolley, 2006), and partnering with local non-governmental organisations to address gender-based violence (Petersen, 2013).

Religion and spirituality facilitate having a purpose in life (Clowes, Lazarus, & Ratele, 2010; Lazarus et al., 2011). Garbarino (2007, p. 4) contends that violence results from a spiritual void in the lives of young people. He argues that young people often have a sense of "meaninglessness" where they are cut off from any understanding of life as having a higher purpose. Longwood et al. (2004) assert that the abandonment of spirituality and the uncritical naïve acceptance of dominant masculine standards negatively impacts men as whole human beings. In a study conducted by Tirri and Quin (2010) in Stanford, spirituality with or without religiosity may possibly provide a path to purpose. They maintain that purpose does not have to be rooted in the overtly religious or spiritual, but that young people who are engaged in their search for self within a rich spiritual environment may have the added benefit of inspirational ideology, community support, and spiritual understanding in their quest to achieve a true balance between care for the self and care for others required by a sustained purpose. In this regard, Garbarino (2007, p. 537) suggests that "non-punitive, love-oriented religion institutionalises spirituality which can act as a buffer against social pathology".

2.8 Mobilising Spiritual Capacity and Religious Assets to Promote Positive Forms of Masculinity

Krieger (2004) emphasises that it is necessary to raise issues of masculinity and to have conversations with men about masculinity in churches and society. A need exists to relook at the gender roles that were imparted to us and that we are expected to play by religion, culture and society. A "positive masculinity" approach requires individuals to examine existing gender roles and go through a personal revision of their way of thinking, feeling and behaviour (Krieger, 2004). This entails playing a pro-active role in generating equitable gender role models that, for example, share in raising children (Krieger, 2004).

It is clear that spirituality can be used as a means to engage negative forms of masculinity and gain a deeper understanding of its negative outcomes. Longwood et al. (2004) propose the development of boys and men s spirituality as a means of addressing dominant forms of masculinity to promote peace and non-violence. They further maintain that developing spirituality and dealing with onerous masculine norms and goals can be successfully accomplished by means of novel interventions comprising small groups of men to reflect on their lives. They further emphasise the value of programmes such as the spirituality groups' programme at St John's University in Maine, which assists young males to develop their

spirituality in a manner that enables them to challenge and reflect on the dominant masculine norms and ideals. Programmes such as these are indispensable for providing young (as mentees) and older males (as mentors) with the opportunity to voluntarily participate in groups within which they discuss issues around masculinity, spirituality and religion, and envision new ways of being masculine. Storytelling, ritual and developing an intuit of connectedness to family and important others such as mentors and religious leaders have been highlighted as important strategies for addressing engagement in violent behaviour (Haen, 2011).

Rituals can be utilised to mark, venerate or celebrate transitions, commemorate accomplishments, identify milestones and emphasise therapeutic progress (Cervantes & Englar-Carlson, 2008). Religion and spirituality facilitate a purpose in life by instilling positive religious or spiritual values and beliefs (such as compassion), and through providing the space for young men (in particular) to undergo rites of passage (Clowes et al., 2010; Lazarus et al., 2011). With regard to the latter point, Greeff and Loubser (2008) have reported that spirituality is an integral component of culture and has been found to be a protective factor contributing to resilience among Xhosa speaking families in South Africa. Initiation as a rite of passage is described as a process within which a Xhosa boy's spirit is "tamed" in order to subdue the lack of restraint linked to his "animal" self, which is found in the realm of nature (Mayer & Mayer, 1990). It is likened to baptism, which serves as a gateway to Christianity, and is described as a gateway to manhood (Mtuze, 2004). Crawford (2003) explains that rites of passage comprise a physical trial that is expected to sever the attachments to boyhood and cultivate a renaissance to a new identity.

Barker and Ricardo (2005) also highlight the importance of rites of passage and initiation practices in the socialisation of boys within the Sub-Sahara Africa region, and emphasise that these traditional practices serve as a positive mechanisms of social control and may be a protective factor against violence. Likewise, Smith (2006) describes rites of passage as momentous communal rituals that characterise a psychological and spiritual defining moment or turning point in life. In South Africa, for example, initiation has been combined with teaching values such as responsibility, sexual restraint, non-violence, and respect for elders. According to Barker and Ricardo (2005), this is an excellent example of how traditional forms of socialisation can be combined with new information to change gender norms and reduce violence. Religious values, rituals and practices are normally deeply rooted and entwined in

the daily lives of people, with religious leaders from various religious communities playing a powerful role in shaping opinions, attitudes, and behaviours (UNFPA, 2013).

Crawford (2003, unpaginated) emphasises that in Western societies, transition to manhood is primarily an unguided process with young men "left to themselves to become men by accident" or chance. It has been suggested that in such contexts, young boys in their mid-teens and onwards need mentors or adult role models whom they can trust and who care about them, and who can provide them with a supportive relationship by helping them move gradually over a number of years into the broader adult world (Biddulph, 1995). The use of mindfulness has grown in recent years as a method implemented with young males in order to foster reflexivity among them so that they may become reflectively aware of their emotions, thoughts and surroundings (Haen, 2011).

According to Maiese (2005), the mechanisms for effectively preventing and regulating violence are most often constructed on the active intervention of members within the community who play a positive role in preventing violence. Maiese (2005) highlights three important ways of mobilising communities that are grounded in three roles that community members, service providers or stakeholders from diverse sectors (including police, business, schools, government officials, NGOs, and universities) can fulfil: provider, teacher and bridge-builder. The provider, she suggests, is someone who fulfils the frustrated needs of the community that often create conflict (e.g., unemployment, social unease, racial or religious tensions, and refuse removal). Thus, community members (or interventionists) should address these social issues in order to prevent violence. In the teacher role, individuals or others provide opportunities for community members to learn conflict resolution skills, which may be achieved through community-wide educational campaigns. In the bridge builder role, individuals or others try to find ways to strengthen and mobilise the community, including families, schools, neighbourhoods, and local politics by organising joint projects to build relationships that cut across group differences.

In linking these three roles to the promotion of positive forms of masculinity by mobilising spiritual capacity and religious assets, the provider role can be mobilised through a positive approach that focuses on the identification and coordination of assets within the community so that community members become aware of their own agency in improving their own lives. In the teacher role, religious leaders are strategically placed to promote positive forms of

masculinity and deliver key safety and peace messages to the vast majority. For example, some individuals engaged in church-based gender justice movements in Norway and Ghana have called on men to develop a sense of positive masculinity to counter increasing levels of violence against women (Men's Studies News, 2010). Another study by Engbretson (2006) focusing on identity, masculinity and spirituality among young males in Melbourne, Australia suggests that a key component of participants' spirituality was a growing propensity to confront the hegemonic ideal of masculinity. In other work, Pembroke (2008) links fatherhood to spirituality, stating that the spirituality of fatherhood is grounded in a father's active physical and emotional involvement in nurturing his children. Barker (2008) has also made links between positive masculinity and religion, stating that meditation and mindfulness associated with religion provides a discourse of hope and transformed masculinity.

In the bridge builder role, the coordination and mobilisation of the collective assets of religious communities could enhance the effectiveness and usefulness of these assets (Vendley, 2005) as tools to resolve conflict and violence. Kretzmann and McKnight (1997) point out that interfaith action has successfully involved local entrepreneurs and local residents to work together toward community economic development. In the mobilisation of spiritual and religious resources, assets, and motivations for peaceful co-existence, interfaith or multi-religious education can promote dialogue and action from the grassroots to global levels to address violence (Religions for Peace, 2009; Taliep, Lazarus, Seedat, & Cochrane, 2015).

Drawing from the toolkit for religious communities to end violence against women (Religions for Peace, 2009, p.16), the following key points are relevant for addressing interpersonal violence among males:
- Facilitating education for healing and leadership building, which may include conducting healing, empowerment and socio-economic skills-building workshops;
- Supporting religious and inter-faith educational programmes, which may focus on training religious teachers and leaders on violence and organising facilitated interactive dialogues to increase public knowledge, reshape social values and influence attitudes on peace and non-violence and positive forms of masculinity;
- Conducting religious, cultural and spiritual educational events by organising educational prayers, songs, meditations, messages or religious rituals that are supportive of positive forms of masculinity approaches. Developing and disseminating relevant

educational and awareness materials such as fact-sheets, educational quilts, pamphlets, posters, informational brochures, or an educational photo collage; and

- Focusing on youth as the next generation in endeavours to prevent interpersonal violence.

Cochrane et al. (2015) emphasise that religious assets, like all assets, remain 'at rest' until they are activated. Religious assets are produced, reproduced and mobilised through local and trans-local agency. These authors conclude that assets and agency must, therefore, be seen together and it is this recognition that paves the way for recognising religious health assets as being possibly transformative. It is clear from the three sub-sections above that spiritual capacity and religious assets represent valuable resources for safety and peace promotion. This study is significant in that it aims to mobilise an invaluable and underutilised resource for violence prevention and safety and peace promotion, namely, spiritual capacity and religious assets, in order to promote positive forms of masculinity through the development of a multi-level intervention utilising a participatory perspective.

2.9 Meta-synthesis of Violence Prevention Initiatives

In this study, a violence prevention programme designates a series of interconnected preventive activities, interventions or projects devised to diminish the magnitude of interpersonal violence (Sethi et al., 2004). According to the new guidelines of the Medical Research Council (Craig et al., 2013, p. 589) on developing and evaluating complex interventions, the first step on which researchers or practitioners should embark before developing new interventions is to identify "what is already known about similar interventions and methods that have been used to evaluate them". In this regard, the literature abounds with strategies to prevent various forms of interpersonal violence.

This study used a qualitative meta-synthesis technique to integrate and interpret findings from various intervention studies in order to make an informed decision on best practices in interpersonal violence prevention. The aim was to draw on existing best practices to enable the community to make a more informed decision on strategies to pursue in order to prevent violence. Meta-synthesis techniques aim to amalgamate qualitative research findings and develop new theoretical insights (Barroso & Powell-Cope, 2000). There are a range of different methods for synthesising qualitative data (see Barnett-Page & Thomas, 2009). This study used an "ecological triangulation" or "ecological sentence" synthesis proposed by Banning (n.d.)

and Barnett-Page and Thomas (2009). An ecological triangulation approach focuses on theory, method, intervention programmes, persons, environments, outcomes and the mutually interdependent relationships among these variables (Banning, n.d.). According to the Centre for Reviews and Dissemination (2008), there are no standardised techniques for synthesising qualitative studies, and underlying theoretical assumptions will vary. Building an evidence base of effectiveness requires that cumulative, multi-faceted evidence must be synthesised (the theoretical framework, the methods used, participants, context and outcomes) in order to determine which interventions are effective with which persons under which conditions (Banning, n.d.). These aforementioned bracketed criteria served as the framework for evaluating the effectiveness of the studies included in this review. The text (findings or results) from studies served as the "raw data" for the synthesis. Figure 3.1 below outlines the review process:

Initial Search: violence, assault, aggression, youth, males, boys, men, masculinity/ies, gender, positive, generative, fatherhood, mentoring, spirituality, religious assets, spiritual assets, values, peace, safety, health, prevention, intervention, programme, evaluation, process

Run in: PubMed, PsychInfo, Springerlink, SAePublications, Proquest, Google Scholar. Specific Journals: Journal of Men, Masculinities and Spirituality, Journal of Interpersonal Violence

827 papers met search criteria.
634 titles yielded after removal of duplicates

Title Review: 365 abstracts yielded after review of titles

Abstract Review: 47 full texts yielded after review of abstracts

Full Text Review Review: 47 full texts analysed plus 18 yielded from their reference lists. 65 full texts were analysed in total

Figure 2.1. **Review process.**

This review embraced programmes that addressed the following forms of interpersonal violence: sexual violence, gender-based violence, youth violence and violence in residential neighbourhoods. The review excluded child abuse, elder abuse, and institutional violence. Sethi et al. (2004) emphasise that violence prevention programmes can be deemed worthy of implementation provided they have been scientifically proven to be effective in reducing the extent or consequences of violence. It could be argued that only programmes proven to be effective should be documented, however, Sethi and colleagues, drawing on the work of

Gallagher (2004, p. 9), highlight some compelling motivations as to why unevaluated programmes should be included as well. These include the following:

- Even though rigorous programme evaluation is regarded to be a best practice, it is a resource intensive procedure and may not be conducted in all cases in low and middle income country settings;
- In instances where interventions have not been evaluated, effectiveness may still be inferred, as these programmes are based on programmes that have evidence of effectiveness in a variety of settings. Over and above this, various structural constraints impede the effectiveness of existing programmes. Parker et al. (2004) emphasise that it is a very challenging task in the context of high levels of poverty and limited opportunities for young people, such as in South Africa, to ascertain effective ways of addressing precursors and outcomes of violence;
- It is important to document unevaluated programmes so as to compile the evidence base of the prevention programmes;
- It is critical to systematically collect information on what is being practised, utilising a framework and indicators.

This review particularly looked at studies that made use of qualitative methodologies to assess the effectiveness of the interventions; studies that applied a gendered lens; studies published in journals; studies published in English; theses, dissertations or reports; and/or programmes that incorporated a spiritual capacity, a religious assets component and/or a community development component. In identifying best practices in interpersonal violence prevention, I relied heavily on recently published reviews (Anderson, Campbell, & Farley, 2013; Barker et al., 2010; DeGue et al., 2014; Esplen, 2006; Fields & McNamara, 2003; Morgan, Boxall, Lindeman, & Anderson, 2011; Whitaker et al., 2006) in conjunction with a systematic literature search. The review brought to light an array of responses to the different forms of interpersonal violence that vary in terms of the type of violence, the setting and the target group. In this review, I focused particularly on community outreach, mobilisation and empowerment approaches, mentoring programmes, fatherhood programmes, as well as social marketing and mass media approaches which, as outlined previously, have been shown to be the predominant approaches in dealing with interpersonal violence and can be used at a community level. The publication of qualitative data is scant on intervention programmes, so I chose two programmes (and in one case one programme) that have been proven to be effective for each approach in

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order to ascertain lessons that can be drawn upon to provide a basis for the development of the intervention on which this study focused.

2.9.1 Mentoring programmes

Mentoring programmes match a young person (mentee), particularly at-risk youth, with a caring adult role model (mentor) from outside his or her family such as a community member, an older classmate or a teacher (CDC, 2012; Sethi et al., 2010; UN WHO, 2014). Mentoring provides young people with mentors who can cultivate an emotional connection with the mentee, provide guidance and support, and provide mentees with opportunities to help them set and attain their goals and succeed in life (DuBois & Karcher, 2005).

Whilst mentoring programmes have been described as promising for preventing youth violence, Thornton and colleagues (2002) argue that data demonstrating its effectiveness is scant, and they highlight the need for more rigorous and systematic evaluations. Even though mentoring programmes have not been evaluated as extensively as other strategies, evidence indicates that positive mentoring relationships can substantially enhance school attendance and performance, enhance relationships with parents, lessen the likelihood of substance abuse, and decrease anti-social and violent behaviour (Grossman & Garry, 1997; Sipe, 1996). These proxy indicators have been connected to the perpetration of interpersonal violence among young people and have been regarded as risk factors for violence; it can thus be surmised that since these risk factors are reduced, mentoring can lead to decreased violence. According to the Global Status Report on Violence Prevention 2014 (UN WHO, 2014), mentoring programmes have been shown to reduce truancy, illicit drug initiation, and other risk factors associated with youth violence. Table 2.4 below provides a summary of two mentoring programmes, showing their strength of evidence supporting their effectiveness and possible applicability for the local context.

Table 2.4

Examples of Mentoring Programmes

Intervention	Participants & Context	Content & Structure (how organised)	Method Info, strategies, skills	Gender Perspective	Theory	Outcome
Mentors in Violence Prevention *Bullying, school & gender violence*	High school and college male & female students	6/7 2-hour training sessions for 2-3 months	By stander approach, awareness-raising; role play, presentation & facilitation skills	Gender transformative	Social Change Theory	*Qualitative:* 23 observations, 21 student pre-post & 6 Key informant interviews
Big Brothers/Big Sisters (BB/BS) *Youth Violence*	Multi-cultural male & female youth 10-16 years from disadvantaged backgrounds Community based (rural, suburban, urban)	12 month mentoring program; meet 3 times per month	Alcohol and Drug therapy; Education	Gender neutral	No specific theory but resembles theory of social control	*Qualitative* One-on-one interviews (n=24) 12 mentor-mentee pairs

The two mentoring programmes presented in Table 2.4 above, i.e., Mentors in Violence Prevention and Big Brothers/Big Sisters, were reviewed to assess their effectiveness in reducing or preventing violence, and will now be discussed in more detail.

2.9.1.1 Mentors in Violence Prevention (MVP).

The Mentors in Violence Prevention (MVP) programme, developed in the United States of America by Jackson Katz (1995), is a gender transformative youth-focused gender violence, bullying, and school violence prevention initiative targeted at high school and college men and women. MVP pays attention to the connection between masculinity and violence and identifies the potential of males as agents of positive change and role models in the fight against violence against women (Katz, 1995). MVP utilises a bystander approach to the prevention of violence by viewing student-athletes and student leaders as empowered bystanders who can confront abusive peers. (Ward 2000). The programme aims to discourage males from being passive bystanders, and empowers them to interrupt and speak out against sexist behaviours and opinions by using their status as leaders. It aims to challenge mainstream messages regarding sex, gender and violence to create a safe environment where men and women can openly discuss and share their experiences and opinions; furthermore, it aims to inspire leadership

through empowering young men to mentor others (Cissner, 2009; Ward, 2000). Even further, it focuses on empowering women and girls to actively interpose sexist behaviour and men's violence against women, to support victims of such forms of violence and to mentor younger girls on these issues. The programme consists of an initial awareness-raising phase that comprises a multiple-training session schedule consisting of six or seven two-hour sessions that span over a period of two to three months. Participants explore types of abuse and how these impact their daily lives, and learn to critically look at gender-based violence and, through role-play, learn how to challenge violent and sexist attitudes and behaviour. The initial training is followed by two additional 2-hour sessions in which students learn and practice their presentation and group facilitation skills to equip them to run their own workshops with younger students (Ward, 2000).

The theory underpinning this intervention is social norms theory, which depicts situations in which people incorrectly perceive that the attitudes and/or actions of their peers and other members of the community are different from their own when in reality they are not (Berkowitz, 2004). The aim of this approach is to change social norms at all levels in peer cultures and not just to teach individuals how to intercede at an assault scene (MVP Strategies, 2015). To accomplish this, this model encourages individuals to speak out before, during, or after an incident of abusive behaviour, which aids in the creation of a peer culture where sexist violence is regarded as unacceptable and uncool. For men specifically, this violence is then viewed as contravening – as opposed to enacting – the social norms of masculinity (MVP Strategies, 2015).

The qualitative evaluation of this programme included 23 observations, 21 student pre and post training interviews, and 6 key informant interviews. The results indicated a heightened awareness among students regarding their responsibility as bystanders and carefully weighing possible actions as well as a shift in students' attitude *a propos* the acceptability of gender-based violence and its prevalence in society (Cissner, 2009). The data further provided evidence that the majority of students took action founded on what they learned in MVP. Focus groups conducted with female participants further supported the efficacy of the MVP curriculum among young women for whom the programme was not initially designed (Ward 2000, 2001).

2.9.1.2 Big Brothers / Big Sisters.

Big Brothers/Big Sisters (BB/BS) is a community-based mentoring programme founded in 1904 in the United States of America for youth aged 6 to 18 from disadvantaged backgrounds in predominantly low-income, single-parent households (Grossman, Baldwin, & Tierney, 1998). Young people are matched with educated adult volunteers, usually aged 20-34. Mentors help mentees build personal values such as respect for themselves and others as well as build their self-esteem. The mentor-mentee pairs typically meet one-on-one, two to four times per month for three to four hours for at least one year (Grossman et al., 1998). There is no structured programme for BB/BS. Matches are inclined to participate in developmentally appropriate social activities, for example going to a movie, attending a sports event, going on a hike, reading books, or just hanging out and sharing thoughts (National Institute of Justice, n.d.).

BB/BS was not developed within a particular theoretical framework, but the project's rationale is closely linked to the theory of social control. This theory posits that attachments to prosocial, supportive adult role models, a commitment to socially acceptable goals, involvement in conventional activities and a reciprocally trusting relationship between mentor and mentee can prevent mentees from engaging in antisocial delinquent activities and behaviour (Epicenter, 2013; National Institute of Justice, n.d.).

BB/BS has been extensively evaluated by randomised control trials, and has been seen to be effective in reducing the use of alcohol and illegal substances, truancy, and interpersonal violence (Grossman et al., 1998; Big Brothers Big Sisters of America, 2015). Qualitative studies on BB/BS are limited. One qualitative study was done by Spencer (2007) who conducted interviews with 12 male mentor-mentee (n = 24) pairs who participated in a one-on-one, community-based Big Brother youth mentoring programme. First, individual interviews were conducted followed by mentor-mentee interviews that lasted about one-and-a-half to two hours. Findings highlighted the importance of caring, supportive relationships during adolescence. Results further indicated that male mentors wanted to be emotionally connected role models involved with young people. These mentoring relationships provided a safe place for emotional vulnerability and support, and assisted some boys in managing feelings of anger more successfully. The findings of this study show that close and lasting male mentoring relationships have the potential to provide young boys with role models for less inhibiting and orthodox forms of masculinity, especially pertaining to emotional revelations and expressivity (Spencer, 2007)

2.9.2 Community outreach, mobilisation and empowerment approaches

Community outreach and mobilisation can include an array of interventions and methods: community meetings; street theatre; cultural activities; training or awareness raising sessions with traditional authorities, the religious community or leaders; marches; picketing and demonstrations (UN Women, 2012). One empowerment and participatory approach relevant to the thesis focus was evaluated for this study: Stepping Stones, as outlined in Table 2.5 below.

Table 2.5

Examples of Community Outreach, Mobilisation and Empowerment Approaches to Address Violence

Intervention	Participants & Context	Content & Structure	Method	Gender Perspective	Theory	Outcome
Stepping Stones **South Africa** *Gender based violence*	Young and adult men and women		Critical reflection, social norms and values, drama and role play, communication & relationship skills	Gender trans-formative	Behaviour change theories; Participatory & experiential learning, critical reflection	*Qualitative* Individual interviews (n=21) pre intervention and (n=18) follow-up & 4 FGDs post

2.9.2.1 Stepping Stones.

Stepping Stones (SS) was developed for use in Uganda, but has been implemented in over 40 countries, adapted for 17 settings, and translated at a minimum into 13 languages (Wallace 2006). SS makes use of participatory learning approaches, comprising critical reflection, drama and role play, and draws on participants' everyday experiences in the sessions to develop knowledge on sexual health, creates awareness of risks and the consequences of risk taking behaviour (Jewkes et al., 2007; Jewkes et al., 2008; Jewkes, Wood, & Duvvury, 2010; Wallace, 2006; Welbourn, 1995). The programme places substantial emphasis on skill building (Jewkes et al., 2010) and aims to enhance sexual health through the construction of more robust, egalitarian gender relationships with improved communication between partners (Welbourn, 1995). The sessions cover gender-based violence, communication and relationships skills (Jewkes et al., 2008; Wallace, 2006). The manual is based on the necessity to empower women in order to obtain respect and partake in decision-making and negotiations concerning their own health and safety. Notably, SS involves men to make sure changes in gender relationships can really happen (Wallace, 2006).

The SS training and education process is implemented over a 12 to 18-week period during which participants develop the ability to critically look at and evaluate the societal norms and values that influence their own attitudes and behaviours, as well as to identify ways in which these attitudes and behaviours may need to be changed to bring about change and increase care and respect (Agency for Co-operation and Research in Development [ACORD], 2007). SS is rooted in a number of behaviour change theories such as 'adult education theory,' which postulates that when learning is established from the vantage point of individuals, they learn better (Jewkes et al., 2006). SS also utilises Freirean practice of critical reflection using participatory methods such as drama and role-play, along with techniques of assertiveness training (Jewkes et al., 2006).

Qualitative evaluation has shown that SS has impacted numerous areas of participants' lives and underscores the argument that men have moved from a negative to a more positive egalitarian form of masculinity. Companion qualitative research was conducted to investigate how participants experienced the programme and how it impacted their lives (Jewkes et al., 2010). Data collection strategies comprised 21 in-depth interviews with 10 men and 11 women (1–3 interviews per participant) before the intervention and 9 to 12 months thereafter, 18 follow-up interviews and four FGDs were conducted. Findings from this qualitative evaluation have shown that SS empowered participants and stimulated self-reflection. Results also indicate that male participants formed a more compassionate masculinity, i.e., less violent and less anti-social. However, whilst some female participants displayed more assertiveness and some agency in HIV risk reduction, the majority failed to challenge their male partners or existing cultural norms around conservative femininities, indicating that more work needs to be done with women in order to change harmful gender norms. In another qualitative evaluation of the SS programme, researchers (Gibbs, Jewkes, Sikweyiya, & Willan, 2015) found a subtle shift, with men moving from 'harmful' characteristics of a dominant masculinity towards a form of masculinity where male power is supported by economic provision and trying to form and support 'households.' The authors note that even though there were some improvements in livelihoods and relationships, change was restricted by challenging social contexts such as high levels of unemployment, peer networks and dominant youth masculinity.

2.9.3 Fatherhood programmes

Two fatherhood programmes were evaluated for this study: Healthy Men in Healthy Families Programme and the Responsible Fatherhood programme (see Table 2.6 below).

Table 2.6

Examples of Fatherhood Programmes

Intervention	Participants & Context	Content & Structure	Method	Gender Perspective	Theory	Outcome
Healthy Men in Healthy Families (men's component) Baltimore	Men 19-44 years old Low income, urban, African American	*Group education* support groups *Services:* One on-one counselling, referral, individual case management, & employment initiative	Gender reflections (manhood & fatherhood), establish supportive environment to reinforce positive masculine transformation, skills development, education, & interpersonal relationships	Gender trans-formative	Not reported	*Qualitative* In-depth life histories (n=12)
Responsible Fatherhood Demonstration Program Maryland	Men 17-48 years old Low income, African American, mostly unmarried	*Group education* Support groups, workshops, community gathering *Services* Life skills training, career counselling, substance abuse, custody	Explore values, communication, anger and conflict management, gender stereotypes and racism, develop values in children, reflect on past and present role as sons, men & fathers	Gender sensitive	Experien-tial Learning Theory	*Qualitative* Process evaluation: 4 FGDs (n=20)

2.9.3.1 Healthy Men in Healthy Families Programme.

This programme, developed in Baltimore, Maryland, employs a comprehensive approach that endeavours to enhance the functioning of programme participants as both partners and fathers at an intrapersonal, relational, community, and broader societal level (Aronson, Whitehead, & Baber, 2003). This programme aims to fortify men's roles in supporting their children's mothers during and beyond pregnancy, and ultimately their developing children. The HMHFP currently strives to develop men through education job readiness; interpersonal relationships; sense of self (including attaining personal goals), meanings of manhood and fatherhood, and parenting and negotiation skills for co-parenting (Aronson et al., 2003). The programme comprises the following components (Aronson et al., 2003, p. 732): (1) individual case

management (advocate–client relationship); (2) support groups providing a safe and supportive space for men to deal with daily issues that confront them; (3) a culturally sensitive curriculum covering personal development aspects as well as relationships with women and with other men, including topics linked to parenting, pregnancy and child development; (4) one-on-one and group discussions linked to life planning, goal setting, and assessing progress; (5) General Educational Development (GED) classes; (6) addiction counselling and referral, and (7) an employment initiative by learning a trade whilst earning a living. The theoretical underpinnings of this programme have not been reported.

A qualitative evaluation was conducted on the HMHFP by collecting in-depth life historical data from 12 African American male participants ranging from 19 to 44 years old. Individual interviews lasting up to two hours were conducted on four occasions covering topics such as major life events; meanings and perceptions of fatherhood, manhood and parenting views, styles, and experiences, matters pertaining to team parenting, and experiences and advantages of participating in the HMHFP (Aronson et al., 2003). Several of the men discussed how they usually resorted to street methods to deal with conflicts in their work environment, an attitude that may threaten their employment. Results indicate that participants changed their attitudes towards work and were able to deal more positively with conflict as a result of participating in the programme. The programme also changed their relationships with the mother of their children, leading to a better relationship between themselves and their children.

2.9.3.2 Responsible fatherhood demonstration programme.

The Responsible Fatherhood Programme aims to assist fathers in fulfilling their roles as parents, partners and employees more effectively. The programme is organised into 20 sessions that cover the following topics: building a support network; alcohol and drug use and abuse; exploring values and setting goals; stereotypes and racism; anger and conflict management; communication skills; understanding male-female relationships; becoming self-sufficient by reflecting on how they fair as men, fathers and providers; understanding male-female relationships; employment matters; dealing with children's behaviour; coping as a single father; custody issues; reflecting on past and current experiences as sons, men and fathers; providing peer support during discussions; and developing values in children (Hayes & Sherwood, 2000). The curriculum's activities are intended to help the facilitator assist the men to change their thinking around their roles as fathers and around altering their behaviour. The programme is based on the experiential learning approach. As opposed to dictating how the

men should live their lives, the programme provides opportunities that empower them to examine their attitudes, get excited about new ideas, learn from other fathers, see a skill in action, and practice new techniques for connecting with their children. The discussion questions at the end of each activity are intended to cover five key phases in the experiential learning cycle, which paves the way to meaningful learning-experiencing, reporting, processing, generalising, and applying (Hayes & Sherwood, 2000).

Qualitative evaluation comprises a process evaluation that documented participants' perceptions of the programme's benefits, barriers to involvement in the programme, and how the programme could be improved (Anderson & Kohler, no date). Four FGDs lasting about two hours each were held with twenty fathers falling within the age range of 17-48. Questions included participants' attitudes about fatherhood and experiences in becoming fathers, existing emotional and economic involvement with their children, child support challenges they are facing, views on child support laws, and issues pertaining to the programme itself. Results indicate that participants benefitted from the programme at various levels (individual, relationship and contextual). On an individual level, the programme enhanced their self-confidence, provided them with emotional support, and assisted them with substance abuse problems, legal difficulties, and employment concerns. On a relational level, the programme enhanced their relationships with their children and mothers of their children, helped them to show love as well as understanding and appreciation for their children, and improved their empathy and listening skills. Contextual benefits included assistance with visitation, child support and custody, and led to greater community involvement. Barriers to staying with the programme included a lack of ability to communicate with others or worry about opening up to others as well as time constraints in balancing family, work, and programme demands (Anderson & Kohler, no date).

2.9.4 Social marketing, mass media and education campaigns

Mass media campaigns usually make use of television, radio, billboards and other media to reach a broad segment of a community. They also provide anonymous access to important information and resources (UN Women, 2012). Entertainment-education or 'edutainment' is an especially useful strategy that can be used to entertain as well as educate a larger audience and positively impact attitudes and social norms (UN Women, 2012). Two programmes (see Table 2.7 below) were reviewed that fall within the scope of social marketing, mass media and education campaigns: Soul City and the One Man Can Campaign.

Table 2.7

Examples of Social Marketing, Mass Media and Education Campaigns

Intervention	Particip ants & Context	Content & Structure	Method	Gender Perspective	Theory	Outcome
Soul City South Africa *Domestic violence, date rape, sexual harassment*	Men and women 16-65 years old from urban and rural areas	*Community Outreach and mobilisation* Country-wide mass-media and advocacy campaign	Prime-time television drama series, radio series, distribution of booklets, community events, relaying positive messages	Gender transform-ative	Social change theory and Ecological Approach	*Qualitative* FGDs (n=29) Interviews (n=32)
One Man Can Campaign South Africa *Gender based violence*	Men of all ages Urban and rural	Foster coalitions and networks, change and Strengthen organizational practices, education, rights based Community mobilization & advocacy, & work with Government	Strengthening Individual Knowledge, Skills and Leadership Capacity	Gender transform-ative	Spectrum of Change	*Qualitative* Interviews and FGDs

2.9.4.1 The Soul City Institute for Health and Development Communication.

The Soul City Institute for Health and Development Communication (SC IHDC), established in 1992, is a South African gender transformative, community outreach and mobilisation programme that targets men and women aged 16 to 65 years from both urban and rural areas. SC IHD addresses the structural barriers that hamper health equity by promoting social and health programmes for individuals within a community and broader society (Scheepers, Goldstein, & Usdin, 2001). The programme uses edutainment by incorporating social issues into popular media, using multiple media platforms including a prime time television drama series, print media and radio drama to get the most out of each medium's strong points and to reach multiple audiences. Key areas of focus include violence prevention, children's life skills development and the right to social security, HIV and AIDS and various other complex social and health issues.

SC IHD Series 4 particularly addresses domestic violence, date rape, sexual harassment and AIDS through a 13 episode television prime time drama series, 45 episode radio drama,

community events and school-based programmes and the nationwide distribution of three 34 page information booklets (1 million copies). This series reached over 16.2 million South Africans, and has been rated consistently among the top 3 television programmes in the country. The SC IHD programme assumes a positive approach by encouraging positive parenting through positive communication with children, positive role modelling, conveying messages positively as opposed to through fear, and through the portrayal of positive images of young people without glamorizing alcohol use and cigarette smoking. SC IHD established partnerships with, for example, the National Network on Violence Against Women to transmit information and raise awareness of women's rights, encouraging attitudinal changes, social norm transformation and behaviour modification relating to gender-based violence; encouraging individual and community action; and creating an environment that is conducive to legislative modification. The programme combines social change theory with an ecological approach to address immediate interpersonal and broader community and societal determinants of health.

SC IHD has been evaluated extensively and has been deemed as using one of the most comprehensive evaluation designs in gender-based violence and work with men (Barker et al., 2007). The SC IHD evaluation has included rigorous qualitative and quantitative studies. Extensive qualitative data were collected by means of FGDs (n = 29) and key informant interviews (n = 32). Results indicate a positive impact relating to exposure to the SC IHD programme and small increases in awareness and knowledge of the gravity of domestic violence, what violence against women entails, what actions to take, and services that can be accessed when violence occurs, as well as laws around violence against women. The findings also indicated positive attitudinal change in 11% of men regarding violence against women.

2.9.4.2 The One Man Can Campaign (Sonke Gender Justice, South Africa).
The One Man Can (OMC) campaign and toolkit was developed and launched by Sonke Gender Justice (SGJP) in 2006. The campaign aims to support men and boys to campaign for gender equality and change negative gender norms that lead to gender-based violence as well as the spread of HIV. The content of the manual is rooted in a commitment to social justice, engaged citizen activism and gender equality. The activities are interactive and provide participants with opportunities to reflect on their personal values and attitudes. The manual comprises activities that explore role modelling, values and attitudes about gender, gender role clarification, power, risk, violence, violence against women, HIV gender and sexuality,

and mobilisation. These activities empower them to have experiences regarding women, gender, domestic and sexual violence, democracy and human rights as well as HIV and AIDS so that they can take action to prevent such violence, reduce HIV and AIDS and promote gender equity. To lead to systemic and sustained change, SGJP makes use of the Spectrum of Change model as a planning and programme instrument. Spectrum of Change recognises eight reciprocally reinforcing social change strategies that promote modifications at the individual level as well as the socio-political and economic facets of people's lives. The OMC campaign promotes community education through community mobilisation, fosters coalitions and networks, facilitates change, strengthens organizational practices through the development of gender policies, raises awareness and increases dedication and the capacity to engage men. The campaign provides education and training to staff, health service providers, police, traditional leaders, religious leaders, NGOs; it also supports rights-based advocacy and works with government (Sonke Gender Justice Project, 2006).

OMC was evaluated qualitatively by interviews and FGDs with NGO activists, key informants, community members, and OMC campaign participants. Overall, the findings indicate a large amount of complexity in the viewpoints and practices of South African men and significant opportunity for including men in campaigns such as the OMC Campaign. Some men have proven remarkably resilient against all of the negative challenges they face, and many organisations have arisen with an interest in mobilising and harnessing men in addressing gender equality and HIV and AIDS issues (Colvin & Peacock, 2009).

2.9.5 Multi-level approaches

A number of programmes address violence at multiple systemic levels. Two programmes were reviewed in this category, including Men as Partners and Couples Health CoOp, as indicated in Table 2.8 below.

Table 2.8

Examples of Multi-level Approaches

Intervention	Participants & Context	Structure	Content & Method	Gender Perspective	Theory	Outcome
Men as Partners South Africa *Gender based violence*	Men 18-74 years old Community	Group Education: 35 hours' educational workshop over 5 days; Community mobilisation; establish action teams	Gender socialisation, violence, reflections on gender norms, parenting, health seeking behaviours, role of masculinity & HIV/AIDS	Gender transform-ative	Ecological model combined with community mobilisation	Qualitative: FGDs and interviews – Pre, post 1 and post 2 three months after workshop)
Couples Health CoOp **South Africa** *Gender-based violence*	African/Black or Coloured[4] couples 18-35 years old where the man engage in unprotected sex and use substances Community	2 workshops each with 2 modules risk behaviours, community strengths and resources, role modelling	Communication skills, negotiation skills, conflict and problem solving skills, goal setting skills, alcohol harm and reduction, gender role expectations, substance use treatment, HIV, role modelling & assets	Gender transformative	Not reported	*Qualitative*: formative evaluation FGDs and expert review

2.9.5.1 Men as partners.

Men as Partners (MAP) is a complex, multi-level intervention that uses an ecological approach and employs multi-faceted strategies to engage men in addressing gender-based violence alongside the positive role of men in sexual and reproductive health, with HIV and AIDS as important foci. Key aims of the MAP programme include challenging the gender norms, attitudes, values and behaviours of men that compromise their health and safety and those of women and children and encouraging men to become actively involved in preventing gender-based violence alongside HIV prevention (Peacock & Levack, 2004).

The programme comprises the following strategies: workshops aimed at changing knowledge, attitude and behaviour; mobilising men to take action in their own communities (by forming community action teams who work alongside other CBOs and NPOs to support events); working with media to promote changes in social norms; collaborating closely with other NGOs and grassroots community-based organisations to strengthen their ability to promote positive male involvement; and one-on-one counselling. Other activities at a community and

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[4] Coloured is the name given by the previous South African dispensation to an ethnic group of people who are of mixed race ancestry.

societal level include theatre, health fairs, murals and condom distribution (Peacock & Levack, 2004). This intervention utilises an ecological model linked with community mobilisation through the establishment of community action teams (Engender Health, 2015).

Qualitative evaluation of the Men as Partners programme included focus groups and interviews before the intervention, immediately after and three months later (Peacock & Levack, 2004). Evaluation of the intervention showed an increase in knowledge, positive changes in attitudes regarding issues around sexual violence and relationships, and positive behavioural change (Peacock & Levack, 2004). In a qualitative study employing in-depth interviews conducted in Tanzania with six to seven female MAP participants, the respondents in each of four intervention districts reported behaviour change by their male partners. Results indicate that male partners have started to demonstrate behaviours and attitudes that are indicative of a change in gender norms with regard to better knowledge and skills in gender issues, improved roles in child care, gender division of labour, and physical and emotional abuse that participants attributed to men's participation in MAP (Ezekiel, Kazaura, & Chitama, 2014).

2.9.5.2 The Couples Health CoOp.

The Couples Health CoOp (CHC) is a multi-dimensional intervention that emerged from an adaptation of Western Cape Women's Health CoOp and women's HIV prevention intervention by combining it with components of Project Connect and the Men as Partners Programme. The intervention addresses gender-based violence, gender roles, substance use, HIV and risky sexual practices. The main target population of the intervention is alcohol and other substances used by males who engage in unprotected sex and their female partners (Wechsberg et al., 2015). CHC comprises two workshops, each with two modules that include the following components: skills development (communication, negotiation, conflict and problem solving, and goal setting skills), gender role expectations, alcohol harm and reduction, benefits of substance abuse treatment, HIV risk and sexual risk behaviour interventions, community strengths and resources, and role modelling (Wechsberg et al., 2015). The theory underlying CHC has not been reported.

The CHC programme is still fairly new, with a formative evaluation study reporting the piloting process of the CHC (Wechsberg et al., 2015). The intervention was piloted by means of two FGDs with six couples (n=12) to assess their initial responses to the intervention. The pilot also enabled programme developers to assess the flow and monitor the timing of the components,

the appropriateness of the language, the clarity of programme content, and whether they learnt anything from the programme. Participants agreed that other couples could benefit from the CHC intervention by learning new skills that can help them in their relationships and in acting as role models for others in their community. Based on feedback from participants, the language was modified, more pictures were added, and some content was reduced because it took much longer than expected.

2.9.6 Local programmes with masculinity as a key focus

In order to ascertain which existing programmes focus particularly on promoting positive forms of masculinity in the Western Cape, we identified three particular programmes outlined in Table 2.9.

Table 2.9

Local Programmes with Masculinity as a Key Focus

Intervention Details	Intervention Type, Target and Setting	Information/Skills and Modality	Strategy	Gender Perspective	Evaluation
The USIKO Youth Development Project Western Cape, South Africa Youth violence	Mentoring Youth at risk or in conflict with the law (14 years and older from disadvantaged communities) School; community; criminal justice system	Prevention and Diversion Programme: wilderness; rituals, rites of passage; life skills; family counselling; youth clubs; mentoring and vocational skills Court-based programme: Clear criminal record; restorative justice and conflict resolution Modality: Sports, art therapy, wilderness excursions, ceremony, story-telling, ritual, 4 day wilderness camps, 4 day hikes and group therapy	12 month programme for school-based youth at risk and 3 month programme for court referred youth Programmes based on circle of courage adaptation	Gender Sensitive	Qualitative Participant Observations, facilitator evaluations, annual programme evaluations
Hearts of men: The Fatherhood Mentorship Programme Western Cape, South Africa Youth and Gender-based violence	Fatherhood/ Mentoring Adult men (mentors) school boys and young first time fathers (mentees) Community	Community building; mentoring; wilderness programme; fatherhood; gender role clarification Modality: reflection on gender roles, communication skills; building relationships, wilderness journey, and rituals	40 2 hour sessions over a period of 10 months Group mentoring	Gender transform-ative	Qualitative *w*orkshop evaluations

The Men and Boys Fatherhood Programme	Networking and community mobilisation	Alliance-based approach; advocacy, policy and practice; community action and mobilisation teams	Mobilise men; forge partnerships; build capacity to implement boys and men's programmes	Gender Transform-ative	Not reported
	Adult men				
Western Cape, South Africa	Community and Societal	*Modality* Campaigns; networking, workshops			
Sexual and gender based violence					

2.9.6.1 The USIKO Youth Development Project.

The Usiko Youth Development Project was developed by Stellenbosch University's Psychology Department in collaboration with the USIKO Trust and Jamestown community, a small low-income working class community, to address the needs of the youth in the community (Naidoo & van Wyk, 2009). Many students who attend the local primary and high schools in this town are children of farm workers who live in impoverished conditions on surrounding farms in the district (Arnold, 2012; van Wyk & Naidoo, 2006). These difficult social conditions contribute to various risk factors and detrimental outcomes such as low levels of school motivation, elevated school dropout rates, vulnerability to drug and alcohol abuse, elevated levels of teenage pregnancy, and violence and entanglement in gangs and crime. In response to these challenges, the programme targets youth aged 14 years and older who are at risk or in conflict with the law. The programme includes a rites of passage component for adolescent boys with a strong development and prevention focus; a mentoring component to train local volunteers to become mentors for young people; and a diversion component aimed specifically at young offenders who are referred to the Usiko programme by the local court for rehabilitation as an alternative to incarceration. Using a restorative justice approach combined with a wilderness segment, young offenders are assisted to engage with their offence and the outcome on themselves, their families, the broader community, and the victims; they then cultivate an alternative vision for their future.

All of the Usiko programmes are based on an adaptation of the Circle of Courage model developed by Brendtro, Brokenleg, and Van Bockern (2001). The programme combines self-exploration and life skills development, and using a rites of passage approach, provides exposure to wilderness and nature as part of a growth and therapeutic process, with community mentors playing a crucial role (Botha, 2007; Rousseau, & Pinnock, 2014). Community

feedback resulted in the project being broadened to include a separate girls/women programme (Anthonissen, 2011; van Wyk & Naidoo, 2006).

Published data on the USIKO Youth Development Project's evaluation is limited to grey literature in the form of theses (Anthonissen, 2011; Botha, 2007; Fabrik, 2004; Knoetze, 2003), annual reports and an online webpage for the programme. Some outcomes posted on the webpage include the following:

- In excess of 600 at-risk youth have successfully completed different components of the programme.
- More than 90% of programme participants have completed their high school qualification.
- In excess of 20 participants have obtained admission to learnerships and apprenticeships, and six are currently pursuing tertiary studies with assistance through the programme.
- In 2006, two Usiko graduates were chosen to take part in a Canadian leadership training programme and both went on to pursue tertiary studies and became staff members.
- Fifty volunteers from the local community have completed training as youth mentors.
- In excess of 10 youth participants who completed the programme have become mentors in the programme. The programme has advanced to become an independent non-governmental organisation run by local community members.

A practice manual has recently been published to disseminate the conceptual model and methodologies utilised in the USIKO programmes (Rousseau & Pinnock, 2014).

2.9.6.2 The Hearts of Men Fatherhood Mentorship Programme.

The Hearts of Men (HOM) Programme is a gender transformative mentorship programme that was established in the Strand area of the Western Cape (the broader area in which the current study is based). The programme targets adult men to be trained as mentors and school boys and young first time fathers to be trained as mentees. Programme components include community building, mentoring, a wilderness component, a focus on fatherhood, and gender role clarification. The programme is delivered in forty two-hour sessions over a period of 10 months. Even though anecdotal evidence indicates that the programme has been successful within the communities within which it was implemented, there have been no formal publications. Evaluation of the programme has been limited to session evaluations. One of the programme administrators indicated that many of the mentors (whom I have met) have become

part of the HOM facilitation team (S. Philips, personal communication, May 19, 2014). One of the community research team members of the SCRATCHMAPS project has participated as a mentee in the HOM programme, and indicated that the programme had a positive impact on his life, particularly in terms of values and being a positive role model in his community (R. Van Reenen, personal communication, May 19, 2014). A mother of another mentee who is also a SCRATCHMAPS research team member, confirmed that the programme had a positive impact on her son's life after he was a mentee, enabling him to make more positive and healthy choices (H. Swanepoel, personal communication, November 21, 2014).

2.9.6.3 Local Men's Network.

The Men and Boys Fatherhood Programme was established by the Gender Transformation Network in partnership with the Provincial Department of Social Development in the Western Cape (Fortuin, 2012). The programme targets men and boys, occurs in a community setting and focuses on community and societal ecological levels. The purpose of this community-based programme is to challenge the attitudes and behaviours held by men that compromise their own health and the safety of women and children; it also encourages men to become actively involved in responding to gender-based violence and the HIV and AIDS epidemic. The programme has an alliance-based approach that includes advocacy, policy and practice, forging partnerships, capacity building, and community action and mobilisation. Programme modalities include community campaigns; workshops aimed at changing knowledge, attitudes and behaviour; interactive role plays, mobilising men to take action in their own communities; and networking with other non-governmental organisations to enhance their capacity to implement similar men and boys programmes. The programme is implemented within six Western Cape regions, and works to mobilise men to become active proponents for gender equity and to take a stand against gender-based violence; it also addresses the reproductive health needs of women and men. The programme encompasses collaboration with communities, institutions, partner organisations, and local government departments across the Western Cape Province. Through these partnerships, the Men and Boys Fatherhood Programme has an active presence within the province (Fortuin, no date). No information regarding evaluation of the Men and Boys Fatherhood Programme has been published.

As can be seen from the above discussion and Table 2.9 above, two of the programmes focus on mentoring, in particular fatherhood, two of the programmes have a 'wilderness' component using a rites of passage approach, with USIKO focusing on at-risk youth and juvenile

delinquents as an integral part of the rehabilitation process and HOM focusing on first time fathers. All three programmes have a component that explores conceptions of gender. None of these programmes report on theory, and evaluation is limited to workshop evaluations and grey literature. The main targets in all three programmes are boys and men, although HOM and USIKO have worked with women as well. The Western Cape Men and Boys Network focuses on mobilising men to take an active stand for gender equity and against gender-based violence, while also addressing the reproductive health needs of both men and women. The programme involves collaboration with communities, partner organisations, institutions, and local governments to build their capacity to implement men and boys programmes.

2.9.7 Overall synthesis of programmes

This synthesis focused specifically on 12 programmes that spanned from mentoring on a relationship level to mass-media campaigns on a societal level. In general, all of the programmes reviewed have addressed one or more forms of interpersonal violence, including youth violence, gender-based violence, sexual violence and school-based violence. All of the programmes had some qualitative evaluation, but these were limited to mostly one study each, and local programmes had no formal evaluations conducted. A glaring gap in programme development appears to be a lack of explicit theory underlying the programmes. The most common approaches for preventing violence among young people aged 10 to 29 years focuses on skills development, including anger management, conflict resolution and social skills to resolve problems. Programmes that have included older adults have focused on mentoring relationships to train older adults to provide supportive relationships to younger people. All except for two of the reviewed programmes reflected a gender component. To address gender-based and sexual violence, approaches generally focus on promoting gender equitable relationships, creating a climate that does not tolerate violence. The results of the meta-synthesis are discussed in detail in Chapter 7.

2.10 Conclusion

The literature reviewed in this chapter unveiled pertinent information on violence prevention. This chapter commenced with an overview of violence prevention and outlined the risk and protective factors associated with interpersonal violence, focusing particularly on negative forms of masculinity as a key risk factor for violence and the promotion of positive forms of masculinity as a protective factor. The chapter then delineated various strategies for addressing interpersonal violence, including violence prevention through safety and peace promotion,

spiritual capacity and religious assets as a resource for violence prevention, and the mobilisation of spiritual capacity and religious assets to promote positive forms of masculinity. This was then followed by a methodical documentation of existing intervention programmes focusing on the prevention of interpersonal violence with a specific focus on the promotion of positive forms of masculinity. Pertinently, this perusal of the relevant literature surrounding the key focus of this study has highlighted the study's significance. At the same time, the review has highlighted the importance of developing and evaluating interventions in order to determine their efficacy for use on a broader scale. The next chapter will provide an in-depth review of the existing literature on community-based participatory research (CBPR).

CHAPTER 3
LITERATURE REVIEW:
COMMUNITY-BASED PARTICIPATORY RESEARCH

It is only when the oppressed find the oppressor out and become involved in the organized struggle for their liberation that they begin to believe in themselves. This discovery cannot be purely intellectual, but must involve action; nor can it be limited to mere activism, but must include serious reflection: only then will it be a praxis

(Paulo Freire, 1979, *Pedagogy of the Oppressed*)

3.1 Introduction

There has been a growing interest in the use of CBPR as an approach to conducting health research with and in communities. It has been argued that many contemporary multifaceted health challenges can successfully be studied and addressed by utilising approaches that underscore collaboration with communities in identifying, strategising and acting on locally identified concerns (Minkler, Glover-Blackwell, Thompson, & Tamir, 2003). Many experts have started to reject the notion that scientific objectivity demands that researchers distance themselves from their research subjects, and are thus partnering with community members who are experts (Nazro & Williams cited in Horowitz, Robinson, & Seifer, 2009, p. 2633). In this way, they exemplify the type of community voice, participation and action that may give rise to new initiatives and approaches and result in sustainable and long-term results (Horowitz et al., 2009). This study was grounded in an *a priori* commitment to adopt and implement such an approach in relation to the principles and values of the Community-Based Participatory Research (CBPR) approach. This chapter will, therefore, provide a detailed discussion on this approach as it serves as one of the key analytical frameworks for the study.

Drawing on a perusal of the literature, this chapter starts off with an overview of CBPR as a participatory approach to conducting research, a definition and a synopsis of the historical origins of this approach. The chapter then outlines the core principles of CBPR and provides an outline of the relationship between community engagement and CBPR. Key challenges faced by researchers using this approach and strategies for dealing with these challenges are then brought to light. The final section of this chapter focuses on evaluating and appraising the use of CBPR in developing and evaluating interventions.

3.2 An Overview of CBPR as a Participatory Approach to Research

CBPR falls within the ambit of participatory approaches to research. This 'family' of approaches is referred by a variety of different names across different disciplines, including Participatory Research (PR), Action Research (AC), Participatory Action Research (PAR), Collaborative Research (CR) and Community-Based Participatory Research (CBPR) (Stoecker, 2005). These terms are often used interchangeably. Regardless of the array of labels used to allude to the participatory research paradigm, this category of research approaches shares certain core ideas (Babbie & Mouton, 2006) including the aim to empower community members to actively engage in research that enhances citizen power and voice within communities (Taylor et al., 2004). Israel et al. (2003, p. 177), in their seminal review of community-based literature, define CBPR as the following:

> [A] collaborative approach to research that equitably involves, for example, community members, organizational representatives, and researchers in all aspects of the research process. The partners contribute unique strengths and shared responsibilities to enhance understanding of a given phenomenon and the social and cultural dynamics of the community, and integrate the knowledge gained with action to improve the health and well-being of community members.

CBPR as an approach to research is thus guided by fairness, equality, and non-discriminatory engagement and involvement of community members, community leaders, stakeholders and academic researchers in every facet of the research process. This approach assists that the community identify and draw on their own resources and strengths in order to address a particular problem (Lazarus, Bulbulia, Taliep, & Naidoo, 2015).

 CBPR comprises a worldview or orientation and an applied approach for doing research (Balcazar et al., 2004; Israel, Eng et al., 2005; Wallerstein, 2002). Horowitz et al. (2009) note that CBPR provides a structure or framework and procedure for collaborative and rigorous research by utilising well-established or developing methods with a community focus. Balcazar and colleagues (2004) propose that as an ideology, CBPR epitomises a set of beliefs concerning the role that social science research plays in decreasing social injustice and encouraging community participation in social change efforts. The approach is, therefore, principally geared toward working with marginalised members of communities who have restricted access to resources and decision-making processes in order to effect change in community health, programmes, policies or practices (Israel, Schulz, Parker, & Becker, 1998; Wallerstein, 2002).

This approach comprises a continuum of stages (Freudenberg, 2001) with a community-driven orientation that is systematic, participatory, and concerned with community and social change (Minkler, 2004). Distinctive features of this orientation to research include how the research is conceptualised and executed; the strong emphasis assigned to real community engagement during the course of the research process, and the application of findings to effect change (Minkler, Garcia, Rubin, & Wallerstein, 2012). As an approach to research, CBPR thus provides guiding principles for engaging and collaborating with communities for planning, developing, and evaluating interventions, and for disseminating findings.

3.3 Historical roots of CBPR

The historical origins of CBPR are located in the work of Kurt Lewin, a social scientist who coined the term *action research* in the 1940s (Babbie & Mouton, 2006; Holkup, Tripp-Reimer, Salois, & Weinert, 2004; Wallerstein & Duran, 2008). Reason (2006) posits that it is also embedded in the liberationist perspective as exemplified by Paulo Freire; philosophically, it is rooted in liberal humanism, phenomenology, pragmatism and critical theory; practically, it can be traced to scholar-practitioners in many professions, particularly in teaching, nursing and health promotion as well as organisations and community development.

Two separate traditions have influenced the field of participatory research (Babbie & Mouton, 2006; Wallerstein & Duran, 2003): the earlier northern action research tradition of Kurt Lewin's organisational change action and/or reflection cycle, and the southern tradition of participatory research. As a solution to solve the practical problems emerging from the gap between theory and practice, Lewin proposed a cycle of action involving planning, reflection, and problem-solving followed by rational decision making to inform new actions (Wallerstein, 2002; Wallerstein & Duran, 2008). The southern tradition emerged from radical criticisms by social scientists from Africa, Asia, and Latin America in the 1970s (Wallerstein, 2002). These critiques centred on structural underdevelopment and academic distance from social ills (Wallerstein, 2002). As espoused by Wallerstein and Duran (2008, p. 287), Freire transformed the research relationship from one where communities were regarded as objects of study to one where community members were actively participating in the research enquiry. Freire (1982, p. 30) did not view reality as an objective truth to be discovered, but saw reality as "the ways in which people involved with facts perceive them … The concrete reality is the connection between subjectivity and objectivity, never objectivity isolated from subjectivity".

Babbie and Mouton (2009) have outlined the key similarities between the northern and southern traditions in terms of values and ideologies, the boundaries of participation and the organisation of joint inquiry. These similarities include the following: (1) both traditions refer to PAR as an activity that engenders new knowledge and constructive change; (2) both traditions agree on the value of participation and the importance of values and beliefs in research that are linked to action; (3) PAR spawns new theory and knowledge whilst at the same time promoting practical problem solving in both traditions, and (4) whilst both traditions differ in their emphasis, both focus on knowledge by way of answers to particular problems as well as knowledge on transformation of the consciousness. These aforementioned similarities highlight that these traditions are fundamentally not at odds, but can inform each other and can be used in concert, such as when certain problems need work at the societal and organisational levels simultaneously and involve powerless and powerful constituencies at the same time (Babbie & Mouton, 2006).

Wallerstein and Duran (2008) emphasise that proponents of participatory research adopted the pledge to critical consciousness, social justice and emancipation as they confronted and questioned their individual roles in communities within a political ideology. According to Rahman (1991), self-conscious individuals, those who are poor, disenfranchised and oppressed will progressively change their environment by their own praxis. Reason (2006) emphasises that there is usually a separation between academic research and the daily practice that action research strives to address. Drawing on his previous work with Bradbury and Torbert, he argues that since every person is a participating actor in his or her world, the aim of inquiry does not focus mainly on describing or interpreting our world, contributing to the reserve of knowledge in a field, deconstructing taken-for-granted realities, or developing emancipatory theory, but rather on building a more direct connection between intellectual knowledge and instantaneous personal and social action in order for that inquiry to contribute directly to the thriving of individuals, their communities, and the ecosystems within which they are rooted.

3.4 Core principles of CBPR

The following core values and principles of CBPR have been identified by leading experts in the field of CBPR (Hawe, Shiell, & Riley, 2009; Israel, Schulz, Parker, & Becker, 2001; Israel, Parker et al., 2005; Lazarus, Duran, Caldwell & Bulbulia, 2012; Lazarus, Taliep, Bulbulia, Philips, & Seedat 2012; Minkler & Wallerstein, 2008; Schulz et al., 2002; Wallerstein & Duran, 2008):

- CBPR is grounded in a collaborative, equitable partnership between research institutions and community members;
- The community constitutes the central focus or unit of identity, solutions and practice;
- The research is relevant and responsive to the community's needs;
- CBPR promotes co-learning and co-creation of knowledge as well as reciprocal benefits, including the dissemination of findings and knowledge with all relevant partners;
- CBPR builds on existing strengths, relationships and resources within the community;
- CBPR is bound to action research that underscores a dynamic interactive relationship between theory and practice (praxis);
- CBPR entails a long-term process with a binding commitment to sustainability;
- Community engagement takes place at all levels of the research;
- CBPR openly tackles issues of race, racism, ethnicity, and social class, and stands for 'cultural humility'; and
- CBPR takes care to ensure validity and research rigor, but also aims to broaden the scope of validity regarding research relevance.

Israel, Schulz, Parker and Becker (1998) emphasise that CBPR addresses health from a positive approach and works within an ecological framework. CBPR emphasises empowering community members, which helps nurture ownership. Each of these focal principles will now be expounded on in the section that follows.

3.4.1 Partnership as a framework

The success of CBPR has been ascribed to the formation of community-researcher partnerships (Blevins, Morton, & McGovern, 2008; D'Alonzo, 2010; Wallerstein, Duran, Minkler, & Foley, 2005). Within CBPR, this constitutes an equitable partnership that involves all of the role players, recognising that each one is distinct and endowed with unique strengths, and valuing each individual that collaborates in the research process in order to gain a better understanding of a given health disparity and the socio-cultural dynamics within the community. This implies engagement with the target community in a collaborative relationship right from the start, on issues that the community is committed to resolving (de Vos, Strydom, Fouché, & Delport, 2005). It brings together all the knowledge gained through this collaborative partnership and puts forward a plan of action to address the disparities within the community.

All parties participate as equals and share control over all the phases of the research process in this partnership (Israel et al., 1998). This is in agreement with a "democratic and co-learning approach to research" where partners share control throughout every step of the research process and collaborate to design a project that supports community change and benefits community members as opposed to researcher-driven research where the community members act as consultants and advisors only (Higgins & Metzler, 2001, p. 490). Nyden (2003) compares traditional discipline-driven research with a traditional marriage (patriarchal), where the husband (like the academic institution or university) is endowed with more power, control of resources and decision-making than the wife (the community). In such a case, the university uses its power to make decisions in the relationship with the community. CBPR, on the other hand, bears a resemblance to a more egalitarian marriage in which both partners (i.e., community and university) recognize that they each have strengths, resources and responsibilities that they can build and draw on (Nyden, 2003). Such a partnership is, therefore, based on reciprocity, equality and respect where community members are not just regarded as participants, but equal partners who share in decision-making; their knowledge is valued.

This partnership ranges on a continuum with, at one end, partnerships initiated and propelled by communities and at the other end, collaborations originated and managed by universities or other external professionals (Minkler & Wallerstein, 2003). Still, communities rarely control the research process since institutional settings house the expertise, research structures and resources (Israel, Parker et al., 2005). This continued control exercised over CBPR efforts underscores the necessity of keeping a watchful eye on the cultivation of relationships with community partners so as to equalize such power imbalances and support reciprocally satisfying collaborations (Israel, Parker et al., 2005).

The partnership principle further draws attention to the significance of joint accountability in the decision-making process throughout the research process (Minkler et al., 2012). Thus, partnerships and joint accountability are usually enhanced and solidified through the establishment of Advisory Committees also called Advisory Boards, or Steering Committees, as well as signing of Memoranda of Understanding or Ethics Agreements. D'Alonzo (2010) notes that the establishment of a community advisory board is an important first step in conducting CBPR, so researchers are well-advised to approach key informants for the names of individuals who would be important to have on such a board. Potential members for the community advisory committee should be renowned in the community, possibly individuals

who have an interest in or a history of working with universities (D'Alonzo, 2010), key stakeholders, service providers, community leaders including religious leaders, and members of FBOs, NGOs and CBOs as well as local representatives from the targeted community.

Strong et al. (2009) report on the formative evaluation of a pilot intervention within a CBPR community-academic partnership in Detroit, Michigan. They note that the partnership of the Healthy Environment Partnership project was guided by a Steering Committee that comprised representatives from community, health service providers, community-based organisations (CBOs), representatives from the city health department, and academic researchers. These authors report that upon inception, this collaborative partnership was formed on a *modus operandi* that favoured agreed-upon participatory community-based tenets that emphasised strengthening collaboration among all partners. Similarly, various CBPR partnerships have been solidified through the establishment of advisory bodies and steering committees, for example the Community Action Against Asthma (CAAA) project in Detroit (Parker et al., 2003); Centre for Urban Epidemiological Studies (Freudenberg, 2001); Railton Community Assessment Project (CAP) in the Western Cape (Lazarus, Naidoo et al., 2014); and the Healthy Environments Partnerships in Detroit (Strong et al., 2009).

In a process evaluation of the Elluam Tungiinun (Towards Wellness) Project in Alaska, it emerged that community members described relationships within the community as a key variable for the success of the CBPR process and regarded partnership as "a process of coming together" (Rasmus, 2014, p. 9). Collaboration in the CBPR process in this study was enhanced through the establishment of a formal partnership between the university and community resource organisations through a memorandum of agreement drawn up by the tribal administration of the local community in order to collectively address community health and well-being issues concerning youth (Rasmus, 2014).

This aligns with the pre-conditions for success of a CBPR project as espoused by Blevins and colleagues (2008). They maintain that the success of CBPR projects hinges on whether the form and level of collaboration between the different partners has emerged from jointly agreed-upon responsibilities and activities and whether this has impacted the sustainability of the collaborative partnership as well as the project's outcomes. Effective collaboration is thus dependent on egalitarian principles such as democratic decision-making and not merely consent or approval of decisions made on behalf of a community. Blevins et al. (2008),

however, highlight that real collaboration does not necessarily imply equal involvement from all partners, but rather entails achieving a degree of input for which all parties yearn. They further note that the level of input may be flexible and renegotiated over time. However, researchers should employ caution and be cognisant of power struggles when negotiating input on principles guiding participation and decisions around roles and responsibilities with community and within community structures, as this can easily lead to conflict if some parties feel others dominate decision-making.

Higgins and Metzler (2001) identified the following enablers for the development of a successful partnership: using an asset-based approach to define community resources; establishing well-defined organisational structures (e.g., a community advisory committee) with agreed-upon ground-rules on conducting meetings and setting agendas and making decisions recognising that leadership is important; and creating an opportunity to dedicate the time needed to develop a partnership prior to carrying out the actual research agenda. Blevins et al. (2008) also highlight the importance of time in the development of democratic partnerships, stating that for CBPR, egalitarian relationships must develop over time, suggesting that evaluating the participatory process has to focus critically on the concordance between the preferred and potential levels of collaboration and what has been accomplished.

Reporting on the assessment of the collaborative nature of the Elder Lynk project in rural Missouri, Blevins et al. (2008) explain that they struggled to obtain participation on the advisory board since only one member maintained a consistent commitment. The participants ascribed this situation to issues of stigma and confidentiality, which consequently also impacted sustainability, as it was difficult to secure participation on the advisory committee. They also found that participants did not favour being involved in the research aspects of the project and reasoned that forced participation in the research aspect of CBPR projects could be detrimental to the project. One could argue that this is why the authors propose success to be dependent on the degree of achieving the level of desired participation. However, it is important to consider contextual and past experiences of communities with regard to 'hit-and-run' research when evaluating CBPR intervention projects. In the Elder Lynk study, for example, community members were particularly weary of projects funded by grants, as historically projects closed abruptly when funding ran dry.

A process evaluation of an elderly mental health project in rural America indicates that participants felt strongly that time and being present in the community to develop greater trust and buy-in was essential for any future work (Blevins et al., 2008). This highlights the importance of building and valuing trust as a key ingredient for effective collaboration, participation and successful partnership building. Others have noted that CBPR is a process that has exhibited significant promise in building healthy communities due to the importance it places on building trust and true collaborative partnerships, and on utilising study findings to modify programmes, practices, and policies in order to improve health outcomes (Minkler et al., 2012). In this regard, Lonczak et al. (2013) point out that due to the debauched history of research abuses and in conformity with the principles of CBPR, values such as respect, fairness, trust, rapport, and collaboration are emphasised. Citing by way of example research conducted with American Indian and Alaskan Native communities, they emphasise that these values were identified as important to the success of projects within these communities.

CBPR thus takes into account the inherent inequalities present between researchers and community partners, and highlights the importance of attending to these imbalances through fostering trusting and mutually respectful relationships rooted in an empowering process characterised by communication, information sharing and shared decision-making (Minkler et al., 2012).

3.4.2 Community as a unit of identity

The second principle of CBPR, community as focal point, underscores the importance of community for people as well as the value of utilising that identification with community as the point of departure or foundation for the work (Minkler et al., 2012). Making a case for the importance of being well-informed about a community and the lives of its members in the agenda for action, Trickett (2009) suggests that, within an ecological framework, having knowledge about the community of interest is a precondition and prelude to decisions around the type of actions that serve community objectives and interests.

A perusal of the literature indicates that 'community' is a nebulous term that has no single definition, as it has been defined differently in different contexts and different fields (see, for example Kretzmann & McNight, 1993; Lazarus, Naidoo, & Seedat, in press; O'Donoghue, 2009). Kretzman and McKnight (1993, p. 2) define "community" as an entity that includes three elements: (1) territory or place, (2) social establishments or organisations that are

responsible for regular interaction between residents, and (3) social interaction on issues concerning a common interest. They note though that many issues affecting community members remain place-based. Defining community within the context of CBPR is much broader than this; it ranges from a shared identity, geographic location, connectedness through history, and attempt to answer questions around the identity of the role players.

Within the framework of CBPR, community is defined as a *unit of identity*. Units of identity imply membership in or being part of, for example, a social network, a family, or a geographic place and are socially constructed dimensions of identity (Steuart, 1993). As a unit of identity, community denotes an identification and has an emotional connection with other members, shared symbol systems, common values and norms, common interests, and a dedication to fulfilling mutual needs (Steuart, 1993). Community can thus be regarded as a social entity with a shared identity. This identity can be based on, for example, culture, ethnicity, race, political affiliation, faith or religion, institutional connections, group membership, and locality (Wallerstein et al., 2005).

Communities of identity may be geographically bounded. As a geographic locality, community may be defined in terms of natural boundaries (for example, a neighbourhood) or being geographically scattered but having a shared identity (e.g., an ethnic group) or particular socio-economic and demographic patterns (e.g., being from a low socioeconomic background) (Chaskin, Brown, Venkatesh, & Vidal, 2001; Netting, Kettner, & McMurtry, 2008; Israel et al., 1998; Wallerstein et al., 2005). A definition of community, however, extends beyond geography; it depends a great deal on the perceptions of community members regarding what 'the community' really is (Minkler et al., 2012) or who represents the community in a particular project.

CBPR concedes that communities of identity are endowed with many diverse individual and organisational resources and skills and acknowledges that such communities could at the same time also benefit from outside skills and resources. CBPR partnerships may, therefore, consist of persons and groups that do not belong to the community of identity (Israel et al., 2003), for instance external service providers such as home care nurses who work and provide services to the community of identity. By the same token, these resources and skills could also be distinguishing features denoting a communal connection and, thereby, constitute a community of identity such as a fishing community or artisan community whose identity is formed by the

work they do and the experiential knowledge they have of their particular skill. In instances like these, it would be important to know and understand the rhythm and patterns of such communities where nature is intrinsically linked to their way of life, so researchers should be willing to patiently work with such communities' circadian cycles. For example, in an evaluation of the CBPR principles employed in an intervention study engaging the Yup'ik Alaska Native community, one of the reasons cited for decreased community participation over time in the CBPR process were increased hunting and fishing activities (Rasmus, 2014).

A community may be connected through a shared historical experience such as apartheid. Lazarus, Duran et al. (2012) emphasise the importance of dealing with a community's history of oppression and note that it requires understanding and healing and may be used for the purposes of personal as well as political empowerment. The shared memory of oppression, they note, is invariably transmitted inter-generationally through various means and serves as the basis for cultural mistrust that impacts health behaviour.

Community could also be delineated in more than one way in a particular project. Eisinger and Senturia (2001), for example, found that in the Seattle Partners for Healthy Communities project, the community board that comprises community representatives, community activists, academics, public health professionals and health care providers, defined community in geographic, economic and social terms.

Seifer and Gust (2010) argue that community within CBPR does not merely hinge on a precise definition around who 'represents' or who 'is' community, but rather concerns the process of putting forward relevant questions regarding whether those persons most affected by the issue being addressed, those having a stake in the issue and those with the necessary resources to tackle the issue are at the table, and whether or not they play a decision making role. In defining community, it is thus more important to ensure that the relevant community members and stakeholders are on board and participate in the decision-making processes that ultimately affect their lives.

3.4.3 Research relevance and responsiveness

One of the key benefits of CBPR is that it ensures that the research topic either originates from or reflects an important concern of the local community (Israel, Parker et al., 2005). Ideally, topics for CBPR projects ought to come from within the community itself (Minkler & Hancock,

2003; Mosavel, Simon, Van Stade, & Buchbinder, 2005). Many projects, however, would not come about without the initiative of someone from outside the community (D'Alonzo, 2010; Reason, 1994). The outside researcher's role in such a case is to facilitate the dialogue among community members in order to reach consensus on the study's exact target (Balcazar et al., 2004). Wallerstein and colleagues (2005) state that when negotiating the health concern or focus for research, albeit initiated by the university, research questions and relevant issues can be negotiated within the partnership. Minkler (2005) suggests that in instances where outside researchers initiate research, they need to attentively listen to community considerations regarding the actual felt concern. This will enable them to ensure that they address a felt need of the community in contrast to researching a topic of their own interest.

Minkler et al. (2012) emphasise that CBPR ensures the local importance and applicability of public health challenges and embraces an ecological perspective that deals with the multiple determinants of health. They contend that in conformity with an ecological perspective of health, this principle emphasises a localised approach to health using relevant, timely, and inclusive data. This approach goes beyond the individual to the direct and broader contexts in which families reside, work, and play. In CBPR partnerships, the manifold determinants of health, including social, economic, and physical environmental influences are explored via an interdisciplinary lens, with an emphasis on their interactions (Minkler et al., 2012). To understand and identify a community's concerns, CBPR thus approaches the identification through an ecological lens in order to obtain a more holistic picture.

It is important to take into account that in low-income contexts, where resources are scarce, there may be many diverse competing needs, so it would be essential to ascertain which needs to prioritise (Gcabo, 2007). Nation, Bess, Voight, Perkins and Juarez (2011, p. 94) point out that it is essential to "build a research agenda that reflects the collective interests of [community-academic] partnership and is perceived as relevant by the community". Gcabo (2007) emphasises the importance of obtaining community input and approval by stating that pre-planned interventions by outsiders who expect community members to carry out activities are bound to fail. In CBPR, community members share their knowledge and experience to help identify key challenges to be studied, and are given the opportunity to formulate research questions in a culturally sensitive way (Minkler et al., 2003). What matters is for the researchers to establish in the initial stages whether the proposed research takes precedence over a different

focus for the community (see Sullivan et al., 2001) and then to come to an agreement on the focus for the research.

3.4.4 Community participation

The principal of participation is central to the CBPR approach. Community participation in CBPR entails direct involvement of community members in decisions around the research topic, the methods pursued, interpretation and application of results as well as the distribution of findings (Minkler & Wallerstein, 2003). Participation has been defined as widely a means of helping people become aware of their democratic rights, to a method of eliciting views from various stakeholders (Abbot & Guijt, cited in Kanji & Greenwood, 2001).

Participation occurs on a continuum, and can range from basic consultation or involvement to active participation throughout the research project. The most rudimentary and basic approach to community participation is to merely consult community leaders or representatives when planning and executing research (Torres-Harding, Herrell, & Howard, 2004; Wallerstein & Duran, 2008). Greater participation can be achieved when advisory committee members become involved by being facilitators, research coordinators and interviewers within their community (Wallerstein & Duran, 2008). They are thus actively involved in data collection procedures and project coordination.

Ngunjiri (1998) argues that participatory research is a double-edged sword that can be employed to either destroy or enhance the capacities of those with whom they are used. He highlights that constructive participation is a basic human necessity without which, he argues, people's capacities continue to be destroyed. This is, therefore, an empowerment approach that helps community members see their own abilities and potential to help themselves and to bring about change at all levels including the personal, interpersonal, community and societal levels.

Stack (2013) links participation to empowerment by emphasising that the values underpinning the notion of empowerment include participation of members of the community in the decision-making processes connected to their lived realities. Wallerstein and Duran (2008) note that CBPR holds the position that it is important that community members themselves be included in the research process as decision-making members. In this regard, it is important to ensure that the people representing the community are actually on board and not just token representation.

Participation enables researchers to build trust with the communities within which they work. Drawing from his work in the Centre for Urban Epidemiological Studies (CUES) project in Harlem, Freudenberg (2001) emphasises the importance of participation in both formal research engagement as well as community activities for building a relationship based on trust. He notes that the CUES project demonstrated that the willingness of academics to step outside their own doors and attend community meetings and activities or events and to actively participate in local coalitions facilitated the building of a relationship of trust necessary for more formal partnerships. Participating in community coalitions also enabled them to become acquainted with a broad array of grassroots agencies and larger formal institutions. This active participation in the community thus assisted in laying the foundation for fostering a strong partnership based on trust.

Participation is thus a dynamic and iterative process that can fluctuate on a continuum of mere consultation to active participation, and is closely linked to empowerment where community members are empowered with various skills to actively participate in the research process as co-researchers and not just mere subjects or participants.

3.4.5 The research process

Following the 'participation' principle, CBPR promotes the active involvement of community members, or the people whose lives are affected by the issue being studied in all phases of the research process.

Active involvement throughout the research process entails having everyone who has a stake in the issue under investigation taking part and contributing as equals, and sharing control throughout the research process (Israel et al., 1998). This includes the following:

- Identifying the health issue of concern to communities;
- Developing assessment tools;
- Collecting, analysing and interpreting data;
- Determining how data can be used to inform actions to improve community health;
- Creating the research designs;
- Designing, implementing and evaluating interventions, and

- Disseminating findings (Freudenberg, 2001; Higgins & Metzler, 2001; Israel et al., 1998).

Ideally, this entails equal input by all those who have a stake in the issue of concern, from the start of a relationship and conceptualisation of a research project to the development of data collection instruments, data collection, analysis and interpretation of data, dissemination of findings, and improvement of programme quality (Blevins et al., 2008). Ngujiri (1998) emphasises the importance of constructive involvement and the participation of community members throughout every step in the process in order to address the challenges that the community is facing. He asserts that involving community members in the process of improving their own conditions is a foundation of strong community development. This active participation is constructive, as it aligns with the ethical practice of CBPR, which is in contrast to destructive participation where, for example, community members are coerced to participate.

Israel, Lichtenstein et al. (2001) stress that it is crucial to engage with community members in the process of dialogue, exchange of ideas, and negotiation in order to obtain consent and cooperation prior to implementing intervention programmes. This process of engagement and dialogue should actually occur prior to intervention development so that communities can have a say in the projects that ought to be implemented to address their needs in contrast to providing permission for programmes that had been decided on already or had been developed without their input (Israel, Lichtenstein et al., 2001).

Israel, Parker et al. (2005) point out that opportunities should also be created to involve community partners as co-authors on publications and co-presenters on presentations, to the degree that they are interested. By way of example, they highlight that community partners could be involved in the dissemination of findings in a number of different ways, including making presentations at meetings, contributing to publications, developing information booklets, newsletters, and participating in radio announcements. Strong et al. (2009) echo this viewpoint and note that a true partnership involves community members in all of the phases of the study, including the dissemination of findings. Reporting on the partnership approach that they employed, these authors state that one of the key principles adopted by their Steering Committee centred on the development of a set of guidelines outlining the inclusion of community members to co-present and co-author with institutional partners. In this project, the partnership process was evaluated annually, with evaluation findings dictating discussions

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around strengthening the partnership. This aligns with PAR's action-reflection process used to strengthen the partnership.

3.4.6 Co-learning and co-creation of knowledge

A primary feature of CBPR is the value ascribed to the role of non-academic researchers alongside academic researchers in the knowledge creation process (Israel et al., 1998). It is a co-learning process where local people and outside researchers exchange knowledge, skills and capacity, create new understandings, and work together to develop action plans (Brantmeier, 2005; Israel et al., 1998; Minkler et al., 2012). A co-learning relationship consists of the following elements: (1) valuing all knowledge, (2) reciprocally valuing each other as knowledge sharers, (3) caring for one another as people and co-learners, (4) trusting each other, and (5) learning from one another (Brantmeier, 2005). Rather than presupposing that only academic researchers or outside agencies 'know', this co-learning approach is based on a partnership of mutual knowledge sharing and understanding between the two parties (Ngunjiri, 1998).

The adoption of CBPR principles stresses research 'with', as opposed to research 'on' communities, thereby affirming the importance of communities' experiential knowledge and underscoring a collaborative process (Leung et al., 2004). From this perspective, academic researchers approach the community with a conception that recognises the vast experiential knowledge community members possess – knowledge that academia can learn from in order to improve the average citizen's health and well-being. The insights and viewpoints of community members augment researchers' knowledge and understanding about community dynamics as well as factors and environmental circumstances that affect their health (Higgins & Metzler, 2001), all of which impact any decisions and plans around intervention studies and activities.

Moreover, as opposed to being teachers, researchers are co-learners who struggle as equal partners with ethical questions and the necessity for research approaches that embrace both scientific and common perspectives (Minkler, 2004). Researchers working within a CBPR framework recognise the existing inequities that are present between themselves and community members, and how these inequalities, as well as inequalities among community members themselves, may impact and influence collective research and action (Israel et al., 1998). It is an approach within which the researcher is aware that socio-economically

marginalised communities have often not had the right and privilege to express or define their own experience (Israel et al., 1998). CBPR thus advocates for an empowering process with the purposeful aim of attending to social inequalities and valuing community knowledge and sharing decision-making power, information, resources, and support between partners (Israel et al., 1998).

This principle is closely related to the sharing of findings and the outcomes of research. It is based on the "principle of reciprocal giving and taking" (Ngunjiri, 1998, pp. 466–467) which implies that both the community and the academic researcher ought to derive benefit from the research outcomes. This includes being involved in and receiving credit for research outputs and the outcomes of intervention research. CBPR thus emphasises the production and sharing of knowledge, which is accompanied by action derived from the new understandings that emerge from the reciprocal exchange of information. In this way, knowledge becomes democratised through the process of participation, so that it is intellectually and physically accessible, as well as locally relevant to the participants (Leung et al., 2004). An example of this is the study by Hernandez, Hayes, Balcazar and Keys (2001) who worked alongside African Americans and Latinos suffering from violence-induced spinal cord injuries to plan, develop, implement and evaluate culturally fitting peer-support services within rehabilitation institutions.

Ngunjiri (1998) argues that communities will continue to be disempowered as long as credit is a "one-sided affair". It is important to note that acknowledging the community's contributions is in and of itself an enabler of co-learning. In line with the empowerment principle of CBPR, it behoves researchers to not only involve community members in the production of knowledge, but to also respect their knowledge, encourage co-learning and fully value and acknowledge community members' contributions.

3.4.7 An asset-based, strengths approach

In contrast to a deficits approach to tackling social and health challenges, CBPR endorses the use of a positive approach that focuses on what communities have and not what they lack. As an asset-based approach, CBPR endeavours to build on existing strengths, resources and relationships that are present within communities and to mobilise these to address local health challenges (Israel et al., 1998). Foot and Hopkins (2010) define an "asset" as any feature, component or resource that augments the capacity of individuals, communities and societies to

preserve and maintain health and well-being. These assets can function at the individual, family or community level as shields or protective and supportive factors to buffer community members against adverse events. These resources may consist of skills and assets of individuals, coalitions, networks, or relationships and mediating edifices within the community like churches, and other community-based organisations where communities come together (Israel et al., 1998).

It has been argued that a deficit approach is tantamount to conveying to participants how inept, worthless, useless, and powerless they are (Ngunjiri, 1998). Corburn (2005) emphasises that as opposed to starting with a "deficit mentality" that emphasises community problems and challenges, this principle of CBPR draws attention to the wealth of knowledge, understanding and lived experience members of communities have from a local, indigenous, cultural, and historical lens. However, others who propose a positive approach have indicated that a needs assessment should also be included as part of such a process, even though it is important to focus on assets in order to move away from a deficit mentality (Kramer, Amos, Lazarus, & Seedat, 2012; Kretzmann & McKnight, 1993; Lazarus, Taliep et al., 2014).

Considering that underprivileged communities may have many issues on which they want a proposed project to focus, the identification of needs could enable the parties involved to prioritise and narrow the proposed project's focus. Kramer et al. (2012) argue that asset-based approaches often do not take into account the complex dynamics in community settings evidenced in the competition for limited resources, leadership conflicts and pugnacious efforts for voice and representation. In this regard, Ngunjiri (1998) suggests that during the process of identifying needs in a community, it is advisable for researchers to let the community members know that they work within a positive framework or perspective where locals are willing to plan, pay attention to existing resources and transform their lives. The above demonstrates that the identification of assets does not occur to the exclusion of establishing needs, but the focus should remain on how the positives can be mobilised to address needs.

The assets approach values knowledge, skills, capacities, associations, connections and potentials within communities (Foot & Hopkins, 2010). This perspective highlights three reasons for focusing on assets: (1) it changes the language that defines interventions from a deficits and needs perspective, hence transforming how interventions are formulated and conceived; (2) it works with 'what is there' in a local context as opposed to 'what is not,' and

(3) it enhances capabilities and reinforces capacities to act as a result (Cochrane et al., 2015). Helping community members to map their assets can enable them to (1) become their own resource or become aware that they are already a resource; (2) trigger participation; (3) develop accountability among themselves and between them and others; (4) formulate a self-sufficient structure able to relate with others, and (5) acquire voice and gain strength (Ngunjiri, 1998, p. 469).

One approach to identifying assets is creating a community capacity inventory by producing a written list of the talents and skills of community members and of the relations and other resources and assets of the locality as a whole (Kretzmann & McKnight, 1993). Another method for identifying assets is the use of community asset maps, which are constructed by members of the communities themselves in order to map local skills, entities, resources, and other building blocks that can foster community growth (McKnight & Kretzmann, 1990).

The principle and power of a positive framework could lead to positive actions and outcomes (Ngunjiri, 1998). It is, for example, better to focus on and bolster what a community is, has or can become instead of concentrating on what community is not or cannot be (Ngunjiri, 1998). An asset-based approach enables us to regard violence as preventable, and to think about innovative ways of acting differently and creatively without overlooking key drivers of violence such as hostile patriarchy and hegemonic masculinities (Cochrane et al., 2015).

3.4.8 Promoting local action

One of the most significant strengths of CBPR is that the dedication to action is inextricably linked to the research process. CBPR acknowledges the dynamic relationship between theory and practice, and is committed to both action and research goals; at the same time, it is aware that this involves a long-term process, with an obligation to community ownership and sustainability (Lazarus, Taliep et al., 2012).

CBPR integrates knowledge and action by, for example, constructing a broad knowledge base on health and well-being that serves as a springboard to action through the integration of that knowledge with community as well as social change efforts to address community concerns (Israel et al., 1998). Information is collected to stimulate and guide action, and new learnings surface as community members reflect on the actions taken. Using a participatory action-reflection process, CBPR thus combines and attains equipoise between research and action so

that all parties benefit equally from the process. It should be noted, though, that CBPR may or may not necessarily include a direct action component, as this is dependent of the decisions made by the various partners involved (Wallerstein & Duran, 2008). CBPR does, however, contain a pledge to translate and integrate research findings with community change endeavours, with the objective that all partners involved will benefit (Wallerstein & Duran, 2008).

Ngunjiri (1998) states that the developmental component of participatory methodologies entails that people become aware or be made aware of themselves and their surroundings, which in turn is envisaged to inspire and motivate them to devise plans and actions in order to address the social challenges that they face. For example, the findings from two studies in San Francisco and Las Vegas with room cleaners at hotels led to various actions linked to the research, including the presentation of the study results to the union in order to negotiate better working conditions, participation in lobby actions at the hotels at which participants worked, picketing action, and mobilising room cleaners to be involved in actions and bargaining sessions (Lee, Krause, Goetchius, Argriest, & Baker, 2008).

The CBPR's participatory and empowerment framework thus serves as an impetus for people to become aware of their own agency and the assets within their environment, including themselves as assets, which they can mobilise to tackle social or health disparities with which they are grappling.

3.4.9 Community empowerment and ownership

Empowerment is a developmental, participatory process by means of which marginalised persons and groups attain better control over their lives and their environment and acquire valued resources (Maton, 2008). Community members who feel disempowered are thus enabled to realise their own potential and become aware of their own agency and ability to reduce disempowerment and marginalisation. Kanji and Greenwood (2001, p. 7) define empowerment as "assisting people to exercise their democratic rights" and this refers to "a process where less powerful groups in society are involved in decision-making at different levels". This, they argue, is connected to the basic aim of empowerment, which is to transform society in order to ensure that the access to, and distribution of resources is more fair and equitable.

An empowerment approach values power sharing and capacity building through learning exchanges and mentoring; it emphasises democratic participation in all phases of the research within a social justice framework; it fosters community ownership of the project (Lazarus, Duran et al., 2012; Schulz, Israel, Selig, & Bayer, 1998). Capacity building through the transfer of various research related skills and community development is thus important for empowerment and ownership.

Ownership has been linked directly to the outputs and gains derived from a project. A particular question that emerges in this regard is, 'Who benefits from the project?' Any publications resulting from the project should acknowledge the contribution of community participants, who must be consulted to provide feedback prior to submission of research outputs and should be invited as co-authors on articles and other research outputs (see Schulz et al., 1998).

Lazarus, Duran et al. (2012) and Lazarus, Taliep et al. (2012) infer that the empowerment aspects of CBPR reflect a critical perspective. A critical approach looks at the underlying assumptions of research initiatives focusing for the most part on dominant ways of knowledge production, which are regarded as being shaped largely by imperial, colonial and neo-colonial ideologies as well as globalisation and racism that commonly dislocate and silence community voices (Seedat & Suffla, 2012). It is thus essential, as argued by Lazarus, Duran and colleagues (2012), to have the necessary radical instruments for analysis and practice of, for example, political, socio-historical and economic analyses in marginalised communities in South Africa, a country emerging from oppression and colonisation (Ahmed & Pretorius-Heuchert, 2001; Hamber, Masilela, & Terre Blanche, 2001; Seedat, Duncan, & Lazarus, 2001). They further note that empowerment programmes that make use of personal and collective agency are frequently developed based on the results of these analyses.

The notions of reflexivity and praxis are fundamental to a critical approach (Seedat, 2012; Seedat & Suffla, 2012). This comprises a candid analysis of one's own standpoint and positionality in a community engagement process (Lazarus et al., 2012; Seedat & Suffla, 2012). In light of the above, it is important to ensure that various capacity building lessons are built into the different stages of the research in order to empower community members and foster ownership.

3.4.10 Community strengthening and sustainable development

A final imperative for CBPR projects is to strongly commit and aspire to ensuring community strengthening and sustainability. Mancini and Marek (2004, p. 339) define sustainability as:

> The capacity of programs to continuously respond to community issues. A sustained program maintains a focus consonant with its original goals and objectives, including the individuals, families, and communities it was originally intended to serve.

The quintessential factor emerging from this definition is continuity of benefits that community members and their families ought to derive from a programme. Minkler et al. (2012) explain that the principle of sustainability involves a long-term process and therefore emphasises the value of committing to a long timeframe by adequately investing resources and time in the CBPR process. It further conveys that we need to be cognisant of keeping a critical eye on sustainability and the projected outcomes of the CBPR process.

The following three components of sustainability to guide community-academic partnerships have been identified by Israel, Krieger et al. (2006): (1) ensuring the sustainability of relations and commitments among all parties, (2) supporting the knowledge, proficiency, and values on which the partnership is based, and (3) ensuring the continuity of funding, availability of staff, and the sustainability of programmes and policy changes. Marek and Mancini (2007) assert that, despite the prevalence of community-based programmes, information on elements of sustainability is scarce and data indicate that a great number of them are not sustained when initial start-up funding is depleted. They regard a sustained programme as one characterised by continuous delivery of programme components to the target audience over a long period of time, consonant with programme aims and objectives; this modifies components as needed via expansion and contraction and supports community capacity in order to respond better to community needs (Marek & Mancini, 2007). They propose a model of sustainability that contains the following seven elements: leadership competence, effective collaboration, understanding the community, demonstrated programme results, strategic funding, staff involvement and integration, and programme responsivity.

Alluding to the importance of sustainability, Ngunjiri (1998) emphasises that community members should be assisted to work towards becoming self-reliant intellectually, materially, and organisationally, including becoming proficient in management aspects. Within projects, this could be achieved through the transfer of various enabling skills in order to empower

members of the community to become self-sufficient and proficient in sustaining intervention activities after the project itself has ended.

Sustainability and equity are important to the concept of development, and thus a central objective of community development is sustainable freedom for marginalised communities characterised by a lack of access to socio-economic opportunities, and inadequate health and welfare services (Kramer et al., 2012). It is thus imperative to address sustainability linked to community development by building this capacity during project development.

3.5 CBPR and Community Engagement

The CBPR approach to research has been tied directly to the concept of community engagement (Lazarus, Taliep et al., 2012; Nation et al., 2011). According to D'Alonzo (2010), the most efficacious CBPR projects materialise as a natural extension of a progressive developmental process of community engagement. Community engagement is an overarching term that incorporates various professional and academic activities undertaken in partnership with local communities, including professional service, service-learning, community-based research, and applied research (Lazarus, Taliep et al., 2012).

The engagement of communities can be viewed as occurring on a continuum ranging from consultation to involvement to collaborative engagement (Hashagen, 2002) or, as espoused by Bowen, Newenham-Kahindi, and Herreman (2010), ranging from consultation, consent, and involvement, to participation. Consultation entails simply imparting information to a community and asking for feedback, but carries no commitment to shifting in the 'what' and the 'how' that is or will be done (Hashagen, 2002). So, it does not include participation in project development and implementation at all (Bowen et al., 2010). Engagement through consent involves obtaining stakeholder endorsement of an initiative (Bowen et al., 2010; Lazarus, Taliep et al., 2012). Community involvement may include important stakeholders as volunteers in a project (Bowen et al., 2010; Lazarus et al., 2012). Involvement conveys a stronger commitment, i.e., that communities must be involved in order for activities and solutions to be founded on an understanding of the community's views of its needs and concerns (Hashagen, 2002). However, involvement implies that external decision-makers have decided on the organisational structures and decision-making practices, whilst the community merely becomes involved in them (Hashagen, 2002).

Participatory or collaborative forms of engagement emphasise the inclusion of community members in the planning, development, implementation, and assessment of initiatives (Bowen et al., 2010; Lazarus, Taliep et al., 2012). It is a process that requires a thorough understanding of a community's dynamics; cautions against making assumptions about communities; asks for dialogue and is amenability to change, and develops structures and activities that are accessible to those communities (Hashagen, 2002). Participatory engagement in the context of marginalisation and inequalities means that the emphasis is on community knowledge, agency, control, ownership, and power differentials (see Seedat, 2012).

Bowen et al. (2010) differentiate between three forms of engagement: transactional, transitional, and transformational. Transactional engagement is inclined to be unidirectional, suggesting one-way communication and transmission (for example, from university or funding institution to community). Transitional engagement transcends the unidirectional approach by incorporating consultation and collaboration with community partners, but does not guarantee a full partnership. Transformational engagement reflects reciprocal processes, and is distinguished by joint learning, co-management, and joint control of projects. Importantly, this approach to research and practice pursues every effort to decolonise the construction of knowledge, transform exclusionary styles of community engagement, and attend to unequal power relations within community–academy partnerships (Lazarus, 2006, 2011; Lazarus et al., 2015; Ogunniyi, 2011).

Within South Africa, community engagement has been recognised by Eksteen, Bulbulia, Van Niekerk, Ismail, and Lekoba (2012) as a collaborative and partnership approach that underscores active and inclusive participation, promotes equitable power and reciprocal benefits for all parties in shared activities, and endorses the values of justice, critical consciousness, and self-determination. Their model draws on various models and approaches, progresses across the continuum from consultation, involvement and engagement to ownership. This model of community engagement, which has been developed within the Ukuphepha Safety, Peace and Health Initiative of the VIPRU, refers to six interrelated pathways: relationship construction, community-centred learning, contextual congruence, citizenship, social justice and building of democratic traditions, solidification of community services, and sustaining the social economy.

Drawing from the above, community engagement comprises the following goals: to have insight into and respect the underlying historical dynamics of the community; to align community engagement with the specific agendas of the community; to set up suitable and accountable structures and processes so as to incorporate relevant and diverse participation; to foster engagement by means of optimal participation during the entire course of the process; and to strengthen and sustain communities (Attree & French, 2007; Lazarus, Taliep et al., 2012; Lazarus et al., 2015; Popay, 2006; Rifkin, Lewando-Hundt, & Draper, 2000). Hashagen (2002) warns that, despite the many models of community engagement, it is the *essence* of engagement, i.e., the two-way process involving all parties concerned, that is important, as well as the establishment of relevant mechanisms and structures to support sustainability.

The principles and values underlying a CBPR approach are in concert with the basic principles of community engagement. In CBPR, community engagement takes place in every facet and step of the research process, is congruent and responsive to community needs, endorses community strengths and resources, and is dedicated to pursuing both action and research aspirations (Lazarus et al., 2015). This approach to participation exemplifies the principles of empowerment and participation, which are fundamental to community engagement. CBPR acknowledges engagement to be a long-term process that ultimately supports community ownership and sustainability (Israel et al., 2005; Lazarus, Duran et al., 2012; Lazarus et al., 2015; Minkler & Wallerstein, 2008).

CBPR as a form of community engagement has various benefits, as noted by Lazarus, Taliep and colleagues (2012). These include acknowledging power dynamics and promoting democratic practices; providing opportunities for public participation; and aiding knowledge development by acknowledging and integrating local community-embedded knowledge. This approach addresses the real, felt needs of the community; ensures cultural and local relevance; and supports local capacity building, which contributes to sustainable community development. Viswanathan et al. (2004) note that CBPR creates bridges between researchers and communities, enabling both to advance in knowledge and experience and making it possible for community participants, practitioners, and researchers to benefit equally from the process. It further supports implementation and dissemination of research findings (Lazarus, Duran et al., 2012).

One of the greatest benefits of CBPR is its ability to tailor and develop culturally appropriate solutions to address the felt needs of community members. Viswanathan and colleagues (2004) declare that the prospect of investigating the community's unique circumstances in order to evaluate and adapt best practices to the community's own needs is the ultimate benefit of CBPR. A further benefit of CBPR is that it equally supports external and internal validity, as people are more likely to be extra truthful, open and disposed to participate, and the methods employed in CBPR contribute to improved translation of research and practice through enabling and helping community–academic communication and interchange of knowledge (Lazarus, Duran et al., 2012). The validity and efficacy of CBPR projects are enhanced through the development of culturally applicable measurement instruments and the establishment of trust, which improves the quality and quantity of the data (see Viswanathan et al., 2004). The following figure demonstrates the similarities between CBPR and community engagement.
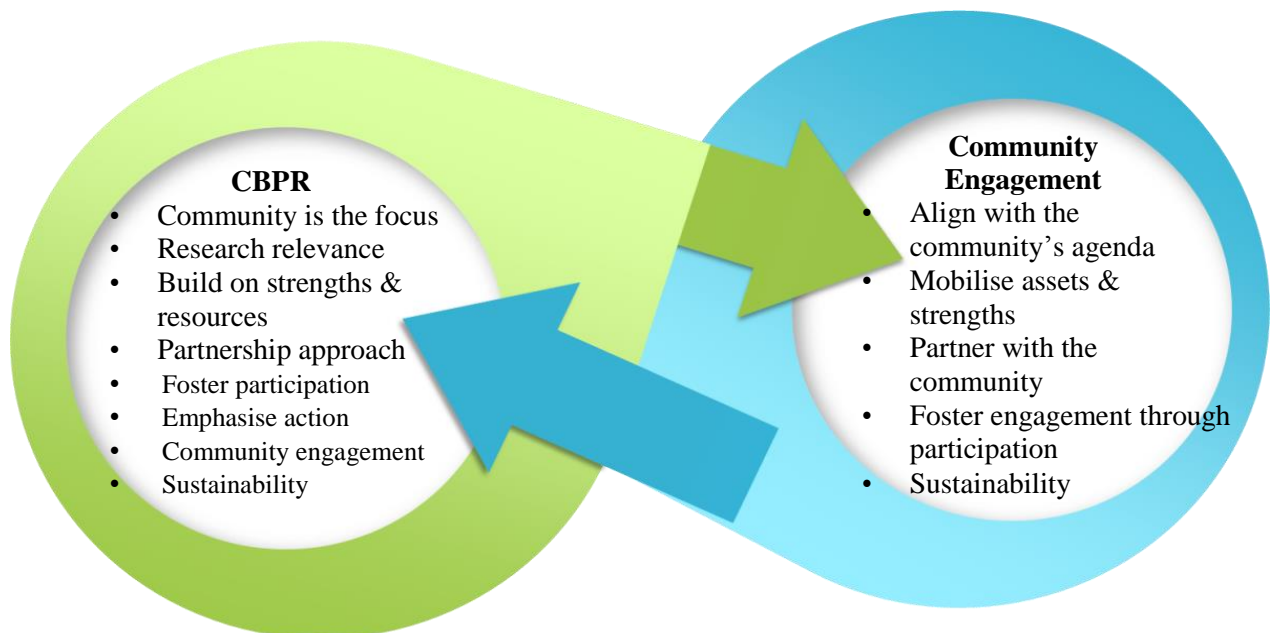
Figure 3.2. **Similarities between CBPR and community engagement.**

Figure 3.2 above indicates that for both CBPR and community engagement, the community is central, the research aligns with the community's own agenda, both focus on assets, are based on a partnership, foster participation, actively engage community and ultimately aim at sustainability.

3.6 Limitations and Challenges of the CBPR approach
Whilst the call for more CBPR approaches to conducting research has become in vogue in

recent years, CBPR has not been without challenges. The theoretical, conceptual and methodological underpinnings of participatory approaches, including CBPR, have received numerous criticisms over the years (Neef, 2003). These include (1) methodological restrictions and lack of scientific rigour, (2) inexperience around the intricacy of communication processes, group dynamics and power relations, (3) reduction of participatory methods to the diagnostic stage, (4) myth of immediate analysis of local knowledge, (5) 'tyranny of techniques' and instrumental nature of participatory methods, (6) underestimation of the costs involved in participation, and (7) participation as a replacement for good governance. Additional challenges highlighted by Springett and Wallerstein (2008) are time, funding, ensuring democratic processes in large scale projects, regulating the 'ebb and flow' of community members, maintaining a balance in the relationship between the researcher and the researched, and expert and lay-person involvement as well as insider/outsider dynamics as additional limitations.

On the basis of an examination of literature and their own experiences, Lazarus, Duran et al. (2012) and Lazarus, Taliep et al. (2012) identified the following categories of challenges in conducting CBPR, which are directly linked to the principles of CBPR: knowledge and power, resources and power, participation and power, community dynamics, and methodological challenges. The discussion that ensues is based on these broad categories.

3.6.1 Knowledge and power

Confronting the association between knowledge and power is fundamental to all CBPR principles (Lazarus, Bulbulia, & Seedat, 2013). Challenges relating to knowledge and power contain the following three sub-themes identified by Lazarus et al. (2012): different interests, power-differentials, and respecting knowledge systems.

3.6.1.1 Different interests.

Wallerstein and Duran (2006) note that a key challenge regarding "different interests" relates to what the interests are that are being served or not served. They raise the following question: "How do we address the reality that different stakeholders may and do have different goals of participation and different knowledge needs, and may and do have different expertise to participate more actively at different stages (p. 314)?" In answering their question, they state that researchers' interests in the production of knowledge often differ from the practical interests of community members regarding the improvement of programmes and services in

communities. It is thus necessary to negotiate such issues with communities so that they can derive short-term gains from the research endeavour, even when long-term goals entail final analysis and publications (Wallerstein & Duran, 2006).

Springett and Wallerstein (2008) highlight the importance of attending to the community's agendas and needs. Nation et al. (2011, p. 94) corroborate this position, stating that it is imperative to "build a research agenda that reflects the collective interests of our partnership and is perceived as relevant by the community". In the evaluation of a pilot intervention within an enduring CBPR partnership, the Healthy Environments Partnership (HEP), a key challenge that emerged centred on differences between the needs and desires of the community groups (three groups) and the ability of the pilot programme to meet those needs. Participants expressed disappointment when the programme ended and wanted the programme to expand and continue (Strong et al., 2009). Although the HEP engaged community partners to determine the feasibility of continuing the project, only one of three groups managed to continue for a few months following the completion of the pilot. It is thus important to frame an agenda that incorporates community needs, but at the same time incorporates effective planning around the sustainability of the project (Strong et al., 2009). Similarly, in the CUES project, Freudenberg (2001) found that, even though researchers and community disagreed on certain aspects, the act of coming together to respectfully engage in discussion opened the door for achieving common-ground solutions. Dialogue and effective communication is thus important to negotiate needs and agendas. Creating a space for dialogue on important community health challenges may be an important first step towards overcoming distrust (Freudenberg, 2001).

3.6.1.2 Power-differentials.

Nation et al. (2011) reflect particularly on power differentials present within community-engaged research partnerships. They demonstrate how power sharing among partners regarding research objectives, administrative decision-making, data analysis, and feedback distinguishes levels of engagement. Some researchers may regard the involvement of local community members in their research project as doing them a favour (Horowitz et al., 2009). Such ideas and beliefs can undermine the project's veracity, and researchers are reminded not to propound 'token' or marginal involvement of community members, but rather genuine and important engagement in research (Horowitz et al., 2009). Springett and Wallerstein (2008) also

deliberate the power relationship between researchers and the 'researched,' which, they argue, presents a number of problems.

It is important to note that CBPR reflects the values of a participatory research paradigm (Guba & Lincoln, 2005) and therefore centralises challenges relating to power relations and the decolonisation of knowledge (Bishop, 2005; Smith, 2005). Researchers should therefore strongly believe that communities are endowed with valuable information and skills that can contribute to the success of the project, as any disregard of the value that lay people's knowledge has for the success of the research can negatively impact the project and lead to the disenfranchisement of community members and subsequent drop-outs from the project.

3.6.1.3 Respecting knowledge systems.

Ahmed, Beck et al. (2004) highlight the lack of respect for community knowledge as a key challenge. They emphasise that conventional researchers find it difficult to accept that community members, who have no background knowledge on the research, can contribute significantly to the research process. This kind of mindset creates a barrier between researchers and communities. Implicit in the notion of CBPR is the belief in reciprocal learning, which is why researchers using this approach respect and value community knowledge and regard it as an important additional source of information (Ahmed, Beck et al., 2004).

The following strategies may be used to overcome this challenge: embracing the experiential knowledge of community members; ensuring that knowledge is democratised through participation so that it can be intellectually and physically relevant to communities; developing and using participatory leadership skills; and ensuring that everyone has equal input in decision-making processes (Bradbury & Reason, 2008; D'Alonzo, 2010; Farquhar & Wing, 2008; Flicker, Travers, Guta, McDonald, & Meagher 2008; Mertens, 2005; Minkler, 2004; Minkler & Baden, 2008; Springett & Wallerstein, 2008).

3.6.2 Resources and Power

In this category of challenges, two themes are used to organise the literature: financial inequalities, and donors' interests and frameworks (Lazarus, Duran et al., 2012; Lazarus, Taliep et al., 2012).

3.6.2.1 Financial inequalities.

Researchers have emphasised the importance of being aware of the role that money plays in community research projects, and particularly how it can unintentionally create conflict (e.g., Nation et al., 2011). Horowitz et al. (2009) warn that financial inequalities and ensuing funding disputes can be toxic to partnerships. Community members may have difficulty reconciling huge research budgets with the stipend they earn, or may have issues around how the money is spent or what amount is given to whom. Community members may also feel relatively underfunded when they become aware of the huge salaries academic researchers receive, and might feel that they are equally contributing to the project (Horowitz et al., 2009). Factors to consider include the following: who controls the finances, how are they spent or used, and how the finances are managed (Lazarus, Duran et al., 2012). Ahmed, Beck et al. (2004) emphasise that in true partnerships, work and rewards ought to be shared, including grant funds which may, in some cases, be awarded to the community and not the academic institution.

Horowitz and colleagues (2009) suggest that budget discussions must be incorporated in CBPR education processes where both community and academics learn, including learning about costs involved in negotiating, planning, and implementing projects and finding more cost-effective ways of sustaining programmes. This learning process, where community members are capacitated in financial management, is vital for the sustainability of community projects.

3.6.2.2 Donors' interests and frameworks.

CBPR often entails a good measure of time and resources that have to be incorporated within research protocols and funding grants (Springett & Wallerstein, 2008). Hill and Cook (2013) indicate that community members' voices may often be inadvertently silenced by the very makeup of the consultation process due to outside pressures such as lack of funding or time for the consultative process. They state that fleshing out and devising a well-developed vision for a community is a process that involves many consultations and therefore time, frequently months and sometimes years. Funders are therefore hesitant to support capricious processes and outcomes (Springett & Wallerstein, 2008).

The longer time-frame needed for partnering with communities, as well as the concomitant need for continuous financial commitment, could be problematic for those wanting well-defined funding goals and immediate outcomes (Minkler et al., 2003). Freudenberg (2001), reporting on the CUES project, stresses that regardless of the genuine attempt by CUES to

promote community participation, funders still insist on researchers being in control. This, he notes, results in the onerous task of accessing the resources needed for a true participatory process. The implication of this has resulted in most of their projects being funding-driven. This makes it difficult to tailor interventions to local needs and conditions.

Kanji and Greenwood (2001) suggest that the time and costs required for participation should be clearly documented in project proposals because they have implications for donors who indicate their support for utilising participatory approaches and methods. They also advise that care should be taken not to raise longer-term anticipations that cannot be met. By way of reminder, they further state that quality work and the institutionalisation of participatory approaches takes time, money and investment in staff development.

3.6.3 Participation and power

The relationship among the different stakeholders, community members and academics is central to the concern of power and participation (Nation et al., 2011). Ahmed, Beck et al. (2004) note that historically, the bulk of academic researchers view members of communities as objects of research, an attitude that has led to the reluctance of locals to participate in research projects. CBPR researchers work within a framework that builds relationships based on trust (Ahmed, Beck et al., 2004). Thus, strategies to buffer successful collaboration and fair and just power relations are essential, and no stone should be left unturned to ensure and promote participation guided by a commitment to co-learning and co-creating (Lazarus et al., 2015).

Challenges relating to participation and power comprise the following sub-themes as identified by Lazarus, Duran, et al. (2012): whose research agenda is on the table, the key challenges relating to facilitating optimal participation within the research process, and reflexivity challenges.

3.6.3.1 Whose research agenda?

Lazarus, Duran et al. (2012) state that a key consideration in conducting CBPR, centres on who initiates the project and who is involved in the project. They emphasise that the question of who initiates the project is an important issue to take into account, as it often reflects and exacerbates iniquitous power relations in the partnership. Nation et al. (2011) contend that

power relations are shaped and affected by 'who initiates' the research: the community or the researcher(s). A challenge that community-based researchers have to contend with is accepting that statistically significant research or data may be irrelevant in community outcomes (Lazarus, Duran et al., 2012). Academics are often challenged when findings from mixed-methods studies can advance a community's objectives but not their particular fields (Lazarus, Duran et al., 2012). With regards to who is involved in the project, Lazarus, Duran, et al. (2012) point out that this challenge relates to identifying the right people and ensuring that they are fully included in the project.

3.6.3.2 Facilitating participation.

Facilitating optimal participation is a central challenge that comprises mediating continuing power dynamics and tensions (Lazarus, Duran et al., 2012). The following particular challenges relating to participation have been identified by Springett and Wallerstein (2008): (1) researchers often lack the skills needed to conduct research from a CBPR perspective; (2) the broader the reach of a project, the harder it is to guarantee a democratic process, and (3) it is challenging to regulate the 'coming and going' of individuals in the project.

CBPR relies heavily on the establishment of partnerships, yet the proficiencies and methods we require to develop, nurture and support research partnerships are often not taught or studied in academic settings (Wallerstein et al., 2005). Ahmed, Beck and colleagues emphasise that only a small number of researchers have been exposed to formal training in CBPR methodology (Ahmed, Beck et al., 2004). They contend that this lack of formal training in CBPR will in the future produce a void in knowledgeable and experienced participatory researchers. Being reflexive with regard to this dearth in knowledge transfer is an important factor that CBPR experts need to take into account for the transfer of such knowledge. Wallerstein and colleagues (2005), for example, maintain that those who do possess the skills and knowledge to foster and maintain such partnerships within academia and universities are inclined to neglect engaging in continuous self-reflection about the unavoidable challenges and dilemmas they encounter in initiating, nurturing and preserving partnerships. Formal knowledge is, however, not enough; novice CBPR researchers without experience may not be able to handle what Neef (2003, p. 489) refers to as the "complexity of communication processes, group dynamics and power relations".

3.6.3.3 Reflexivity challenges.

A critical approach to research includes the requisite to be reflexive, with a specific focus on power relations (Nation et al., 2011). Ahmed, Beck et al. (2004) advise that researchers engaged in CBPR should make a concerted effort to continually reflect throughout the research process. This would include reflecting on their own strong points and weaknesses relating to content, process and method. Wallerstein and Duran (2008) highlight the importance of being reflexive and state that reflexivity within our own selves and with our community collaborators could stimulate a continual cycle of learning around our successes and our failures. At the same time, it is also a means for identifying challenges and reflecting on ways of addressing them. Lazarus, Duran et al. (2012) also emphasise that, as researchers and academics, we have to start with ourselves, investigating our own interests and stance in the research process as well as in community dynamics. In this regard, a further challenge relates to an understanding of an individual's own position of power as academic researcher in these dynamics (Lazarus, Duran et al., 2012). This includes continuously contemplating "whose research agenda is advanced and pursued, and making sure that community interests are at all times at the forefront.

One of the ways in which reflexivity can be maintained, especially around issues concerning participation and power, is through diary reflections (see Ortlipp, 2008), where researchers and community members record their experiences and reflections on a regular basis. This challenge can be addressed by establishing a norm or structural mechanism to support reflective practice (Nation et al., 2011). Another means of ensuring reflexivity is through a checking-in process where community members and academics are given the opportunity to reflect on any issues that have emerged.

3.6.4 Community dynamics

Challenges relating to community dynamics comprise the following sub-themes as identified by Lazarus et al. (2012): political dynamics, cultural diversity, community empowerment, and the challenge of sustainability.

3.6.4.1 Political dynamics.

Conducting research in and with communities is always fraught with formal and informal political dynamics that can hamper the research process (Lazarus, Duran et al., 2012). Very often, researchers are put in the difficult position of 'choosing sides' by community members who knowingly or unknowingly want to push for their own agenda. It is thus important for

researchers conducting CBPR to ensure that they negotiate and mitigate challenges with fairness and not choose sides.

Lazarus, Duran et al. (2012) highlight the importance of understanding the role of a community's history of oppression in current political dynamics, and emphasise that such historical roots require understanding and healing, and can be used for the purposes of personal as well as political empowerment. They further contend that the collective memory of oppression often gets transmitted inter-generationally through various methods and serves as the basis for cultural mistrust that affects health-related behaviours. Historical experiences of exploitation may also add to mistrust of academics and affect community participation. Communities often approach researchers with a set of characteristics constructed on earlier exposure to exploitation (Lazarus, Duran et al., 2012).

Wallerstein and Duran (2006) describe "CBPR as a force for social change". This, they note is rooted in a belief that participatory processes and outcomes can affect policy at a local, state and national level and contribute to changing conditions of unfairness and health disparities. However, they argue that even though participatory research and the knowledge gained has played an invaluable role as an educational means or context for analysis, it is hardly ever used as the structural agenda for change. They advise that health promotion and CBPR would progress by deliberating on how to contribute to current social movements, for example, the Treatment Action Campaign or 16 Days of Activism for no violence against women in South Africa.

It is thus necessary to be familiar with existing power dynamics within a historical and contemporary analysis to move forward and bring about change (Lazarus, Duran et al., 2012).

3.6.4.2 Cultural diversity.

Cultural diversity is defined as the coexistence of a variety of ethnic, racial, gender, and socio-economic groups within a society ('Cultural Diversity', 2015, n.d.). Neef (2003) points out that not enough consideration is given to the heterogeneity of the population of interest with regard to ethnicity and gender in participatory research approaches. It is important to acknowledge that there are a many views, interests and needs. Making these differences apparent, ranking conflicting but legitimate priorities, and arbitrating and negotiating between differing

perspectives and interests is a huge challenge in participatory research approaches for which proficiencies and experience in management are lacking (Neef, 2003).

Wallerstein and Duran (2006) emphasise the role that power and privilege play in relation to race, racism and ethnic discrimination. CBPR is usually conducted in low-income communities of colour[5], whilst most researchers receive high incomes and are usually not persons of colour (Horowitz et al., 2009). This crossing of cultures and social class can give rise to power issues and conflict (Horowitz et al., 2009). Reflecting on their own experience, Wallerstein and Duran (2006) note that Caucasian academics working in communities of colour cannot avoid encountering the consequences of historic and current racism. They also observe that community voices are often silenced because of assumptions around academic research expertise, so that concerns are often not voiced or heard. Silent voices may lead to alienation as some members may feel that they cannot contribute, and this could lead to the destabilisation of the research project.

Cultural humility (a lifetime dedication to self-appraisal and self-critique) is important to CBPR researchers in order to equalise power imbalances and develop and foster reciprocally respectful community-academic partnerships (Wallerstein & Duran, 2006). In this regard, it is important to engage in issues of whiteness, race and racism (Curry-Stevens, 2012). Researchers engaging in a CBPR approach to research should thus be aware of these issues and regard them as occasions for growth and for broadening their perspectives (Horowitz et al., 2009) and should therefore continuously reflect on, develop and nurture community relationships (Ahmed, Beck et al., 2004).

3.6.4.3 Community empowerment.

Challenges relating to community empowerment include promoting personal and collective agency and dealing with a reasonable but often damaging reaction of entitlement (Lazarus, Duran et al., 2012). Curry-Stevens (2012), reflecting on her experience in the Coalition of Communities of Colour in Multnomah County, notes that they faced various challenges, including their inability to realise how out-of-step they became with their coalition partners, to their possessiveness over money, to their entitlements to assuming a leading role in deciding

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[5] In South Africa, communities of colour imply communities that predominantly comprise people of mixed race ancestry.

on the steps of the research process. In this position, she explains, they became detrimental partners. She highlights that it is not enough to share power between the academy and the community. Considering the stealth with which positional privilege permeates all research practices, it is necessary for community groups to have more authority in the partnership. Neef (2003) argues that fostering the sustainability of development activities and aspirations of empowering communities cannot be addressed through what he calls "snapshot" participation - referring to participation that occurs only at specific moments in the research process. It is therefore not enough to come to the table as equals; the balance of power must rest with community groups (Curry-Stevens, 2012).

Continuous participation is therefore important to foster community empowerment. Neef (2003) points out that participatory methods must invest in longer-term action research practises and the continuous participation of project staff with communities. Only then, he emphasises, can participatory approaches contest inequalities and become instrumental in negotiating project outcomes and mediating between different interest groups within local communities.

3.6.4.4 Community ownership and sustainability.

A key challenge relating to sustainability and ownership is the funding of infrastructure for CBPR projects. Researchers often struggle to find funders who are willing to support the core infrastructure essential for sustaining CBPR partnerships (e.g., general operating expenses). Another challenge affecting the sustainability of programmes is inadequate time to finish the research-to-translation cycle. Considerable time is needed to plan and implement the research and intervention studies; analyse the data; present results to the community; engage the community in making sense of the results; identify policy and practice implications of the findings, and translate the results into policy and practice (Israel et al., 2006).
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Reflecting on their experiences in conducting community engaged research in focusing on violence prevention, Nashville, Nation et al. (2011) contend that the success of this kind of project is ascertained by the degree to which the community takes ownership of the intervention. In practice, ownership needs to be pursued through the use of optimal participation strategies and the promotion of multilateral transfer of capacities. Wallerstein and Duran (2006) argue that levels of ownership impact the levels of participation, with the greatest participation achieved by those who have a share and authority in decision making within the

partnership. Strategies to buttress community development and guarantee sustainability have to be built into the project planning phase and pursued accordingly, together with collective understanding and deliberation within the project structures (Lazarus, Duran et al., 2012).

3.6.5 Methodological challenges

Lazarus, Duran et al. (2012) highlight the tensions characteristic of the CBPR approach to research which are reflected in the following: (a) the quest of science/research goals contrasted with the quest of practical/action goals, and (b) the demand for control over phenomena contrasted with the call for maximum collaboration. A key methodological challenge emerges because CBPR is evaluated against the gold standard of conventional research, i.e., randomisation, transferability, replicability, and generalisability (see Ahmed, Beck et al., 2004; Israel et al., 1998). In this type of community-based research, members cannot be randomly assigned; research can often not be replicated because no two communities are identical; differences in programmes means that findings are not generalisable; external events generate bias; uncontrollability is intensified if there are too many community choices across sites (Farquhar & Wing, 2008; Nation et al., 2011; Springett & Wallerstein, 2008; Stoecker, 2005).

Drawing on various texts, Neef (2003) explains that methodological limitations have been ascribed to the data collection tools and techniques used in participatory research, which require refinement in terms of knowledge and experience. This somehow incentivises researchers to give a sanitised view of reality, discounting the messiness of reality. Neef (2003) points out that there appears to be an "illusion of objectivity" that emanates from a portrayal that all local perspectives have been taken into account (pp. 491).

Participatory approaches are further accused of lacking scientific rigour, as they sometimes lack sufficient analyses and detailed presentation of results. Lazarus, Duran et al. (2012) contend that validity remains a contested area, although numerous researchers have found techniques to overcome these concerns (e.g., Bradbury & Reason, 2008; Mertens, 2005; Reason & Bradbury, 2008). This is a challenge that emerges from a dominant scientific method in public health that overshadows the quality of participatory research (Ahmed, Beck et al., 2004; Israel et al., 1998).

This section focuses on the following sub-categories pertaining to methodological challenges as identified by Lazarus, Duran et al. (2012): control and validity challenges, living in the 'messiness', timeframe challenges, and challenges relating to research translation.

3.6.5.1 Control and validity challenges.

Lazarus, Taliep and colleagues (2012) note that CBPR raises difficulties relating to obtaining scientific 'control' for research purposes. Ways in which they overcame these challenges included choosing a design that allows for depth and flexibility and ensuring rigour in the collection of data. In a review conducted by Viswanathan et al. (2004) on CBPR projects, the results indicate that many researchers argued that community involvement leads to greater participation, increased external validity, diminished loss of follow-up and better individual and community capacity. However, they note that very few researchers reported on the disadvantages of community involvement, and some researchers touched briefly on selection bias and recruitment of intervention groups that are not a representative sample of the community.

A number of strategies have been identified to address validity challenges. These include: equalising research tensions (for example, the control of phenomena); devising rigorous tools and methods; using local and culturally applicable methods and instruments, including community involvement in the development phases of instruments and methods; utilising multiple methods; developing a range of validity measures to warrant rigour and quality; and including members of the community in the analysis and interpretation of data wherever suitable (Lazarus, Duran et al., 2012; Lazarus, Taliep et al., 2012).

3.6.5.2 Living in the 'messiness.'

Drawing on their collective experience, Lazarus, Duran et al. (2012) emphasise that CBPR research is 'messy' and they indicate that when conducting a CBPR study, the challenge is to manage this messiness. Personal development is one key area to focus on in order to manage the 'messiness', as researchers (and funders) need to learn to not only be flexible, but also to be able to manage conflict (Nation et al., 2011). Kanji and Greenwood (2001) emphasise that suitable communication and conflict resolution skills are a necessary requirement for researchers when conducting participatory research. They further point out that less experienced staff working in one of their participatory projects, the Sahel Common Property Resources project, highlighted the need for skills and working closely with more experienced

senior researchers to overcome this barrier. This could be achieved through a hands-on approach where the capacitation for effective community engagement is acquired in the field as well as through learning communication and conflict management skills.

3.6.5.3 Timeframe challenges.

As discussed previously, CBPR takes longer than conventional research, and researchers must find various ways of building realistic timeframes into research proposals and grant applications. Lazarus, Taliep et al. (2012) emphasise that a key challenge regarding issues of time in CBPR projects is the pledge to the 'action' aspects. Donors and research institutions are cautious about committing to any action without a clear research component. This creates a weighty barrier in the process of establishing trust with the community, and often leads to a lack of sustainability. Freudenberg (2001) notes that the CUES project, which is sponsored by the Centres for Disease Control and Prevention (CDC), transformed from a researcher-driven medical orientation to a CBPR model, and one of the key issues that they grappled with was trust. He ascribes this lack of trust to a past where institutions often disappointed numerous participants in the research process. For civil society to be willing to accept them as being different from such institutions, they would have to see real advantages over a longer period of time. The issue of trust and visible action thus continues to be a key challenge for researchers involved in CBPR. Researchers must therefore plan to engage in a suitably long period of time in the community.

3.6.5.4 Research translation challenges.

Nation et al. (2011) contend that the degree to which the community will own and pursue 'action' is established in the beginning stages of forming the partnership. It is thus important to include this aspect as a major focus in the initial stages of negotiating and developing the project. This entails agreeing on the role that academic researchers play in community action in order to circumvent the development of expectations that may not be met. Even though a number of strategies are available in the area of research translation, utilising a CBPR approach in itself enables a broad framework to guarantee translation. Research translation occurs via the actual research process, and via the product(s) of the project (Lazarus, Taliep et al., 2012). This challenge can be addressed by disseminating the research findings in local languages and formats that is suitable to the community, as well as concentrating on how the action emerging from the research will be followed (Lazarus, Duran et al., 2012; Lazarus, Taliep et al., 2012).

3.7 Appraising and Evaluating CBPR

The evaluation of CBPR projects is a complex endeavour as espoused by Minkler et al. (2003). Drawing on the work of Maltrud, Polacsek and Wallerstein (p. 1212), Minkler and colleagues argue that the complex environment in which CBPR projects take place and the multiple levels of change often pursued in these projects is highlighted, rendering conventional approaches ill-suited to this type of work. Whilst active community participation and partnerships are more likely to unearth and address the most important health issues of concern to members of the community, culminating in greater likelihood of success, the parameters and expiration of such projects cannot be delimited with the same precision as with conventional research where outside researchers develop study protocols on their own (Minkler et al., 2003).

Important issues to consider when evaluating the effectiveness of a CBPR project include providing answers to pertinent evaluation questions, including the following: How do the researchers and community members work together, make decisions, and negotiate? What are the advantages and challenges of conducting this type of research for all involved? What are the lessons that emerge through reflecting on these partnership processes that can be drawn on to guide the development of successful community-university collaborations (Parker et al., 2003)?

Clear guidelines have been developed to evaluate CBPR projects, including a range of scaled questions to consider when evaluating a CBPR project (Minkler et al., 2003; Parker et al., 2003; see also http:www.ihpr.ubc.ca/guidelines.html). Based on these questions and the key principles of CBPR, the following important factors (see Table 3.1 below) should be used as a guideline to evaluate and assess the effectiveness of CBPR projects. The framework outlined in Table 3.1 served as the analytical framework used in this study to evaluate the CBPR approach utilised to plan and develop violence prevention intervention programmes focusing on the mobilisation of spiritual capacity and religious assets to promote positive forms of masculinity, safety and peace.

Table 3.1

Analytical Framework: CBPR Process Evaluation Analysis

AREA OF FOCUS	GUIDING QUESTIONS
Erijaville as 'Community'	How has 'community' been defined in this project? How has this project engaged with both historical and current community dynamics?
Research Relevance and Responsiveness	Is the SCRATCHMAPS research relevant and responsive to the needs and supportive of the agenda of the local community?
Community Participation	Has optimal participation of key community stakeholders been promoted in this project, and how has this been pursued?
The Research Process	Was participation and 'empowerment' pursued through all steps in the research process?
Partnership as a Framework	To what extent and how has a 'partnership' framework guided the SCRATCHMAPS work?
Co-Learning and Co-Creation of Knowledge	To what extent and how has this project facilitated co-learning, and co-creation or production of knowledge?
An Asset-Based, Strengths Approach	How has the 'strengths-based' approach been pursued, and in particular, how have the values and principles of an 'asset approach' been pursued?
Promoting Local Action	How has this project contributed to local action in the community?
Community Empowerment and Ownership	To what extent and how has this project facilitated capacity building and local control? Is this project 'owned' by the local community?
Community Strengthening and Sustainable Development	Has this project contributed to sustainable community development in this local community? How has this been pursued?

3.8 Conclusion

This chapter provided an overview of CBPR as a participatory approach to conducting research and underscored the value of using CBPR not as an exclusionary approach to conventional science-driven research, but as an invaluable adjunct to conventional research. It provided a brief synopsis of the historical origins of this approach, and it outlined the core principles of CBPR and community engagement. It further highlighted the key challenges faced by researchers using this approach, and it provided suggestions and strategies for dealing with these challenges. This chapter brought to light the importance of putting the community at the centre of the research and it provided invaluable lessons and important steps for conducting CBPR within a given community. It also highlighted the importance of values such as respect, trust, honesty, openness and equality in conducting CBPR. The next chapter will provide insight into the theoretical perspectives within which this study is situated.

CHAPTER 4
THEORETICAL AND CONCEPTUAL FRAMEWORK

[I]n the final analysis, history and society – indeed the development of identity – are realized through human praxis. But since practice without theory is blind, the quest for paradigm remains a worthwhile endeavour.

(Hussein Abdilahi Bulhan, 1985, *Frantz Fanon and the Psychology of Oppression*)

4.1 Introduction

For the veracity and comprehensibility of scientific thought, it is necessary to clarify the theoretical lens that serves as a framework to connect all aspects of the study, guide the research process, and provide insights leading to the discovery of new connections (Tudge, Mokrova, Hatfield, & Karnik, 2009). This chapter provides insight into the theoretical framework within which this study is situated. Theory, according to Denzin (1970, p. 31), refers to "the construction of a system of interrelated propositions that permits the scientist to 'make sense' out of events observed" or to understand the phenomenon under consideration. The theoretical framework refers to the use of a theory, or a group of concepts extracted from one and the same theory (or more theories in the case of a meta-theoretical framework), to provide an elucidation or description of a phenomenon, or explain a particular event or research problem (Imenda, 2014).

It has been argued that the vast majority of conventional explanations of violence continue to be limited, one-dimensional and incomplete because they separately underscore different, albeit related, phenomena of violence; hence, they fail to provide for an all-inclusive explanation or framework of violence (Barak, 2006). Instead, they tend to "reduce violence to one primary variable or set of variables" (Barak, 2006, unpaginated). Theories on violence differ in the emphasis they place on psychological, relational and structural factors, as well as in their basic assumptions around whether human behaviour is a product of free will or is shaped by external factors (Rutherford et al., 2007). These explanations of violence are associated with theories that locate the origins of violence within the person or within the social environment, for example, explaining violence as a natural human inclination (Barak, 2006). Such attempts to explain the observed consistency of several forms of isolated and independent events in such singular aspects as gender or class, and how these in turn are linked to variances in biology, psychology, culture, sociology, and mass communication are flawed (Barak, 2006).

The lack of attention to the influence of larger social-ecological influences on behaviour is a ubiquitous shortcoming of many individual-focused programmes (Kerns & Prinz, 2002). Ecological and general systems theories are among the more inclusive theories and are an improvement to the one-dimensional, *ad hoc* mainstream theories of violence (Barak, 2006).

Violence is a complex, multifaceted challenge and there are numerous theoretical viewpoints regarding its causes (Rutherford et al., 2007) and solutions, so this study is framed by a multi-theoretical perspective. According to a report released by the Crime, Violence and Injury Lead Programme (Lazarus, Tonsing et al., 2009), literature on interpersonal violence reveals that the ecological perspective appears to be a dominant framework for understanding and responding to violence. The authors highlight the need for a "responsive critical public health approach to understanding violence" and propose the use of an integrated framework that "intentionally brings together a systemic, multi-level approach with a critical analysis of power dynamics that cuts across the levels" (p. x) of the ecological systems. Accordingly, this study is embedded in a critical public health situation and an ecological framework whilst concomitantly focusing on local strengths and assets.

This discussion will provide a synopsis of each of these perspectives, outlined in Table 4.1, namely the critical perspective (Marxist, feminist and masculinities theories) and the public health perspective (Ecological systems theory and WHO systems framework). It will provide a brief overview of the origins and historical developments of each perspective, the major hypotheses of these theories, their views on the phenomenon under study, their strengths and limitations, and the motivation as to why a combined approach would be more suitable to understand and address male interpersonal violence. This is followed by the theories of change that informed the violence prevention intervention. ('Theory of Change' refers to a set of assumptions that clarify the steps that lead to long-term goals and the links between programme activities and outcomes [Anderson, 2004]). The multiple theories of change (see Figure 4.1 below) that serve as a meta-framework and set the stage for producing the envisaged outcomes of the Building Bridges violence prevention intervention include the following: (1) Critical Theory; (2) Ecological Systems Theory; (3) Knowledge Attitude Behaviour Theory; (4) the values in relation to change education models (Kirschenbaum's Comprehensive Values Education), and (5) Experiential Learning Theory.

Figure 4.1 below provides an overview of the multiple theories that serve as a meta-framework for the development of the intervention (top part of the diagram) as well as the theories of change that informed the violence prevention intervention.
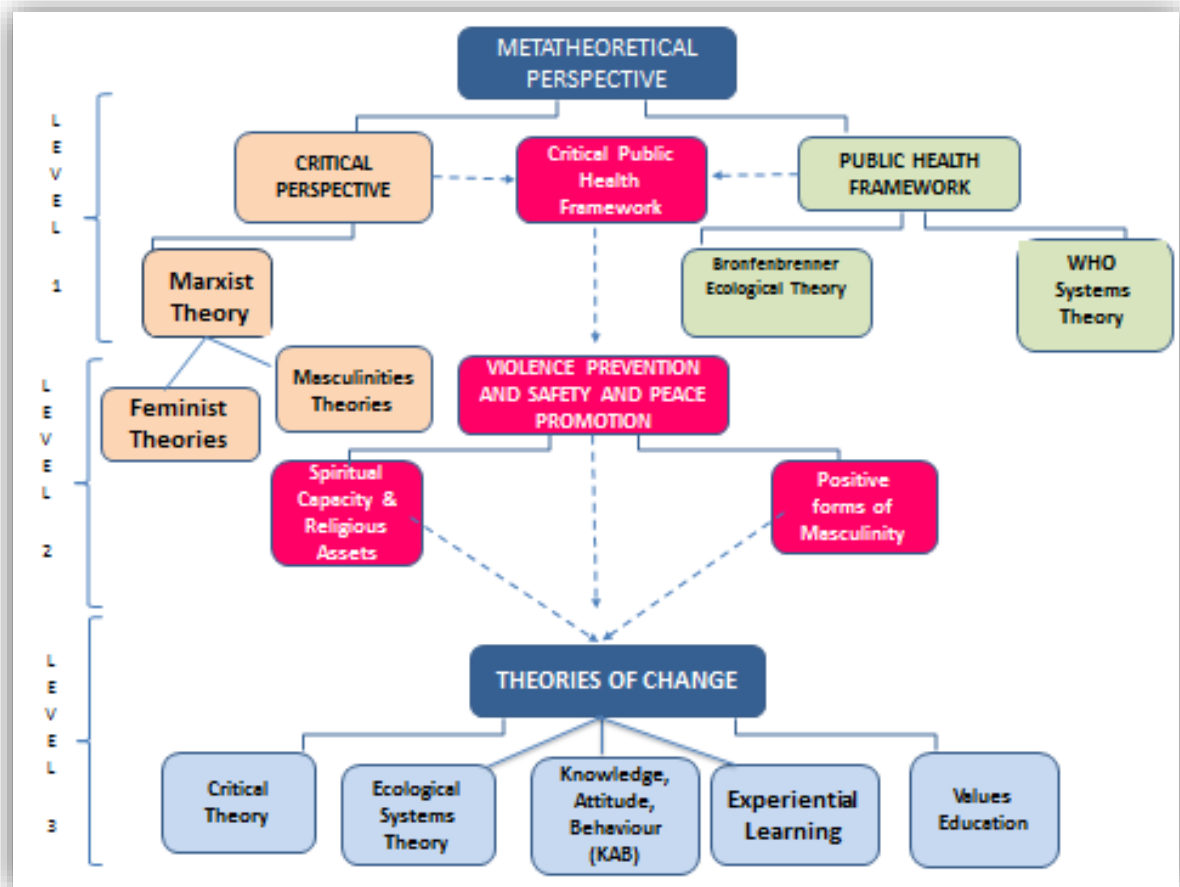
Figure 4.1. **Multi-theoretical framework.**

As can be seen in Figure 4.1, a critical public health framework provides a meta-framework for combining a critical lens with a systems perspective to understand violence and devise strategies to address that violence. The public health framework enables us to look at the different sectors involved in relation to the problem of violence (diverse disciplines, organisations and communities) and the ecological model looks at the level of the ecological system (individual, relationship, community and society) at which we need to focus our prevention strategies. A critical lens enables us to critically engage with issues of power and subjugation, historical and contextual issues, social justice and gender.

The public health framework has been used as a lens to understand and address interpersonal violence, and frequently uses the ecological systems perspective as a basis (Ahmed, Seedat, Van Niekerk, & Bulbulia, 2004; Butchart & Kruger, 2001; Krug et al., 2002; Parker et al., 2004; Lazarus, Ratele et al., 2009; Ratele & Duncan, 2003; Stevens, Seedat, & van Niekerk, 2003; Sethi et al., 2004, Walden & Wall, 2014). Public health engages systems science to get to the bottom of the complexity of causal factors in varied populations, ecologically structured communities and societal environments of public health practice (Green, 2006). Studies embedded in a systems orientation could enable us to recognise the value of the diverse methodologies that exist for learning how such systems are organised, how they behave over time, and how they can be better governed in dynamic and democratic contexts (Leischow & Milstein, 2006). What this essentially implies is that in order to enhance public health, it is critical to obtain better insight of the complex adaptive systems implicated in causing and addressing public health problems (Leischow & Milstein, 2006).

The multi-disciplinary focus of the public health framework enables us to work across multiple disciplines and incorporate multiple methodologies. In line with this multi-disciplinary orientation of the public health approach, "a [critical] feminist perspective may be introduced to understand how, for instance, patriarchy, gender inequality, and poverty contribute to femicide" (and other forms of gender violence) (Stevens et al., 2003, p. 367). As an interdisciplinary theory, feminism could assist us in making connections among ostensibly divergent schools of thought. Many feminists draw on elements of Marxist theory and other critical theories, as they find them useful in investigating issues that are relevant to the women's experience (Tyson, 2006). For example, Marxism can be used to comprehend how economic forces have been used by patriarchal ideologies and norms to keep women economically, socially and politically oppressed as a subordinate class (Tyson, 2006) and social constructionism can be used to ascertain how this subordination can lead to violence and victimisation.

The multiple theories that informed the development of the interventions suggested in this study will now be explained in more detail.

4.2 A Critical Perspective

Based on the suggestions by Lazarus et al. (2009), this study employed a critical stance that facilitated the use of CBPR and community engagement strategies in order to transform a local community and engage with mainstream and marginalised voices, including indigenous and locally embedded community knowledge, and adopt a human rights perspective. Importantly, this perspective enabled the use of critical lenses to engage various historical and contextual issues; the exploration of power dynamics, role inequalities and oppression; and the dissection of the construction and mutability of gender with a particular focus on the connection between masculinities and violence using feminist and masculinity theories (see Lazarus, Tonsing et al., 2009).

This section provides an overview of the critical perspective, outlining its historical roots and major characteristics, and expanding on the feminist critique and the masculinities perspective.

4.2.2 Historical development

Whilst there are a number of central figures who have played a major role in the articulation of critical theory such as Fay, Foucault and the philosophers from the Frankfurt School as well as those who have been engaged in trying to realise its aims like Freire, critical theory can trace its origins to Karl Marx's work (Babbie & Mouton, 2006).

Marx postulated that the socio-economic circumstances of people's lives control what they will know, value and accept as true, and how they will behave (Walsh & Ellis, 2007). Those in control of resources, therefore, have power; they dominate the values, both moral and political, in society and these ideologies come to be viewed as 'common sense' and a 'natural' way of thinking (Zarate & Woodfin, 2004). For Marx, these unjust and alienating social conditions are what give rise to crime and by extension violence (Walsh & Ellis, 2007). Alienation is described by Walsh and Ellis (2007) as the distancing or detachment of individuals from something. Walsh and Ellis (2007) argue that in capitalist societies, individuals are alienated from work, which leads to alienation from themselves and others. They deduce that alienated individuals may then treat other people as objects to be subjugated and victimised, since they themselves are purportedly exploited and oppressed by the capitalist system. Marx wanted to release humanity from the entrapment of alienation - from the power, domination and control by a society entrapped by wage labour and economic exploitation (Kirkpatrick et al., 1978).

Revisions of Marx's theory occurred in the twentieth century after the Russian Revolution by the Frankfurt School of philosophers (Viljoen & Eskell-Blokland, 2007). These philosophers are regarded as neo-Marxists, as they proposed a new appraisal of Marx's theory and developed what is now known as *critical theory* (Viljoen & Eskell-Blokland, 2007).

4.2.3 Major characteristics

Central issues in a critical perspective include historical problems of domination, alienation, emancipation, transformation, social struggles and liberation, removal of structural contradictions by taking a suitable course of action as well as the envisioning of new and innovative possibilities (Babbie & Mouton, 2006). The following features inform all varieties of critical social science (Seiler, no date):

(1) **Critical social scientists deem it essential to understand the lived experience of people in context.** For example, contemplations of power in South Africa cannot be viewed without considering the country's historical context, which compels researchers to consider the effects of history, historically related trauma, and the effects of unemployment, unequal income, gender disparities as well as infrastructural and racial inequalities (Ratele et al., 2010). In addition, critical methodologies study social conditions to unearth hidden structures. Critical theorists often build their critique on the principles of social constructionism, whilst others draw on Marxism or several forms of feminism (Alvesson & Sköldberg, 2009; Burr, 2003).

(2) **A critical social theory looks at issues of power and justice.** This includes the "ways that the economy; matters of race, class, and gender; ideologies; discourses; education; religion and other social institutions, and cultural dynamics interact to construct a social system" and shape the everyday life experiences of people (Kincheloe & McLaren, 2005, p. 306).

(3) **Critical approaches make a conscious effort to combine theory and action.** Critical theories serve to bring about transformation in the circumstances that affect human lives. Thus, proponents of a dynamic criticality, according to Kincheloe and McLaren (2005), draw on several liberatory discourses and include different groups of marginalised and oppressed peoples and their associates in the un-stratified group of

critical analysts. They cite by way of example Freire, who insisted on involving the people he studied as partners in the research process, and encouraged reflexivity to identify the powers that subtly shape people's lives. This is congruent with the CBPR principles used in this study.

(4) **This methodology asserts that knowledge is power.** Critical theory is described as an approach with an orientation towards psychological knowledge and practice and relations of power in general (Hayes, 2004). In this sense, critical theory takes on the form of self-reflective knowledge, encompassing both understanding and theoretical explanations to diminish entrapment in systems of domination or dependence, complying with the emancipatory interest by broadening the scope of autonomy and reducing the scope of domination (Hayes, 2004). Critical theory does not merely seek to interpret and describe the social world, but is an activity-oriented philosophy that, according to Boon and Head (2010), aspires to transform the world. Critical theory can, therefore, be regarded as a radical emancipatory theory directed at critiquing and changing society as a whole. This indicates that being aware of the ways in which one is oppressed enables one to take action to alter oppressive forces.

It is clear from the above that a critical approach is characterised by a human rights standpoint; a commitment to transformation, and a deliberation with issues like power and oppression, especially regarding racial dynamics, gender, feminism and masculinity (Ratele et al., 2010).

As outlined in the introductory chapter, violence is a gendered phenomenon, and a gender perspective was deemed critical for understanding the complexity of violence perpetration and victimisation and developing appropriate strategies for addressing violence. Messerschmidt (1993) regards gender as something females and males demonstrate and accomplish as opposed to something that they automatically are as a result of their biological sex. Others regard gender as "cultural practices that construct women and men as different and that advantage men at the expense of women" (Schrock & Schwalbe, 2009, p. 278). Gender is, thus, socially constructed with masculinity and femininity considered products of nurture or how males and females are reared (Blume, 1996). Gender is regarded as relational as it is a continuous process by means of which meanings are assigned by and to individuals via social interaction (Bird, 1996). Gender is thus a central part of how we construct our identity (Pleasants, 2007). Gender can therefore be regarded as a dynamic, mutable social construction. Since gender is constructed

through social learning and since these roles are learned, the argument is that it can be unlearned to create more equal societies (Blume, 1996). Feminist theory asserts that gender is a pervasive classification for comprehending human experience (Seiler, no date).

4.2.4 Feminist critique

Whilst there are numerous feminist approaches to violence, feminist theories approach interpersonal violence (family violence, violence against women and children) by examining power imbalances that generate and perpetuate violence against women (Cunningham et al., 1998). These theories are, therefore, critical in perspective. Bohman (2015) notes that though critical theory is frequently thought of narrowly as denoting the Frankfurt School, any theoretical approach with similar practical aims may be labelled a "critical theory", including the feminist critique.

Societal level imbalances exist in patriarchal societies in which structural factors preclude egalitarian and democratic participation of women in the economic, social and political systems. These societal level imbalances, argue Cunningham et al. (1998), are then replicated within the family by men exercising power and control over women, manifesting in, for example, violence. As pointed out by Tamara Shefer (2013), a critical feminist scholar, gender-based violence has long been proven to be strongly enmeshed with gender and various other social inequities. A woman-centred approach is regarded as fundamental to feminist research and develops through the critical consciousness of experiences, values, beliefs and goals (Kralik & van Loon, 2010). Kralik and van Loon (2010, p. 38) argue that "it is through this awareness that consciousness raising and action becomes possible as women learn to view the world through a critical lens and contradictions in their lives become illuminated".

Maquire (cited in Kralik & van Loon, 2010, p. 38) highlights the following general threads in feminism: (1) recognition that women encounter oppression and exploitation; (2) women experience their subjugations, challenges and strengths in different ways; (3) a commitment to expose the forces that cause and support oppression; and (4) a devotion to work with women (individually and collectively) aimed at action that will take to task and change oppressive structures and powers. There are three core concepts for feminist theorising that Kramarae (cited in Seiler, no date) highlights: gender, patriarchy and multiple ways of knowing. 'Power' should be added to these constructs, as it warrants deliberate discussion because of its prominent implication in violence perpetration and victimisation. These basic tenets, notes

Seiler (no date), aspire to reveal the powers and limitations of the gendered division across the globe.

4.2.4.1 Gender.

Feminist theory challenges the existing gender assumptions of society and aims to achieve more emancipating ways for women and men to live in the world (Seiler, no date). Feminists distinguish between sex and gender. The argument is that sex is biologically determined, whereas gender is a socially constructed conception concerning values, identities, roles and actions (Tyson, 2006). This distinction allows feminists to make the case that gender is changeable, since numerous differences between men and women are socially produced (Blume, 1996; see also Tyson, 2006). The contention is that because gender roles are learned, more egalitarian societies can be created through political and social reform and by 'unlearning' social roles (Blume, 1996).

4.2.4.2 Patriarchy.

Patriarchy literally denotes 'rule of the father' and is an expression used to explain systems or structures that are male dominated at all levels, ranging from the family system to the work environment as well as the highest ranks of government, and is maintained and reinforced by the belief that males are superior to females (Walsh & Ellis, 2007, p. 101). A patriarchal family structure materialises in a household when the father is the main or only breadwinner, whilst the mother has a menial job and/or is a housewife. It especially occurs if the father is employed in a position of power or authority in the workplace (Walsh & Ellis, 2007). Patriarchy, on the whole, comprises an arrangement of structures and practices that reinforces and upholds inequalities and disproportions between the experiences, obligations, status, and opportunities of diverse social groups, particularly women, but also men (Seiler, no date). This systematic subordination of women and lower-status men, or patriarchy, is made possible through gendered demonstrations of health and health behaviour (Courtenay, 2000). Patriarchal families are seen to grant greater freedom to boys to train them for traditional male roles, whereas girls are socialised to be feminine, compliant, and domesticated (Walsh & Ellis, 2007). These gender roles have been used very successfully to justify inequities and keep women and men in traditional gender roles, denying females the educational and work-related means of obtaining economic, social and political power and thus maintain male dominance (Tyson, 2006).

4.2.4.3 Multiple ways of knowing.

Feminist theorists predominantly hold that different people develop dissimilar ways of knowing that emerge from their responses to the specific circumstances of their lives, and believe that no one way is true or better than another (Kramarae, cited in Seiler, no date). Feminist epistemologies identify how dominant ways of knowing may disadvantage women and other oppressed groups (Kralik & van Loon, 2010). This enables them to bring to the fore and challenge power constructions so as to reconstruct conceptions and practices in order to improve the condition of the oppressed group (Kralik & van Loon, 2010).

4.2.4.4 Power.

A central concept for feminist theory is power, yet it is one that is rarely explicitly deliberated in feminist work (Allen, 2011). Courtenay (2000) argues that gender is partly negotiated through relationships of power. Allen (2011) highlights that power is conceptualised by feminists in three primary ways: as a resource for (re)distribution, as domination, and as empowerment. Power is thus defined either as an exercise of power-over or as a capacity or ability to act, i.e., the power to do something. Those who intellectualise power as a resource see it as a positive social good that is unequally distributed amongst men and women, and envision the redistribution of this resource to ensure equal power between men and women (Allen, 2011). Power as a relation of domination, is also referred to as oppression, patriarchy, subjection, and domination, amongst others. This kind of power-over relation is one that is oppressive, unjust or illegitimate. However, Allen (2011) highlights that a noteworthy strand of feminist hypothesising of power begins with the argument that the notion of power as power-over, control or domination is covertly masculine, so they rather understand power as 'power to'. This empowerment-based or transformative conception of power is defined as a capacity, and is proposed as an alternative to the accepted masculine notions of power-over.

4.2.5 Masculinities perspectives

Even though great strides have been made since Krienert's (2003, unpaginated) call for systematic exploration of, and theoretical understandings focusing specifically on "what it is about being male that causes violence", the translation of these conceptual and theoretical understandings necessitates further critical scrutiny.

Masculinities are defined by Connell (1995, p. 71) as "simultaneously a place in gender relations, the practices through which men and women engage that place in gender and the effects of these practices on bodily experience, personality and culture". Put differently, masculinities signify the perceived and accepted ideas and standards on how men are supposed to or are expected to behave in a particular setting (Connell, 1995). The notion *masculinity* is described by Messerschmidt (1993) as something 'men do' and 'doing gender' is a continuous and ever-changing process that males use to convey their masculinity in order for it to be socially validated. Ratele (2013) contends that masculinities are simultaneously embodied, performed, relational and contingent. Current theorists hypothesise the notion of masculinity in the plural form and, thus, speak of multiple masculinities rather than one masculinity (Courtenay, 2000; Morrell, 1998; Ratele, 2013; Schrock & Schwalbe, 2009; Shefer, Bowman, & Duncan, 2008; Smith, 2006). Thus, within any given society, numerous masculinities exist and are informed by factors such as class, race, age, religious denomination, and geographic location (Morrell, 2001).

Masculinities are not innate to boys and men, but are socially constructed (Banjoko, 2011; Connell, 1987; Courtenay, 2000; Smith, 2006), are fluid (Courtenay, 2000; Morrell, 1998), and are dependent on a particular historical time, culture and setting (Messerschmidt, 1993; Morrell, 1998). Masculinities are constructed via the relationship of boys and men with girls and women and with other males in the framework of time and space (Ratele, 2013). Masculinities are reproduced in a variety of spaces, including families, schools, workplaces, sport, religion, media and their traditions (Ratele, 2013).

Longwood (2006) and Courtenay (2000) propose that men are reared, socialised and habituated in a manner that compels and generates destructive violent behaviours that are injurious to themselves and others. However, they are not passively socialised by their cultural contexts (Hearn, 2004). They are also active agents in the development, formation and performance of these representations in their own lives (Courtenay, 2000). Masculinities are, therefore, constructed in an ongoing way (Ratele, 2013; Schofield et al., 2000) and can change over time and from place to place.

One of the fundamental lessons around signifying manhood centres on aggression and violence. Violence is often legitimated through play, media imagery, parental encouragement through

the 'men are tough and strong' discourse and through sport (Schrock & Schwalbe, 2009). The involvement of males in violence can be regarded as the violent expressions of certain categories of masculinities (Kenway & Fitzclarence, 1997). For example, in elite sport on-field violence emphasises competition, aggression, and dominance over others (Schofield et al., 2000). Hegemonic masculinity, in particular, has been implicated in the likelihood of men perpetrating and experiencing violence (Bird et al., 2007; Centre for the Study of Violence and Reconciliation, 2008; Lazarus et al., 2011; Longwood, 2006; Kenway & Fitzclarence, 1997).

Connell and Messerschmidt (2005) note that hegemony refers to supremacy and domination achieved through persuasion, institutions, and culture, and may be maintained and reinforced by force and power. As a concomitant of domination, hegemonic masculinity is usually defined in relation to subordinate, complicit and marginalised masculinities (as outlined in Chapter 2) (Connell & Messerschmidt, 2005; Kim & Pyke, 2015). The concept is also defined in relation to employment in the paid-labour market, the subjugation of women, heterosexism, and the unrestrainable sexuality of men (Connell & Messerschmidt, 2005). Hegemonic notions of masculinity generally define 'real men' as strong, in control, sexually promiscuous, disease free, emotionally independent, tough and fearless as well as the providers of their families (Skovdal et al., 2011). Traditional ways of proving one's manhood include a successful career, having a family, being a good protector, providing for your family, displaying physical and mental strength, projecting an impression of discreet dominance and excelling in sport (Walsh & Ellis, 2007). This form of masculinity legitimates patriarchy, domination, aggression and risk taking (Haenfler, 2004).

Connell and Messerschmidt (2005) note that even though the concept hegemonic masculinity concerns living up to masculine standards and separating the masculine self from femininity, it is also a means to maintain patriarchy. Courtenay (2000) highlights that it is the quest for power and honour that invariably leads men to harm themselves as well as women and other men. In this regard, Flood (2002) and Hearn (2004) argue that the study of masculinities needs to stay part of a feminist project focused on ending men's domination of women.

When males are unable to live up to the hegemonic ideal of 'doing gender,' they develop alternate methods to achieve masculinity such as using violence. South African scholars have drawn attention to the link between masculinity and power (which has been discussed in Chapter 2), control, and violence (Ratele, 2013; Shefer, 2013). According to Bird et al. (2007),

violent manifestations of masculinity and unequal gender relations are frequently present in gender-based violence. Documented research indicates that men who conform to hegemonic masculinities are more likely to perpetrate violence against women or other men or even experience violence (Hong, 2000; Kenway & Fitzclarence, 1997; Mathewson, 2009; Santana et al., 2006). The perpetration of interpersonal violence by males can, therefore, be seen as an outcome emerging from attempts for empowerment in an environment in which the male identity is experienced as being in peril or challenged, as indicated by Bauman (2010).

Ratele (2014) argues that the struggle for attaining gender equality and changing of masculinities in post-apartheid South African society is more intense because continuing global and local struggles over economic, racial, sexual and cultural inequality constantly redraw affiliations and ill feelings amongst men and women. He further contends that, even though there are apparent hegemonic ideas regarding masculinity in this country, these thoughts are confounded by the marginality of (South) African people in comparison to powerful multinational capitalist ideologies. Thus, instead of importing the Western notion of hegemonic masculinity as is, researchers outside of the Western context should approach the dominant form of masculinity as *hegemony within marginality*. He further suggests that what is needed in this context is tradition-sensitive, culturally intelligent research and engagement on men within their marginalised worlds. This implies that interventions to address masculinities should be context specific.

4.2.6 Limitations of critical perspectives

Numerous feminist theorists in the field of criminology argue that male-centred theories have limited relevance to females since they primarily focus on the frustrations of males in their struggles to achieve success in goals such as status and wealth, and disregard their female relationship goals (Leonard, cited in Walsh & Ellis, 2007, p. 101). Feminists also note that traditional research methods and male-biased theories are both misleading and dangerous because they silence the experience of women and conceal the values of the women's experience (Tyson, 2006).

According to Tyson (2006), the ubiquity of patriarchal ideology advances some key questions for feminist theory. She cites, by way of example, the following rhetorical questions: if patriarchal philosophy impacts our identity and experience so powerfully, are we ever able to get beyond it? If our thought patterns and our language are patriarchal, are we ever able to think

or speak differently? These questions, however, are debatable as they imply that patriarchal ideas and behaviours are unchangeable, yet it is evident from the literature (as indicated earlier) that such notions are socially constructed and, therefore, changeable.

Tyson (2006) notes that considering the complications entangled in resisting patriarchal indoctrination, several feminist theorists deliberate that we should be particularly cautious when using frameworks that are intrinsically patriarchal such as Marxism. Such frameworks, she highlights, are regarded as patriarchal because they embody different elements of patriarchal ideology. Feminists argue that, despite Marx's discernments into how economic forces govern the lives of both sexes, he neglected to recognise the ways in which men have oppressed women despite their economic class. Despite this criticism, many feminists do draw on elements of Marxist theory and other critical theories, as they find them useful in investigating issues that are relevant to the woman's experience (Tyson, 2006).

Boon and Head (2010) argue that even though critical theory is mainly concerned with overcoming oppression by means of liberation and emancipation, it is surprising that many critical theorists fail to engage questions of violence.

4.3. Public Health Framework for Violence Prevention

Leischow and Milstein (2006) argue that conventional methods of framing a problem, planning action, and evaluating an intervention often fail to take into account those aspects of dynamic complexity that render public health challenges and responses so complicated. By definition, public health aims to provide the maximum benefit to the largest number of people (Mercy, Rosenberg, Powell, Broome, & Roper, 1993). This approach is an interdisciplinary science-driven, multi-sectoral, population-based approach rooted in the ecological model, and it promotes primary prevention (Butchart et al., 2010). Public health practitioners and researchers deduce that violence can be prevented and its effects reduced just as public health efforts have precluded and reduced infectious diseases, drunk driving, workplace injuries, and other health problems (Carmona, 2003; Krug et al., 2002; Rutherford et al., 2007; Stevens et al., 2003). The assumption is that the factors that generate or contribute to interpersonal violence can be changed regardless of whether such factors relate to individual or to broader socio-economic or politico-cultural factors.

4.3.1 Major characteristics

The public health approach to violence is enshrined in three principal characteristics: it emphasises prevention, employs scientific methodology, and encourages collaboration. This includes an obligation to prevent, the application of scientific methods to attain this goal, and the conviction that effective public health actions call for and entail collaboration and cooperation across various scientific disciplines, non-governmental and community-based organisations, societal sectors and political entities at all levels (Mercy et al., 2003).

Collaboration in the public health approach entails integrating and organising a wide range of scientific disciplines, organisations, and local communities to work hand in hand to creatively address violence (Mercy et al., 1993). Each sector has a valuable role to play in tackling violence and, collectively, the methods used by each have the capacity to produce significant reductions in violence (Krug et al., 2002). Fundamental to collaboration is community participation. Mercy et al. (1993) point out that the full participation of communities is critical to engender a sense of ownership of the problem of violence and its solutions. They further indicate that public health aims to empower individuals and their communities, enabling them to regard violence as a challenge that can be understood and changed and not as an unavoidable consequence of modern life (Mercy et al., 1993). These principles of public health serve as a useful framework for ongoing investigation and comprehension of the causes and effects of violence and for the primary prevention of violence through intervention strategies, policy interventions and advocacy (Violence Prevention Alliance [VPA], 2015). The application of a scientific approach to a public health framework involves four key steps that build on each other. These steps are: (1) defining the problem, (2) identifying causes, (3) developing and testing interventions, and (4) implementing, evaluating and disseminating those interventions (Krug et al., 2002, p. 4; Mercy et al., 1993; Rosenberg et al., 2006; Ratele et al., 2010; Stevens et al., 2003; VPA, 2015).

4.3.1.1 Defining the problem.

The first step involves defining the problem through the systematic collection of information about the magnitude, scope, characteristics and consequences of violence. This entails obtaining the characteristics of the victim(s) and perpetrator(s), ascertaining the victim/perpetrator relationship, identifying the types of interpersonal violence that occurred, the number of cases, the mode and weapons used, where violence is concentrated, when it

occurs, and how violence manifests. This step serves as a basis from which to identify the type of intervention required to address the specific form of violence.

4.3.1.2 Identifying risk and protective factors.

The second step is to identify the predisposing risks as well as the protective factors for violence. This entails employing various research methodologies to determine the precursors and correlates of violence, identifying the factors that increase or decrease the risk of violence, and the factors that could be modified through interventions. Risk factors and causes can be identified through surveillance systems and various epidemiologic studies, including case control studies, rate calculations, and cohort studies. Stevens et al. (2003: p. 367) assert that this step makes providing a multi-disciplinary understanding of the causal factors as well as the protective factors not only desirable, but imperative for an in-depth holistic understanding of the dynamic foundations of violence that are to be found within the "subjective, cultural, ideological, material and historical realms that help to constitute social realities".

4.3.1.3 Developing and testing interventions.

After having obtained a picture of the predisposing and causal factors, the next step is to devise specific interventions to address violence. This entails determining what the most effective intervention strategies are to prevent violence by planning and developing interventions based on best practices. In line with the public health approach of collaboration, it would be important to involve local NGOs and non-profit organisations (NPOs) and communities in devising effective strategies in order to foster a sense of ownership of the problem of violence, and to develop solutions to address violence. This step also entails piloting interventions in a wide range of settings and evaluating and refining interventions prior to broad dissemination.

4.3.1.4 Implementation, evaluation and dissemination.

The final step entails the broad implementation of interventions that have demonstrated efficacy or are very likely to be effective. In this regard, it is vital to measure the efficacy and effectiveness of these programmes since an intervention that has been proven to be effective in an academic study or in a clinical trial may not perform the same at a community or national level. This expands the body of evidence on prevention and allows for the broad dissemination of that information so that efficacious programmes can be replicated, implemented or disseminated widely (Walden & Wall, 2014). Stevens and colleagues (2003) propose that a

public health framework in addressing violence should incorporate evaluation and empowerment. In this regard, they suggest that it can encourage the involvement of communities in preventing violence via participatory processes that enable "self-reliance, self-determination, ownership and empowerment to control the outcome of their everyday realities" (p. 368).

4.3.2 Limitations of the public health framework

While the prevention science that underpins the public health approach, has made a substantial positive contribution to addressing various biopsychosocial challenges in societies, it has some drawbacks (VPA, 2015). The limitations of this approach include the domination of a medical and pathological approach to challenges and issues, including violence; an emphasis on the negative instead of positive aspects of a situation; and a lack of clear foresight for what needs to be in place (health determinants) (VPA, 2015). Moore (1993), arguing from a criminal justice perspective, contends that public health focuses primarily on youth, women and children, but excludes the most common form of violence, i.e., violence among adult males. In light of the above, public health, therefore, can serve more as a guiding framework for addressing violence from a multi-theoretical perspective in this study, and is linked to the ecological perspective outlined below.

4.4 An Ecological Perspective

An ecological framework has been used expansively by public health and other researchers and practitioners for investigating and understanding violence (Rutherford et al., 2007). Ecological models comprise a developing body of theory and research focused on the processes and conditions that direct human development throughout life in the actual settings within which humans live (Bronfenbrenner, 1994). The ecological perspective, which includes numerous theoretical frameworks, e.g., systems theory (Friedman & Allen, 2011), social ecological systems (SES) framework (CDC, 2012; Fabinyi, Evans, & Foale, 2014), ecological systems theory (Bronfenbrenner, 1979), bioecological systems theory (Bronfenbrenner & Morris, 1998; Bronfenbrenner & Ceci, 1994) or the eco-systemic approach, reflects a broad overarching metatheoretical framework (Meyer, 1983; Ratele et al., 2010) that orients practitioners and theorists to a multi-level view of person and the world. Ecological or systems models look at human behaviour from the perspective of multiple interactive levels of influence proximal to distal, from family and immediate context to larger socio-cultural and political structures.

The systems framework provides an analytical lens to understand the interplay of various factors that contribute to or buffers individuals against interpersonal violence within a multi-system level, and provides insight into strategies that would be most effective in the prevention of interpersonal violence.

4.4.1 Origins and historical developments

The ecological systems theory can be traced back to the work of Urie Bronfenbrenner (1979). Bronfenbrenner is frequently recognized for bringing to light the role of "contextual variation in human development and helping to move developmental psychology" to a focus on "ecologically valid studies of developing individuals in their natural environments" (Darling, 2007, pp. 203-204). On the premise that social science practice at the time focused either on the behaviour of the person or on the environment but not on the complex interplay between the two, Bronfenbrenner (1979) came up with the ecological systems theory. It is described as a theory of human development wherein everything is viewed as being interconnected and knowledge of development is tied to context, culture and history (Darling, 2007).

4.4.2 Major characteristics

Initially, Bronfenbrenner (1979) proposed a four-level ecological design to reveal the multifaceted layers of factors that influence and bring to light variations in individual behaviour. These levels of the system are referred to as the micro-, meso-, exo- and macro-systems (Bronfenbrenner, 1979) and by other theorists and practitioners as the individual, relationship, community and societal levels (Krug et al., 2002). These interactions are essentially reciprocal as opposed to being "cause-and-effect" in nature (Ratele et al., 2010). Bronfenbrenner (1979) portrayed the developing individual as being embedded in a series of discrete nested, environmental systems interacting with, and being influenced by the environment. These systems are organised in four main levels that reflect four contexts of behavioural influence.

At the innermost level, the microsystem consists of all of the reciprocal interactions and influences occurring within the developing person's immediate milieu such as family, friends, school, and neighbourhood together with his or her own biological and personality traits. The mesosystem refers to the interrelations between the different microsystem contexts in which the individual is involved (such as school, church, and community). The exosystem refers to the environment in which the individual does not participate directly, but even so influences

the setting in an indirect manner. The macrosystem refers to societal and cultural ideologies, values and laws that impact the individual. Bronfenbrenner later added a fifth structure, the chrono-system, which comprises the development or patterning of environmental occurrences (external systems) and changes over time, and the socio-historical circumstances (Härkönen, 2007; Paquette & Ryan, 2001).

Bronfenbrenner subsequently revised his original theory, expanded his focus to include the proximal processes of human development, and renamed this theory the 'bioecological theory'. The bioecological framework proposes that variations of proximal processes are an outcome of the person, the environment (both spatial and chronological), the nature of the developmental effects, and changes that occur over time (Bronfenbrenner & Morris, 1998; Tudge et al., 2009). This is referred to as a Process-Person-Context-Time Model (PPCT) (Tudge et al., 2009). Bronfenbrenner and Morris (1998, p. 996) refer to "the enduring forms of (reciprocal) interaction in the immediate environment" of the individual as "proximal processes" that impact development. They emphasise that the effectiveness of such interaction is dependent on its occurrence over long periods of time. The person is at the centre of the bioecological model and not the environment (Darling, 2007). The context involves the five interrelated systems, described earlier, and is based on Bronfenbrenner's original model. Time also plays a key role in this development model, and refers to what is happening in the course of particular experiences of proximal processes, how long it occurs in an individual's environment, and the changing expectations in the broader culture (Bronfenbrenner & Morris, 1998). Several themes emerging from Bronfenbrenner's earlier writings remained central throughout his later work, namely the "social and historical context, the active person, and the impossibility of understanding individual developmental processes in isolation" (Darling, 2007, p. 205).

4.4.3 The World Health Organisation's ecological framework for violence

An ecological framework has been used for the aetiology of intimate partner violence and domestic violence (Byckzek, 2012; Carmona, 2003; Heise, 1998), gender-based violence (Heise, 1998), sexual violence (Carmona, 2003; Spangaro, Zwi, & Poulos et al., 2011), sexual re-victimisation (Grauerholz, 2000), elder abuse and neglect (Carmona, 2003; Wangmo et al., 2014), and the effect of ethno-political violence on children's aggressive behaviour (Boxer et al., 2013).

The WHO's World Report on Violence and Health (Krug et al., 2002) uses a four-level ecological model as a framework to examine and understand the nature of violence. This perspective is founded on the evidence that no single factor can explain why particular individuals or groups are at greater risk of interpersonal violence, whereas others are more protected from it (Violence Prevention Alliance, 2015). Krug et al. (2002, p. 12) clarify the following:

> The ecological framework highlights the multiple causes of violence and the interaction of risk factors operating within the family and broader community, social, cultural and economic contexts. Placed within a developmental context, the ecological model also shows how violence may be caused by different factors at different stages of life (Krug et al., 2002, p. 13).

The ecological approach thus enables a more holistic and comprehensive analysis of social, environmental and individual factors that have a bearing on interpersonal violence. Estevéz, Jiménez, and Musitu (2008) state that in order to comprehend violence from an ecological perspective, one has to take into account the micro-violences present in an individual's immediate context (family, school or work environment) and cultural and structural macro-violence in society.

An ecological approach, accordingly, conceptualises violence as a multidimensional phenomenon embedded in interplay among individual, situational and socio-cultural factors (Heise, 1998; Krug et al., 2002). The innermost environment, the individual level, identifies biological and personal history factors that increase the likelihood of an individual becoming a victim or perpetrator of violence. Factors such as the individual's own characteristics, gender, income, educational attainment, substance use, or history of abuse are taken into consideration (CDC, 2012; Krug et al., 2002; VPA, 2015). The second level, the relationship level, explores proximal social relationships such as family, friends and intimate partners that may increase the risk of experiencing or perpetrating interpersonal violence (CDC, 2012; Krug et al., 2002; VPA, 2015). For example, an individual who grows up in a household where he experiences constant abuse may be more likely to resort to violence or accept violence as normal.

The third of the four systems focuses on community contexts such as schools, workplaces and neighbourhoods in which social relationships occur, and explores the characteristics of these contexts that are associated with the risks of becoming a victim or perpetrator of violence

(CDC, 2012; Krug et al., 2002; VPA, 2015). For example, communities characterised by high levels of unemployment, substance abuse and high density may be more prone to violence. The final level of the ecological model looks at the broad societal factors that influence rates of violence, including factors that help create a climate in which violence is encouraged or inhibited as well as those that create and maintain socio-economic inequalities among different segments of society. These factors include social and cultural norms, such as those that entrench male dominance over women and larger societal factors such as social, economic and educational policies that maintain socioeconomic inequalities between people (CDC, 2012; Krug et al., 2002; VPA, 2015).

4.4.4 Limitations of the ecological approach

Even though there is the need to examine factors at all levels of the system, there has been little evidence of theoretical frameworks examining the dynamics between and across levels of the system (Lazarus, Tonsing et al., 2009). Jewkes et al. (2002, p. 1614) contend that it is challenging to scientifically conceptualise the various levels of the ecological approach, particularly, to differentiate between the 'societal' and 'community' level. They further note that contributory factors to intimate partner violence function at a number, if not all, of the levels, hence positioning it at a particular level is arbitrary and obscures the effect of one factor on the others in the model and on the interrelationship between factors.

Speaking from the perspective of resilience, Fabinyi et al. (2014, p. 28) argue that the "social elements of social ecological systems (SES) [theory] remain weakly theorized" since the bulk of the SES resilience literature has a tendency "to define people's interests and livelihoods as concerned primarily with the environment" which "underplays the role of other motivations and social institutions, and portrays a limited understanding of social diversity and power". In this regard, they note that there is a need for a more critical approach to understanding power. They further contend that even though it is important to understand the varied standpoints of diverse interest groups within a SES, power relations signify that these diverse voices can either "be marginalized or privileged, easy to identify or invisible" (Brosius cited in Fabinyi et al., 2014, p. 34). Others have noted that Bronfenbrenner's theory is predominantly constructed on examples that can simply be predicted, but not entirely determined; it fails to provide comprehensive mechanisms for development (Nisbett, 2013); and it fails to give reasons for particular behaviours.

Drawing on the work of Heyman and Neidig, Cunningham and colleagues (1998, unpaginated) argue that systems explanations and interventions do not deal with gender issues and do not contest patriarchal belief systems that are frequently used to rationalise violence against women. It is thus important to combine a critical and gendered lens with a systems perspective in order to obtain a broader perspective on violence. An attempt has been made to do this in this doctoral study.

4.5 Approaches to Violence Prevention

The primary goal of prevention is to transform the balance between risk and protective factors so that the outcome of protective factors surpasses the outcome of risk factors (Hawkins et al., 2002; National Institute on Drug Abuse 2003; Watson, White, Taplin, & Huntsman, 2005). Violence prevention initiatives have predominantly used a criminal justice approach that focused on deterrence and the incapacitation of violent offenders through apprehending, arresting, adjudicating and incarcerating offenders (Mercy et al., 1993). This approach, however, has not made a significant difference to the levels of violence (Mercy et al., 1993). Fundamental to the vision of the WHO public health policy for preventing violence is a shift from a focus limited to reacting to violence to a focus on changing the social, behavioural, and environmental factors that cause violence (Mercy et al., 1993). Many scientists agree that a developmentally appropriate, multi-level strategy for violence prevention utilising combined approaches is more likely to lead to a decrease in violence over time than an approach that is directed at only one level of the system using a single prevention approach (Barker et al., 2007; Barker et al., 2010; CDC, 2012). An all-inclusive approach to the prevention of interpersonal violence would entail working across several levels of the ecological model combined with critical engagement of issues of power, oppression, and gender as well as historical and contextual factors.

Mercy and Hammond (1999) propose a typology for preventing violence founded on two key components: (1) the classification for physical disease prevention and (2) an ecological model of the multiple influences that play a role in explaining violence. The ecological model theorises that multiple factors can influence violence as various environmental systems impact human behaviour. Although each level represents a level of risk, it can also be viewed as a key point for intervention (Krug et al., 2002). Programmes targeted at *individual level* factors focus on modifying risk or protective factors linked to violence such as low academic achievement, inadequate peer relation skills, and distorted beliefs about utilising violence against others

(Mercy & Hammond, 1999). These programmes impart specific skills (e.g., conflict resolution and effective communication) to enhance cognitive resources for dealing with social and personal challenges (Kerns & Prinz, 2002). Programmes emphasise learning processes and comprise observation and modelling of skills by parents, other grown-up role models, mentors, peers, as well as other sources such as the media (Kerns & Prinz, 2002). Relationship level strategies focus on close interpersonal relationships and may include efforts to influence such aspects as weak parent-child emotional bonding, extreme peer pressure to participate in violence, and the lack of a sound relationship with a caring adult (Mercy & Hammond, 1999).

Programmes that focus on the broader distal social context emphasise the role that larger contextual factors have on an individual's behaviour (Kerns & Prinz, 2002). Such programmes are designed to alter aspects such as the family milieu in which a victim resides, aspects of the physical environment that predispose individuals to assault (e.g., neighbourhood watch or street lighting), and the lack of community-based opportunities to participate in prosocial activities in local institutions such as churches or schools (Mercy & Hammond, 1999). Strategies that consider the societal macrosystem attend to "risk or protective factors such as norms or values embedded in the culture that promote violence, economic conditions, and low levels of general deterrence for violent behaviour" (Mercy & Hammond, 1999, p. 288).

One relevant model, the Spectrum of Prevention, developed by the Prevention Institute in Pennsylvania, frames a comprehensive primary prevention strategy to prevent violence and promote safety and peace (Davis, Parks, & Cohen, 2006). Designed for broad scale transformation, it concentrates on individuals and on modifying the environment, alongside systems and norms. The Spectrum of Prevention model delineates six levels of intervention: (1) strengthening individual knowledge and skills; (2) encouraging community education that helps build a critical corpus of reinforcement for safer behaviour, norms and standards, as well as policies; (3) educating providers who will convey skills and knowledge to other individuals and model positive norms; (4) promoting and forming coalitions and networks; (5) changing organisational practices via adopting protocols and moulding norms to prevent violence; and (6) influencing policies and legislation (Davis et al., 2006, p. 7; Prevention Institute, 1999). This approach is similar to the ecological framework, as it promotes multifaceted strategies across many levels of the spectrum to address violence. Davis et al. (2006) note that the Spectrum of Prevention model helps to broaden prevention strategies beyond education models through the promotion of a comprehensive collection of activities for successful prevention

and fostering collaborative partnerships. This model is particularly important in the current study, as it is congruent with the principles of CBPR, which framed this study. These levels are not only complementary, but when used together they generate a combined effect that leads to greater efficacy than if a single activity is used.

Lazarus, Tonsing et al. (2009, p. 18) allude to the development of violence prevention initiatives in the South African context, stating that in this country the violence prevention thesis adopts "a historical focus on understanding and preventing violence in the South African context … [to] improve existing epidemiological data, to assess violence risks and determinants, and to identify, develop, evaluate and disseminate practices that have the potential to prevent violence". Reddy et al. (2003), in a report on the first South African National Youth Risk Behaviour Survey, provide a framework for health promotion in the South African context that is in concert with the Public Health framework (p. 11):

> The Health Promotion Matrix provides a basis for the various strategies and levels of impact of health promotion activities, and can be applied to any single behaviour or cluster of behaviours that place young people at increased risk of morbidity and mortality. The strategies include health education and health information, provisions and facilities, and legislation and biotechnological interventions, while the levels of impact range are the primary prevention level, the early detection level and the patient care level.

The above mentioned report delineates a four step health promotion framework for planning and evaluating intervention programmes. These are Problem – Behaviour – Determinants – Intervention – Implementation (Reddy et al., 2003, p. 17). These authors note that, when using the framework for planning and evaluating intervention programmes, it is necessary to identify various health promotion strategies that mediate at different levels of care and prevention. Lazarus, Tonsing et al. (2009) highlight that these steps are very similar to those outlined in the Public Health framework discussed above. They note that the health promotion perspective is apparent in studies that specifically focus on protective factors linked to violence. These authors further highlight that concepts and methods such as safety and peace promotion, community resilience, strengths or local assets, and social capital are frequently used within this approach.

4.5.1 Safety and peace promotion

As mentioned previously and discussed in detail in chapter 2, violence prevention initiatives are oriented to enhance health and safety by reducing the risk factors that contribute to an individual becoming a victim or perpetrator of violence and increasing protective factors. Violence prevention is, therefore, a prerequisite for safety and peace and, by extension, health. Safety promotion can be regarded as a way to promote peace, as safety offers a motive for solidarity and cooperation to enhance quality of life. The concept of peace promotion embraces values, attitudes and behaviours that reject violence and endeavour to prevent conflicts by addressing their root causes with a view to solving problems through dialogue and negotiation among individuals, groups and nations (United Nations Educational, Scientific and Cultural Organization [UNESCO], 2002). As discussed in detail in chapter 2, this approach includes the strategies of peacemaking (which is associated with conflict resolution), and peacebuilding (which is focused on the alleviation of structural violence and the development of justice and equity) (Cochrane et al., 2015).

Peace promotion in this study, therefore, comprises engaging challenges related to both direct and structural violence, and assumes a positive approach aimed at promoting and building peace, promoting a positive mindset, embracing and encouraging positive values and norms, promoting attitudes and behaviours that rebuff violence as well as and preventing violence by tackling its root causes (Lazarus et al., 2015).

4.5.2 Spiritual capacity and religious assets for violence prevention

As discussed in detail in Chapter 2, using a spiritual capacity and religious assets approach constitutes an unexplored avenue that may be mobilised to promote positive forms of masculinity and safety and peace. Based on literature reviews, Laher (2008) and Amos (2010) suggest that spiritual capacity and religious assets embody possible resources that can be drawn on to promote peace and safety (Laher, 2008). Religious assets and spiritual capacity, in particular, have been identified as a fairly uncharted area for tackling violence and promoting peace as well as promoting positive forms of masculinity (ARHAP, 2006; Cochrane et al., 2015; Lazarus et al., 2015).

Krieger (2004), as does Longwood et al. (2006), links the exploration of masculinities and gender roles to what we call spiritual capacity and religious assets (as outlined in Chapter 2). He emphasises that it is necessary to raise issues of masculinity and to have conversations with

men about masculinity in churches and society in order to go through a personal revision of their way of thinking, feeling and behaviour (Krieger, 2004). Longwood et al. (2004) propose the development of boys and men's spirituality as a means of addressing dominant forms of masculinity to promote peace and non-violence. Likewise, Britto and Salah et al. (2014) highlight the capacity of religions, faith, spirituality, service, ritual and ceremonies to transform individuals in promoting peace. Religion and spirituality therefore constitute a possible resource for violence prevention (Lazarus et al., 2015; Religions for Peace, 2009). The following section will provide a detailed discussion of the theories of change that inform the Building Bridges violence prevention intervention.

4.6 Theories of Change

Theories of change enable us to understand behaviours (such as violence perpetration), provide insight for designing interventions, and clarify how the interventions work to generate changes (Hildebrand, 2010). Anderson provides a succinct explanation of what a theory of change is. She explains the following:

> A theory of change (TOC) is the product of a series of critical thinking exercises that provides a comprehensive picture of the early- and intermediate-term changes in a given community that are needed to reach a long-term goal articulated by the community (Anderson, 2005, p. 12).

A theory of change thus explains how a group of intervention activities will produce short-term, intermediate and long-term targeted outcomes envisaged by an intervention programme. Behaviour change is multidimensional and can therefore not be understood within a single theoretical framework. The multiple theories of change (see Figure 4.2 below) that served as a meta-framework and set the stage for producing the envisaged outcomes of the Building Bridges violence prevention intervention that constitutes a focus of this study includes (1) Critical Theory; (2) Ecological Systems Theory; (3) Knowledge Attitude Behaviour Theory; (4) values in relation to change education models (Kirschenbaum's Comprehensive Values Education); and (5) Experiential Learning Theory. This doctoral study particularly viewed behaviour change through an overarching Critical Ecological Systems lens (see Figure 4.2 below).
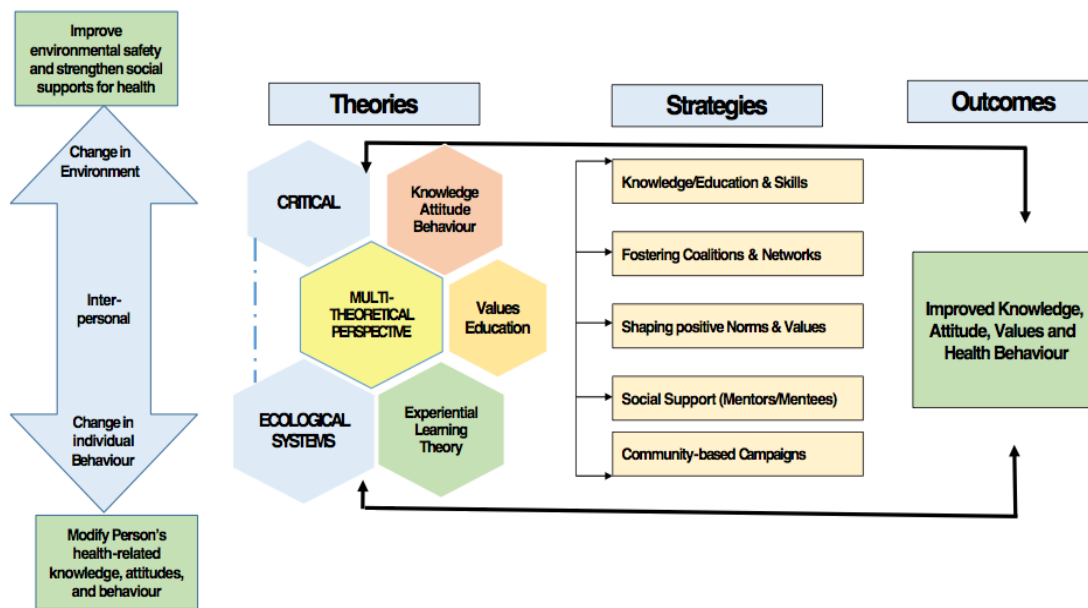
Figure 4.2. **Multi-theoretical change model.**

Darnton (2008) suggests the use of behavioural models as well as systems approaches to address complex problems, and to build an understanding of the role that behaviour change interventions could play in tackling them. The ecological component will enable us to tackle violence at the different levels of the system. The critical lens will enable us to critically engage with issues such as violence and masculinity, power and oppression, gender equality, historical issues, contextual issues and social justice. The Knowledge, Attitude Behaviour Model and the Values Education Model will provide the building blocks for enhancing knowledge and influencing attitudes, and the Experiential Learning Approach will provide the guidance for devising the appropriate modalities of the intervention that would bring about change in knowledge, attitudes, values and behaviour.

4.6.1 Critical approach

As mentioned earlier, a critical approach to change is characterised by an engagement with issues such as power and oppression, especially in the context of racial dynamics, feminism and masculinity. It also includes analyses of colonialism, with a particular focus on the effects of apartheid on the mental health of South Africans (Ratele et al., 2010). Critical perspectives rely on dialogic methods that encourage conversation and reflection that enables participants to question the 'natural' state and challenge the status quo (the present circumstances/how

things stand currently). This is congruent with Experiential Learning Theory. This critical engagement is usually done by starting with a belief or idea about what is good (e.g., democracy, autonomy) and asking participants to think about and question their current experiences regarding the values identified. Apart from describing a situation from a particular viewpoint or set of values (i.e., the need for democracy in a particular setting), this perspective also tries to change the situation (Cohen & Crabtree, 2006).

4.6.2 Ecological systems approach

An ecological perspective to change focuses on the dynamic interplay between personal and situational factors, as opposed to focusing exclusively on biological or environmental determinants of well-being (Stokols, 1995). Stokols (1995) argues that the same environmental conditions (e.g., poverty or population density) can affect individuals' health in different ways, depending on their personality, views of environmental controllability, access to resources and health practices. Accordingly, the level of congruence between individuals and their environment is regarded as a central predictor of well-being in the ecological model. There are a number of principles that inform change strategies from a systems perspective. These include:

(1) **Interdependence.** The bi-directional relationship between the different levels of the ecological system was explained earlier in this chapter. This has important implications for bringing about change within a community, as environment and individual personality affect each other bi-directionally and change in the one can lead to change in the other. Stokols (1995) argues that the conceptual "blind spots" emerging from an exclusive concentration on either behavioural or environmental aspects at single analytical levels (e.g., on personal, relationship, or community levels), are circumvented by focusing explicitly on the dynamic interplay between personal and situational factors at both the individual and aggregate levels.

(2) **Adaptation.** Survival hinges on the organism's (individual and or organisation) ability to cope with change (Heller, Price, Reinharz, Riger, & Wandersman, 1984).

(3) **Working at multiple levels simultaneously.** Combinations of responses or strategies targeting multiple levels at the same time are more likely to be significant in bringing about change. The impact of interventions or initiatives targeting individual levels in isolation would likely be small. Seeking to understand and influence behaviour by addressing personal factors alone, for example, is unlikely to work because it fails to consider the dynamic and interrelated nature of the issues that impact what we do, since most people are influenced by the others around them and the communities in which

they live (Central Office of Information, 2009). Behaviour change is best aided by a range of intervention strategies spanning a long period of time (Central Office of Information, 2009).

Other principles include the importance of time and development (as discussed earlier) and stability and change within the system (see Moore, 2008).

 A key shortcoming of the Ecological Approach is that it generally does not include cognitive variables, and as a result it has no motivational variables (Baranowski, Cullen, Nicklas, Thompson, & Baranowski, 2003). Consequently, in this study an integrated model was developed (see Figure 4.2 above) for change by using individual change theories (KAB and Values) alongside the ecological systems perspective as a more effective universal theory to change behaviour.

4.6.3 Knowledge-Attitude-Behaviour Model

The processes of behavioural change and the resources essential for behavioural change have not been clearly delineated in the Ecological Systems Approach (Baranowski et al., 2003). It is, therefore, advisable to use the systems approach alongside behaviour change theories such as the Knowledge-Attitude-Behaviour Model and the Values in Relation to Change model. The Knowledge-Attitude-Behaviour (KAB) model proposes that behaviour changes gradually. The model postulates that as knowledge accumulates about a particular health behaviour domain, changes in attitude occur. Attitudes can be described as the person's beliefs about the behaviour and they can be either positive or negative (Hildebrand, 2010). Over a period of time, alterations in attitude accumulate, giving rise to behavioural change. The changes in attitude appear to be the motivational force (Baranowski et al., 2003).

Changes in attitude over time are, therefore, regarded to be the motivational force in behaviour change. People with more positive attitudes are more likely to report engaging in environmentally responsible behaviours than those displaying less positive attitudes (Hines, Hungerford, & Tomera, 1987). The accumulation of knowledge serves as the resource needed to facilitate behaviour changes. The most popular method for promoting change through this model has been through the provision of information (Baranowski et al., 2003). Providing information through, for example, educational intervention programmes, serves as the process by which behaviour change will most likely occur.

However, whilst knowledge is essential, providing facts will not only lead to significant changes in behaviour (Hines et al., 1987). Three converging types of knowledge have been identified: declarative knowledge (factual knowledge or knowledge of issues), procedural knowledge (knowledge of appropriate action strategies), and effectiveness knowledge (knowledge of how effective each course of action is) (Hildebrand, 2010). Logically for people to act on their concerns, declarative knowledge is often not sufficient; people need to know appropriate response behaviours or how to proceed or obtain the necessary skills to do so. Providing all three types of knowledge is, therefore, necessary for changes in behaviour to occur.

4.6.4 Comprehensive Values Education

Behaviour change models are primarily dependent on rational processes, and, therefore, do not consider the influence of spiritual beliefs and values on behaviour (Munro et al., 2007). A key focus of this study is on mobilising spiritual capacity and religious assets, so this study also draws on Kirschenbaum's (1992; 2000) Theory of Comprehensive Values Education. Kirschenbaum has been an active, key protagonist of character education. From the late 1960s to the mid-1980s, he was at the forefront of the values clarification initiative in education that was possibly the most pervasive of the pioneering methodologies concerning values and moral education (Kirschenbaum, 1992; 2000).

Kirschenbaum (1992) explains that the values clarification techniques have been devised to enable reflection on and dialogue pertaining to value-laden topics and moral issues. During the activity, the facilitator ensures that all viewpoints are respected and that a space of psychological safety is created in the educational setting. The activity involves a discussion leader who encourages participants to employ a range of "valuing processes" or "valuing skills" while reflecting on the topic. These skills, Kirshenbaum reiterates, include understanding one's feelings, exploring alternative viewpoints, contemplating the ramifications of various options in a thoughtful way, making a choice without undue pressure, raising one's opinions, and acting on one's beliefs. He further highlights that values clarification has drifted from eminence due to changing times, faddism in educational transformation and professional practice, stagnation in the values clarification undertaking, and inconsistent implementation and a flaw in the theory itself regarding the claim that it is 'value free' (which was later explicated as not the case in a major position paper by the theorist).

Later on, the 'just say no' movement emerged. This movement stated that if adults are clear about their values, state them in unequivocal terms, and set up a comprehensive system of rewards and punishments to reinforce the 'good' values and extinguish the 'bad' values, then young people would be guided to productive and moral behaviour (Kirschenbaum, 1992). Another group stated that we need more than just a focus on 'good values' to exhort young people to adopt them; they, therefore, engage young people in discussions and activities that allow them to experience and internalise the values (e.g., visiting elders and community service projects) (Kirschenbaum, 1992).

Arguing that there is much value in traditional and new approaches to values education and moral education, Kirschenbaum (1992; 2000) suggested taking the best elements of both approaches and synthesising them to create the Comprehensive Values Education Model. This model includes instilling and modelling values, preparing young people for independence through responsible decision making and learning other life skills. Kirschenbaum (1992) states that apart from schools, Comprehensive Values Education should also take place among community participants including parents, community leaders, religious leaders, police, youth workers and community organisations. This approach was considered to be appropriate to the intervention developed in this study.

4.6.5 Experiential Learning Theory

Experiential learning theory (ELT) emphasises the key role of experience in the learning process (Kolb, Boyatis, & Mainemelis, 2010). Learning takes place through personal involvement in the teaching approach. ELT is best described as a dynamic, cyclic process that entails two "dual dialectics of action/reflection and experience/abstraction" (Kolb & Kolb, 2010, p. 3). Experiential learning is often also referred to as learning through experience, learning through action, learning by doing, and learning by discovery and exploration. Hence, participants learn by drawing on their own experiences (e.g., through role-playing or problem solving); by sharing or reflecting (e.g., talking about experiences, sharing reactions and observations); through processing and analysing experiences and applying what they learnt to a similar or different experience (Northern Illinois University, no date). Kolb and Kolb (2010, p. 3-4) outline six propositions of ELT:

(1) **Learning is best conceived as a process, not in terms of outcomes.** To enhance learning, the key focus must be on engaging learners in a process that maximises their

learning – a process that comprises feedback on the effectiveness of their learning efforts.

(2) All learning is re-learning. Learning is facilitated best by a process that extracts the learners' beliefs and thoughts about a subject or issue so that they can be inspected, tested and incorporated with new, more refined ideas. This indicates that learning takes place through a critical engagement of existing beliefs and thoughts.

(3) Learning requires the resolution of conflicts between dialectically opposed modes of adaptation to the world. Conflict, dissimilarities, and disagreement drive the learning process. One is called upon in the process of learning to move to and fro between opposing styles of reflection, action, thinking and feeling.

(4) Learning is a holistic process of adaptation. Learning comprises the integrated functioning of the whole person - thinking, feeling, perceiving and behaving.

(5) Learning results from synergetic transactions between the person and the environment. Stable and lasting patterns of human learning emerge from regular patterns of transaction between individuals and their environment. The manner in which we process the possibilities of every new experience regulates the array of choices and decisions we perceive. An individual's choices and decisions determine, to some extent, the events they live through, and these events in turn influence their future choices. People thus create themselves via the choice of real occasions they live through.

(6) Learning is the process of creating knowledge. ELT suggests a constructivist theory of learning through which social knowledge is generated and reconstructed in the learners' personal knowledge (Kolb & Kolb, 2010). This dynamic quality of ELT implies that existing knowledge and learning can be changed and reconstructed. For example, since masculinities and behavioural responses flow from patriarchal beliefs and practices (such as violence) that have been learned, they can be re-constructed through learning.

The ELT concept of learning space comprises the following principles for promoting experiential learning: respect for learners and their experiences; starting learning with the learner's experience of the issue or topic; creating and holding a hospitable space for learning in which differences are respected; providing space for conversational learning; creating space for acting and reflecting; making space for feeling and thinking; creating space for inside-out learning; providing a space for development of expertise; making space for learners to take charge of their own learning (Kolb & Kolb, 2010, pp. 43-45).

The process of learning through experience is universal and is present in human activity ubiquitously all the time (Kolb & Kolb, 2010). The all-inclusive nature of the learning process indicates that learning functions at all societal levels, including the individual, the group, organisations and society as a whole. As such, ELT is congruent with an ecological systems perspective. ELT requires critical engagement with existing thoughts and beliefs, so it is also congruent with a critical perspective. Freire advocated a critical stance to learning and teaching emphasising praxis, the transformative dialectic between a dynamic process of action and reflection (Freire, 2000). He, further, argued that true knowledge can only be obtained from experientially-based learning (Freire, 2000). To learn from experience, it is important to create a conversational space where participants can critically reflect on and have a conversation about their experiences together.

4.7 Conclusion

This chapter provided insight into the theoretical framework that underpins this study. It provided an argument for why a critical public health framework is necessary to understand violence, which is postulated to be a multidimensional construct that requires multiple strategies. It further provided an outline of the integrated behaviour change theoretically underpinning the development of the Building Bridges intervention manual. The next chapter will focus on the methodology that framed the study.

CHAPTER 5
RESEARCH METHODOLOGY

Every discourse, even a poetic or oracular sentence, carries with it *a system of rules for producing analogous things and thus an outline of methodology*
(Jacques Derrida, 1995, *Interviews with Jacques Derrida*)

5.1 Introduction

In order to conduct research, one needs a framework or an approach to the research study that outlines the way one will go about conducting the research. The research methodology reflects and explains the reasoning behind the research methods and techniques (Welman, Kruger, & Mitchell, 2005). This chapter documents the framework or research methodology used in this study, including an outline of the stages and processes involved in the study.

This chapter first discusses the methodology which includes the research perspective and research design, including the phases of the research project. The chapter then provides an overview of the community setting where the study was conducted, describes the selection of participants and context, and presents the data collection strategies as well as the methods used to ensure reliability and validity. The data sources and instruments employed to collect the data are then delineated. This is followed by an explanation of the statistical procedures used to analyse the data as well as the data analysis frameworks used to extract relevant information from the different data sources. The chapter concludes with the ethical considerations taken into account and adhered to in this study, and my reflexivity.

The research methodology provides the mechanism for how the research objective will be addressed and aims achieved in this study. The primary aim of this doctoral study was to evaluate the processes and steps used to plan and develop a community-based violence prevention intervention that mobilises spiritual capacity and religious assets to promote positive forms of masculinity, peace and safety. The specific research objectives were as follows:

1. To conduct an in-depth review of the literature on best practices in violence prevention and safety and peace promotion relating specifically to the mobilisation of spiritual capacity and religious assets to promote positive forms of masculinity;

2. To record and evaluate the research preparation process conducted as the groundwork to developing the violence prevention intervention that mobilised spiritual capacity and religious assets to promote positive forms of masculinity, safety and peace;

3. To document and evaluate the planning and development of an appropriate intervention that mobilised spiritual capacity and religious assets to promote positive forms of masculinity, safety and peace, drawing on best practices identified through the literature review and the collective wisdom of the local community; and

4. To reflect on the CBPR community engagement process in the development and evaluation of the violence prevention intervention that focuses on the promotion of positive forms of masculinity, safety and peace by mobilising spiritual capacity and religious assets.

5.2 Research Approach

This research was guided by the principles and values of a Community-Based Participatory Research (CBPR) approach discussed in detail in Chapter 3. The following core principles, as noted in chapter 3, capture the key elements of CBPR (Israel et al., 2008; Lazarus, Duran et al., 2012): the community is the central focus; CBPR builds on existing strengths, resources and relationships within the community; CBPR facilitates a collaborative, equitable partnership between research institutions and community members; CBPR advances capacity building among all partners; CBPR is bound to action research that highlights an interactive relationship between theory and practice (praxis); CBPR promotes co-learning and co-creation of knowledge, CBPR includes disseminating findings and knowledge to all relevant partners; and CBPR entails a long-term process and a commitment to sustainability.

5.3 Research Design

The research design refers to the strategic framework for action that provides a path to move from the research questions to the execution of the research (Durrheim, 1999). The research design for this study is a descriptive-longitudinal community case study with a multi-method design that is analysed through both qualitative and quantitative methods within a participatory process evaluation framework.

5.3.1 Longitudinal case study

Case study research is focused, as it entails the in-depth investigation of a phenomenon which is studied through the examination of one or more cases within a bounded system (Creswell, 2007). "Bounded system" refers to the boundaries that govern the case, which is often time and

place bound. The case is regarded as the "bounded system" (i.e., a context, a setting) or the "object" of study (Creswell, 2007). Case study research is defined by Creswell (2007, p. 73) as follows:

> A qualitative approach in which the investigator explores a bounded system (a case) or multiple bounded systems (cases) over time, through detailed in depth data collection involving multiple sources of information (e.g., observations, interviews, audiovisual material, and documents and reports), and reports a case description and case-based themes.

This definition highlights six important components of the case study method: (1) The method is primarily qualitative in nature, (2) it examines one or more cases, (3) it is longitudinal in nature given that it is conducted over time, (4) it makes use of several in-depth data collection strategies, (5) it provides an in-depth description of the bounded system/s, and (6) it describes the themes that emerge from the case or cases. Benbasat, Goldstein and Mead (1987) state that a case study explores a phenomenon in its natural setting using multiple data collection methods to collect information without using manipulation or experimental control. Some researchers, like Stake (2000, p. 435), regard the case study as "a choice of what is to be studied" rather than a methodological choice. In contrast, others like Creswell (2007) view the case study as a type of design in qualitative research, a methodology, and an object of study or a product of the investigation.

The type of case study may be distinguished by the size of the bounded case, which could be an event, a programme, a process, an individual, a number of individuals (Creswell, 2007; Stake, 1995), a family, a community (Babbie & Mouton, 2006), a village (Glesne, 2006), or groups and organisations (Tellis, 1997). Creswell (2007) highlights that the case study can also be distinguished based on its intent. He distinguishes between three types of case studies based on intent: (1) the single, instrumental case study that focuses on an issue and chooses one bounded case to expand on the issue; (2) the collective (or multiple) case study that also focuses on an issue, but uses multiple case studies to demonstrate the issue; and (3) the intrinsic case study. In an intrinsic case study, the researcher focuses on the case itself, such as evaluating a programme, because the case typifies an uncommon or unique situation (Creswell, 2007).

Case studies have numerous strengths. Hodkinson and Hodkinson (2001) enumerate the following strengths of case studies: (1) they can help us examine and understand complex inter-

relationships, (2) they are grounded in "lived reality", (3) they facilitate the exploration of the unusual and unexpected, (4) multiple case studies make it possible for research to concentrate on the value or significance of the idiosyncratic, (5) they can demonstrate the processes contained in causal relationships, and (6) they can bring about rich theoretical or conceptual development. Case study evaluations can also report on both process and outcomes because they can include both qualitative and quantitative data (Tellis, 1997).

Limitations of the case study method include that this method has too much data for easy analysis; it is time-consuming and expensive if done on a large scale; it is difficult to represent the complexity of a social situation in writing; much of case study work cannot be easily presented in numeric form, and they are not generalisable from a traditional perspective (Hodkinson & Hodkinson, 2001). However, it can be argued that since the case study is qualitative, generalisability is not a main concern because qualitative researchers do not aim to generalise results from a particular sample to the broader population, but instead endeavour to demonstrate the transferability of findings (see section 6.4 on reliability and validity).

Case studies are normally descriptive in nature and produce rich longitudinal information on individuals or specific situations (Lindegger, 1999). A descriptive study aims to gather data in order to describe the activities of a programme and record how they may have changed over time (Øvretveit, 2002). As indicated by Øvretveit (2002), the descriptive nature of this study enabled us to record participants' opinions regarding positive and negative consequences that may have emerged; identify any aspects that may have aided or hampered the development of the intervention programme; clarify the programme's components, and identify the boundaries.

The boundaries of this doctoral study cover phase one (initial community engagement phase), phase two (community action planning and asset mapping phase) and phase three (intervention development phase) of a longer evaluation of the SCRATCHMAPS project, which includes a process evaluation of the implementation of the intervention and an outcomes evaluation that uses an alternate design (see Øvretveit, 2002). The 'case' for this study is a within-site case focusing on the case itself (intrinsic case study), i.e., the development and initial evaluation of a community-based violence prevention intervention involving the Erijaville community, and its experiences of and responses to interpersonal violence with a particular focus on

masculinities. The 'case' chosen for this study focuses on a bounded system, which is bounded by time (from 2011-2014) and place (situated within a single community).

This study was conducted over a period of four years (from 2011-2014) which renders it a longitudinal study. A longitudinal study involves the collection of data over a long period of time generating rich qualitative data. It is designed to facilitate observations over an extended period, providing information describing processes over time, for example from the inception of a project until its culmination (see Babbie & Mouton, 2006; Bynner, 2006). Figure 5.1 below depicts the current study's overall research design and timeline.
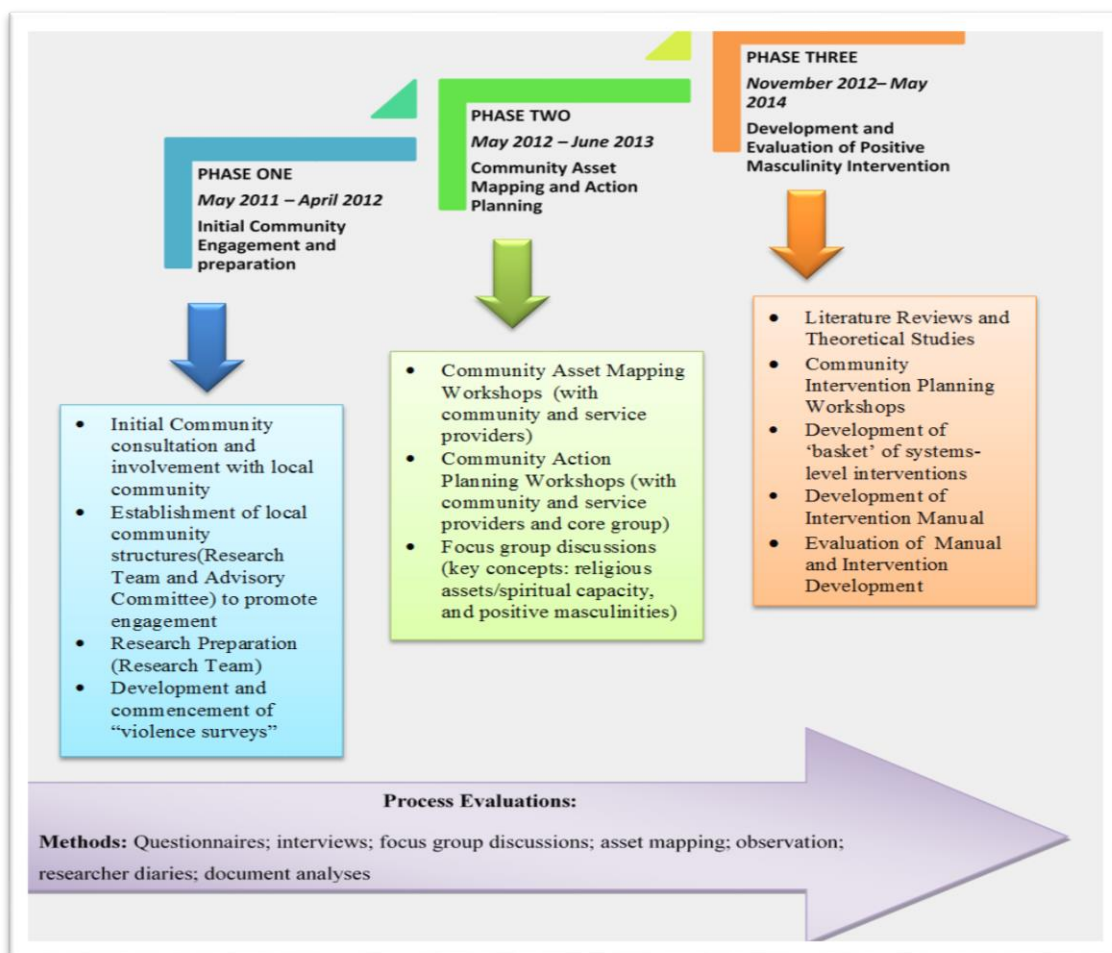
Figure 5.1. **Research design and timeline.**

According to de Vos et al. (2005), meaningful measurement can be implemented and claimed to have caused a change in behaviour only if the researcher clearly delineates the different phases of the intervention study and knows precisely what is to be achieved. Table 5.1 below

provides a clear outline of the main research activities relating to the three main phases of the research as outlined in Figure 5.1 above.

Table 5.1 *Research Activities and Phases of Research: Action Plan 2011-2014*

Transformational perspective, aimed at optimal engagement and pursued through CBPR approach			
Phase and Time-Frame		**Key Research Activities**	
Phase One Preparation **May 2011 – April 2012**	**1.1** **1.2** **1.3** **1.4** **1.5** **1.6** **1.7**	Community profiling Initial community consultation and involvement with the local community Establishment of local community structures (Research Team and Advisory Committee) to promote engagement Formal and on-the-job research training (Research Team and Advisory) Research preparation (Research Team) Development and commencement of monthly 'violence surveys' Literature reviews and theoretical studies	**Time-Series Process Evaluations** (All phases and activities, 2011-2014) (Literature reviews, questionnaires, interviews, focus group discussions, observation, researcher diaries and document analysis)
Phase Two Community Asset Mapping and Action Planning **May 2012 – June 2013**	**2.1** **2.2** **2.3** **2.4**	Community asset mapping (3 workshops with community, 1 with service providers) Community action planning (Workshops with community, service providers and core group) Focus group discussions: key concepts (spiritual capacity and religious assets and masculinities) Literature reviews and theoretical studies	
Phase Three Develop and Evaluate Intervention **Nov 2012 – May 2014**	**3.1** **3.2** **3.3** **3.4** **3.5**	Development of safety and peace indicators (indicator identification phase) Collective and organic development of intervention Development of the 'Building Bridges: Building families, building communities' intervention manual Evaluation of intervention planning through participatory methodologies Literature reviews and theoretical studies	

5.4 Participatory Programme Evaluation

This study is nested within the broad purview of programme evaluation. Evaluation literally means "assessing the value of" (Dale, 2004, p. 24). Generally speaking, evaluation encompasses all attempts to place value on processes, events, people or things (Rossi, Freeman, & Lipsey, 1999). Evaluation research can be regarded as the process of assessing, amongst others, the design, the applicability, implementation, (Fouché & de Vos, 2005) outcomes and efficacy of social research intervention programmes. Programme evaluation is a type of applied research (Fouché & de Vos, 2005) that uses social research methods to systematically examine the effectiveness of social intervention programmes (Rossi et al., 1999) and can be carried out from a quantitative, qualitative or combined approach (Fouché & de Vos, 2005).

The overarching goal of programme evaluation is to contribute to the progress of social conditions by providing scientifically credible data or information as well as objective judgment regarding the effectiveness of interventions (Lipsey & Cordray, 2000). Programme evaluation may be used to answer particular practical questions regarding intervention programmes and their development (Potter, 1999), to distinguish between effective and ineffective programmes, establish the merit or worth of new programmes, and to generate knowledge (Babbie & Mouton, 2006). This could entail appraising an intervention programme in order to enhance various aspects of the programme, including the identification of the social problem it addresses, conceptualisation, design, implementation as well as outcomes and effectiveness (Rossi et al., 1999).

There are a number of approaches to conducting programme evaluation, and each approach has different assumptions (see Deshler, 1997). This study used a participatory programme evaluation design. This design is also referred to in other ways, including self-evaluation (Campilan, 2000), collaborative (Rossi, Lipsey, & Freeman, 2004), and empowerment evaluation (Stoecker, 2005). Patton (1997) highlights that there is no definitive definition that exists for 'participatory' evaluation. He suggests that it must be defined and given meaning in the setting where it is employed. Citing Earl, he (1997, p. 99) further argues for the use of participatory and collaborative approaches to increase the use of findings by employing "systematically collected and socially constructed knowledge". Campilan (2000) highlights that participatory evaluation is especially germane for programmes rooted in participatory research such as in the case of the current study, which is framed within a CBPR approach.

Participatory evaluation is consistent with the CBPR approach that focuses on empowerment, and equitable participation. Participatory approaches to evaluation strive to empower multiple stakeholders by actively involving the programme stakeholders in every step of the evaluation process. It is therefore a partnership approach to evaluation through which all stakeholders are involved in all of the phases of a research project, and actively engage in the development and continuous evaluation of the project and its outcomes (SELA Advisory Group, 2009; Zukoski & Luluquisen, 2002). The evaluator and representatives of one or more stakeholder groups work collaboratively in planning and conducting the evaluation as well as analysing and disseminating the results (Rossi et al., 2004). The focus is on actively engaging those for whom the project is being conducted in all aspects of the evaluation process – sharing control in the planning, conducting and analysis whilst applying learning gained from the evaluation process (SELA Advisory group, 2009). Involving the local community stakeholders in the evaluation process is based on the assumption that this will contribute to greater relevance and accuracy of the evaluation findings (Aubel, 1999). The process of actively engaging in evaluation, according to Patton (1997), can have the same or even more impact than the actual findings generated by the study. Participating in the evaluation process from beginning to end provides community stakeholders with a sense of ownership of the results (Zukoski & Luluquisen, 2002). Participatory evaluation is thus empowering.

Participatory evaluation is in line with the *action* aspect of CBPR. The main objective of action research is the production of practical knowledge that is beneficial to people in the daily conduct of their lives (Reason & Bradbury, 2001). Reason and Bradbury (2001) emphasise that action research comprises working towards practical outcomes and seeks to create new forms of understanding. These authors argue that in the same way that theory without action is meaningless, action without reflection and understanding is blind. The participatory character of action research renders it possible to involve all stakeholders in the inquiry and sense making processes that underpin the research, as well as in the resulting action. This participatory process endeavours to respect and value the voices, preferences, viewpoints and decisions of the most affected, marginalised and least powerful stakeholders and programme beneficiaries (Rossman, 2000; Zukoski & Luluquisen, 2002). Being included in the planning of the intervention evaluation confirms that stakeholders are more than just a 'target group'. Rather, they are viewed as responsible and competent individuals (Deshler, 1997).

Participatory evaluation differs substantially from conventional evaluation, which is entirely externally driven and initiated, and focuses mainly on programme outcomes. Notwithstanding the distinct differences between conventional and participatory evaluation, Campilan (2000) emphasises that participatory evaluation is not envisaged to be an absolute substitute for conventional evaluation. It endeavours to augment the overall efficacy of evaluation by making use of the primary strengths of the conventional approach whilst at the same time bringing in new value-adding dimensions. They must thus be seen as interrelated approaches that vary in emphasis (Campilan, 2000).

The benefits of participatory evaluation are wide-ranging. Notable among these are that this type of evaluation not only grounds data in the participants' perspectives, but also serves a political purpose by mobilising for social action (Levin cited in Patton, 1997, pp. 100-101). Importantly, control over the evaluation process comes from those involved in the project. Participation allows for the sharing of knowledge and the development of the evaluation skills of intervention among beneficiaries and implementers (Patton, 1997; Zukoski & Luluquisen, 2002). It also provides participants with the opportunity to determine the focus of the evaluation, the design and outcomes within their particular cultural, socioeconomic and political environments (Zukoski & Luluqquisen, 2002), or at the very least get their input regarding these. Moreover, it allows for the processes and outcomes to be measured in order to determine whether changes in the challenges faced by the community have occurred before, during or after the intervention (de Vos et al., 2005). Participation ensures joint responsibility, guarantees that indicators are meaningful to all concerned, and generates innovative ways of measuring the process (Springett & Wallerstein, 2008).

In this study, involving stakeholders and community members who were directly affected in the evaluation process provided a clearer and more distinct picture of what was really taking place in the program, and made allowances for the improvement of the intervention programme by providing us and stakeholders with opportunities to reflect on project progress, and make mid-course improvements (see Rossman, 2000; Zukoski & Luluquisen, 2002). This is congruent with the action research learning cycle proposed by Kolb and Kolb (2010) in which knowledge is gained through the process of the action/reflection learning cycle; the current situation is reflected upon, followed by planning and deciding and taking action, which is followed by reflection where new ideas emerge and are incorporated and the cycle continues.

Participatory evaluation of programme processes was thus more effective in ascertaining where programme improvements may be effected in this study.

5.5 Process Evaluation

Within the aforementioned participatory framework, the current study conducted a process evaluation of the development of the violence prevention intervention focused on utilising spiritual capacity and religious assets to promote positive forms of masculinity, with a particular emphasis on the CBPR process itself. Process evaluation is a predominantly qualitative approach that helps us comprehend and obtain a picture of the planning process of an intervention outlining how, why and by whom decisions were made and activities undertaken (Bess, King, & LeMaster, 2004). Process evaluation can be used to document and analyse the early development and/or actual implementation of an intervention programme. Drawing from the Federal Bureau of Justice Administration, Bess and colleagues (2004) provide a comprehensive definition of process evaluation, which apart from focusing on the evaluation of intervention implementation also focuses on "documenting the program's development and operation, process evaluation assesses reasons for successful or unsuccessful performance, and provides information for potential replication" (p. 109).

Process evaluation is a suitable adjunct to outcomes evaluation, as it can be utilised to assess the content appropriateness of the materials and activities of an intervention for the intended participants, and to look at the extent to which the process followed was effective. Whilst outcomes evaluation is essential to determine whether an intervention is effective, the information regarding programme outcomes is deficient and vague without knowledge of the programme services and activities that brought about those outcomes (Rossi et al., 2004). Outcomes evaluation focuses on measuring change, whereas process evaluation enables a researcher to identify how the change occurred (Stoecker, 2005).

Process evaluation is especially indispensable during the developmental phase of an intervention (see Stoecker, 2005). Patton (1997) indicates that process evaluation can provide valuable feedback throughout the developmental phase of an intervention programme as well as later by providing details for the diffusion of an effective programme. He cites, by way of example, the use of process data from an early pilot study of a federal health evaluation to inform the designs of the subsequent expansion of the programme (Patton, 1997). The following uses of process evaluation have been highlighted in the literature:

1. To assess how the parts of a programme fit together and how participants perceive a programme.

2. To understand programme strengths and weaknesses by looking at informal patterns and unanticipated effects in the full context of programme development. In this regard, the evaluator endeavours to uncover, understand and record the day-to-day reality of the setting under study. This also entails unravelling what actually happens in a programme by identifying the most important patterns and key nuances that provide the programme's character.

3. To record the challenges and dynamics that shape and mould decisions around key aspects of an intervention programme (Patton, 1997). To document important perceptions, concerns, activities, suggestions, administrative and management structures, products, and resources that surface during the different phases of a project (Bess et al., 2004).

Evaluating the planning of a programme focuses on "the process of programme conceptualisation and on the feasibility of programme plans. It usually examines programme aims and purposes to determine whether these relate to needs, to programme policy, and whether the intervention as planned is feasible" (Potter, 1999, p. 211). Rubin and Babbie (2001) note that, as an inductive method of theory construction, process evaluation enables evaluators to identify strengths and limitations in programme processes and assists in making recommendations for improving programmes.

Process evaluation as a methodology was particularly helpful in the development of the Building Bridges intervention programme. The focus for this doctoral study enabled me to evaluate the longitudinal phase-related developmental processes (actions, accomplishments, experiences, activities, decisions and challenges) and product (the intervention manual) of the current study; this provided a clear picture of the violence prevention intervention, focusing on the mobilisation of spiritual capacity and religious assets to promote positive forms of masculinity. It also provided information on how the intervention was drafted and evaluated. This methodology also provided a framework for evaluating the CBPR processes followed throughout the study. The action research component enabled us to continuously deliberate, reflect, plan and take action by changing the intervention as new learning emerged in the various phases of the research process.

The process data for this study was obtained from individuals and stakeholders who were closely involved in the planning and development of the programme as well as individuals who had no link to the programme, such as outside experts (see Patton, 1997). These differing and diverse perspectives provided unique, valuable and indispensable insights regarding programme processes as understood and experienced by diverse individuals (see Patton, 1997). The evaluators' ability to interpret and synopsize longitudinally the experience of community members and programme staff was therefore critical to the evaluation process in this study (see Bess et al., 2004).

5.6 Study Setting

Erijaville, an under-resourced community, is situated within the Helderberg Basin about 4 kilometres outside Strand in the Western Cape. The community extends over a relatively small geographical area with about 250 houses and about twice as many backyard dwellings. The self-build scheme houses evolved out of the old squatter camp called 'Blikkiesdorp' (Tin Town), which was the only rent-paying shanty town in South Africa during the apartheid era. The average income per household for the broader Rusthof area, within which Erijaville is situated, ranges from 0.00 to 25 490.03 rand per annum, which is between no income to 2124.00 rand per month (The Unit for Religion and Development Research, 2001). According to key informants, about 80% of residents are currently unemployed. Available statistics (Bulbulia, 1998) indicate that the majority of residents are living in the upper bounds (R1500) of the poverty line (75%), and almost half (47.1%) live just below the upper bounds (Bhorat & Van der Westhuizen, 2010). Previous general population estimates indicate that 47.8% of the population are males, and more than half of the residents (81.2%) are younger than forty years of age (Development Action Group, 1997).

The broader Helderberg area had 487 liquor outlets in 2001 with 'shebeens' predominantly found in lower socio-economic areas including Erijaville (The Unit for Religion and Development Research, 2001). Whilst there are a total of eleven shebeens in Erijaville, there are also twelve places of worship in this community. A variety of venues are utilised for worship including houses, granny flats and formal buildings.

While specific published crime statistics for Erijaville are not available, the 2014 South African Police Services (SAPS) crime statistics for the broader Strand area (see chapter 6) indicate that the level of interpersonal violence is very high when one compares it to the Cape Flats

communities, which are notorious for high levels of violence (see SAPS, 2015). Key informants corroborate that crimes such as robbery, male interpersonal violence, domestic abuse as well as attempted suicide are high in the target community.

5.7 Study Population and Participants

A population is defined as the aggregation of elements (individuals, objects and events) from which the sample is selected (Babbie & Mouton, 2006; Welman et al., 2005). It includes the total set of units of analysis (members, groups, organisations or elements of the population) about which the researcher wants to draw specific conclusions (Welman et al., 2005). Whilst the main target population for this study was initially boys and men, the study population for this study consisted of all members of the Erijaville community, located within the Helderberg region in the Western Cape, in which violence has been identified as a key social problem. The indirect targets of this study included all members of the local community, including religious and spiritual entities and other community-based and non-governmental organisations that strive to deal with violence in the target community.

5.7.1 Participant selection strategies

It is impossible to collect data from every person or everything in studying a particular phenomenon, so researchers need to devise a participant selection strategy to choose individuals, events, and times (Glesne, 2006). This is known conventionally as sampling or as Babbie and Mouton (2009) defines it, the process of choosing observations. A sample is drawn from the study population in order to uncover something about the population. The specific strategy that was used for selecting participants in this study was non-probability sampling, in particular purposive sampling and convenience sampling.

Purposive sampling refers to the deliberate selection of units of analysis in such a way that the sample obtained can be viewed as being representative of the study population (Welman et al., 2005). The researcher selects participants with a 'purpose' and usually has single or more particular predefined groups that he or she is seeking (Trochim, 2006). Participants are basically 'handpicked' based on specific characteristics, with a particular purpose in order to answer or explore specific questions. The participant selection strategy used in this study enabled the researchers to purposefully select a group of individuals that could best inform them about the research problem and the key phenomenon under investigation (see Cresswell, 2007). Palys (2008) highlights a number of purposive sampling alternatives of which this study

employed three techniques: stakeholder sampling, typical case sampling and criterion sampling. Stakeholder sampling entails identifying who the major stakeholders or key role-players are in various aspects of a programme or service being evaluated; typical case sampling comprises selecting typical cases or those that are not unusual in any way; and criterion sampling entails choosing cases or individuals who meet certain criteria (Palys, 2008). A fundamental quality of these selection techniques is that researchers use their subjective judgment to select cases, as opposed to randomly selecting participants (i.e., probability sampling techniques) (Laerd Dissertation, 2012).

Marshall and Rossman (as cited in Creswell, 2007, p.126) forewarn that "sampling can change during a study and researchers need to be flexible, but despite this, plan ahead as much as possible for their sampling strategy". Whilst we planned to utilise purposive sampling as a strategy for collecting data, on a few occasions we had to make use of convenience sampling. Convenience sampling, also known as haphazard or accidental sampling (Trochim, 2006), entails collecting those cases that are accessible and easy to obtain for a sample (Welman et al., 2005).

In this study, non-probability sampling was chosen by the researchers based on predefined selection criteria. The eligibility criteria varied for the different data collection methods (see Table 5.2 below), but there were some general criteria to which all had to adhere. In particular, participants had to be willing to participate and be mentally stable in order to consent to participation; both genders and all ethnic backgrounds and religious or spiritual denominations were included.

Table 5.2

Participant Selection Criteria

Method	Participants
Community Asset Mapping Workshops	Participants had to be residents of Erijaville, of different age groups (youth and young adults, adults and older adults), and religious leaders were specifically targeted.
Service Providers Asset Mapping Workshop	Participants had to be service providers or representatives of organisations that work within or provide services to the community of interest (including religious leaders).

Action Planning Workshops	Participants had to be either community members, service providers or religious or spiritual leaders from different faith traditions.
Focus Group Discussions (FGDs) on key concepts	Participants had to be either community members or service providers or religious leaders and of different age groups (youth and young adults, adults and older adults)
Focus Group Discussions (FGDs) on evaluation of the intervention manual	Participants had to have been members of the community research team.
Intervention Development Questionnaire	Participants had to have been members of the community research team and advisory committee.
Delphi Expert Panel Review	Participants had to be experts in the field of either masculinity, violence, spiritual capacity and religious assets, violence, and/or community members.
Baseline Survey	Participants had to be from Erijaville community and had to have experienced, perpetrated or been a witness to an act of interpersonal violence.

Some drawbacks of non-probability strategies include the inability for researchers to evaluate the degree to which such samples are actually representative of the population of interest (Welman et al., 2005), and researchers may likely overstrain subgroups in their population that are more easily accessible (Trochim, 2006). Individuals are not randomly selected, so this type of participant selection strategy has greater leeway for selection bias, and statistical generalisations cannot be made from the sample to other populations. Tansey (2007) highlights that even though the researcher has greater control over the selection process in non-probability sampling, the trade-off is that these participant selection techniques severely restrict the ability to generalise the findings to the wider population. Although generalisations from study participants to the broader population may be desirable, it is more often than not a secondary concern in qualitative studies (Laird Dissertation, 2002).

Even though non-probability participant selection techniques are often viewed as inferior to probabilistic methods, there are viable and theoretical motivations for their use. Non-probability methods are more economical (*vis-à-vis* time and financial expenses), less complicated than probability sampling (Welman et al., 2005) and convenient. When employing a qualitative research design, non-probability sampling techniques provide strong theoretical grounds for a researcher's selection of units (or cases) for inclusion in their sample (Laerd Dissertation, 2012). Non-probability techniques such as purposive sampling oblige researchers to apply their subjective judgements by drawing on academic literature

(theory) and practice (i.e., their own experience and the mutable nature of the research process) (Laerd Dissertation, 2012).

5.7.2 Participants

Another important consideration in participant selection strategy pertains to the number of participants to include in your study. In this regard, qualitative researchers are often faced with the question of depth and breadth. Glesne (2006) suggests that for in-depth understanding, the researcher should spend longer periods with a few participants and at observation sites. For greater breadth but a narrower understanding, she suggests collecting more data from more people and less observations in more situations. A general guideline for the number of participants to include in qualitative research is not to just study a few individuals or sites, but also to gather in-depth, extensive detail about each individual or site (Cresswell, 2007). The number should provide sufficient opportunities to extrapolate themes of the cases and conduct cross-case analysis (Creswell, 2007). For case study research, Creswell (2007) suggests that four to five cases in a single study are sufficient. Welman et al. (2005) suggest that a FGD should consist of at least six but no more than twelve participants. Tables 5.3 to 5.5 provide a breakdown of the participants for the different data collection strategies employed in this study.

Table 5.3

Distribution of Community Asset Mapping Participants by Gender and Age

Age	Male	Female	Total (N)	Percentage	Cumulative Percentage
15 - 25	7	7	14	18.92	18.92
26 – 35	9	10	19	25.68	44.59
36 - 55	15	19	34	45.95	90.54
56 – older	5	2	7	9.46	100.00
Total	36	38	74	100.00	

Table 5.3 above provides a breakdown of the participants for the three community asset mapping workshops in terms of gender and age. Altogether, 74 participants attended the three community asset mapping workshops. The ages of participants ranged from 15 to older than 56 years. This table indicates that the participants for this data set consisted mainly of participants within the age group of 36 to 55 years (45.95%), with an almost equal amount of

young participants falling within the age range of 15-35 years (44.59%). In terms of gender, participants were almost equally spread with 36 being male and 38 female. As a predominantly coloured community, participants mainly spoke Afrikaans speaking and were mainly of the Christian faith, as outlined in Table 5.4 below.

Table 5.4

Distribution of Community Asset Mapping Participants by Religion

Religion	Workshop 1	Workshop 2	Workshop 3	Total	Percentage	Cumulative Percentage
Christian	18	22	21	61	82.43	82.43
Muslim	1	3	2	6	8.11	90.54
Khoi Khoi	1	0	0	1	1.35	91.89
Rastafarian	2	2	1	5	6.76	98.65
Other	1	0	0	1	1.35	100.00
Total	23	27	24	74	100.00	

Table 5.5 below disaggregates the composition of the participants by gender for the Service Provider workshops, Action Planning workshops, FGDs, and the Intervention Planning Evaluation, which comprised the Delphi panel, the community Research Team and the Community Workshop participants.

Table 5.5

Distribution of Participants by Gender for Service Provider Workshop, Action Planning Workshop, Focus Group Discussions, and Intervention Evaluation

Method	Gender				Total	Cumulative Percentage
	Male (n)	Percentage	Female (n)	Percentage		
Service Provider Workshop	10	62.50	6	37.50	16	100.00
Action Planning Workshop	24	58.54	17	42.46	41	100.00
Focus Group Discussions	30	52.63	27	47.37	57	100.00

Intervention Evaluation	Delphi Panel	7	58.33	5	41.67	12	100.00
	Research Team	5	50.00	5	50.00	10	100.00
	Community Workshop	11	36.67	19	63.33	30	100.00

As can be seen in Table 5.5 above, there were 16 participants at the local Service Provider Workshop (10 males and 6 females) which was held at the Suider Strand Library. Participants were representatives of various departments in the government sector such as SAPS, Department of Justice, Department of Correctional Services, Department of Social Development as well as religious institutions and various local NGOs and NPOs. The participants of the Action Planning Workshop (see Table 5.5 above) consisted of 24 (58.54%) males and 17 (42.46%) females. The participants consisted of a roughly equal split between service providers and community members (with some academic and religious leader visitors as well). The FGDs were conducted as a collective exercise comprising three workshops with the first one having three separate FGDs at the same time consisting of 7, 8 and 7 participants each. The other two workshops had two FGDs taking place simultaneously, one with 8 participants in each group and the other workshop with 9 and 10 participants per group. Altogether, 7 FGDs were conducted and as can be seen in Table 5.5 above, the majority of participants (n=30, 52.63%) were male and 27 (47.37%) were female. Finally, Table 5.5 above disaggregates the intervention evaluation participants in terms of gender and the type of evaluation method used (Delphi panel review, research team FGD, questionnaire and a community workshop).

The table indicates that the Delphi panel consisted of more males (n=7, 58.33%) than females (n=5, 41.67%). The participants comprised experts in the field of masculinity (n=2), violence (n=2), spirituality (n=2), Hearts of Men members (n=2), Hearts of Women members (n=1), community members (n=2), and manual development (n=1). Column 4 shows that the sample for the FGD and survey questionnaire, which comprised the community research team, was equally spread in terms of gender (50% males and 50% females). The community workshop contained a total of 30 participants and the table indicates that the participants consisted mainly of females (n=19, 63.33 %) with males comprising 36.67 % of the total.

5.8. Data Collection

Both quantitative and qualitative methods were pursued in this study. Whitehead (2002) points out that amidst the continuous domination of quantitative research designs in health research, there has been a growing trend in the evaluation of community-based interventions towards multi-method and multi-disciplinary approaches. He highlights that it became apparent to funders, practitioners and researchers involved in the planning, implementation and evaluation of community-based interventions that the sole reliance on quantitative methods could not deal with possible consequences on project planning and implementation that may arise from such complexities. As a result, an increasing number of evaluators incorporated qualitative methods to the evaluation of community interventions to help make sense of and address these complexities (Whitehead, 2002).

Quantitative methods are extremely structured and controlled, which enables researchers to pinpoint and isolate variables (see Welman et al., 2005). Qualitative methods, on the other hand, emphasise processes and meanings that are not rigorously measured or examined in terms of quantity, intensity and frequency (Denzin & Lincoln, 1994). In this study, qualitative methods enabled us to actively engage with participants and get an in-depth view of the perceptions, ideas, feelings and opinions of participants. Combining the quantitative and qualitative methods allowed for "triangulation" (combining multiple methods, theories, observers and data sources) which added to the study's validity (see Babbie & Mouton, 2006; Creswell, 2007; Lincoln & Guba, 1985).

5.8.1 Data collection methods

As opposed to relying on a single data source, this CBPR study gathered data from multiple sources to gain a more comprehensive overview and understanding of the phenomenon being studied. Data sources include Asset Mapping Workshops, evaluation questionnaires of the workshops and notes, focus group discussions, diary notes of academic researchers and local research team members, research team and advisory committee meeting notes, photo-documentary recordings, the Delphi method panel process, and local Strand conferences. The data sets for the two process evaluations, the initial community engagement (Phase 1), the asset mapping phase (Phase 2), the intervention development and evaluation phase (Phase 3) are depicted in figure 5.2 and 5.3 below.
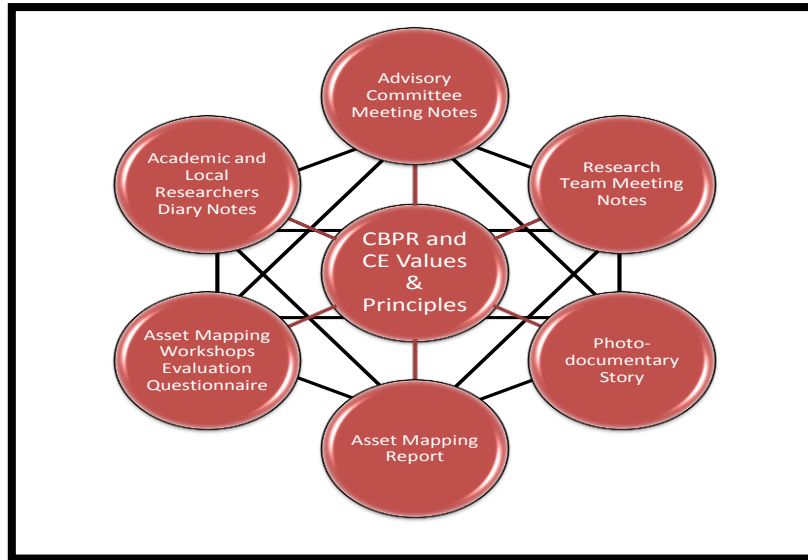
Figure 5.2. **Process evaluation of preparation and community asset mapping: 2011-2012 (Phases One and Two).**
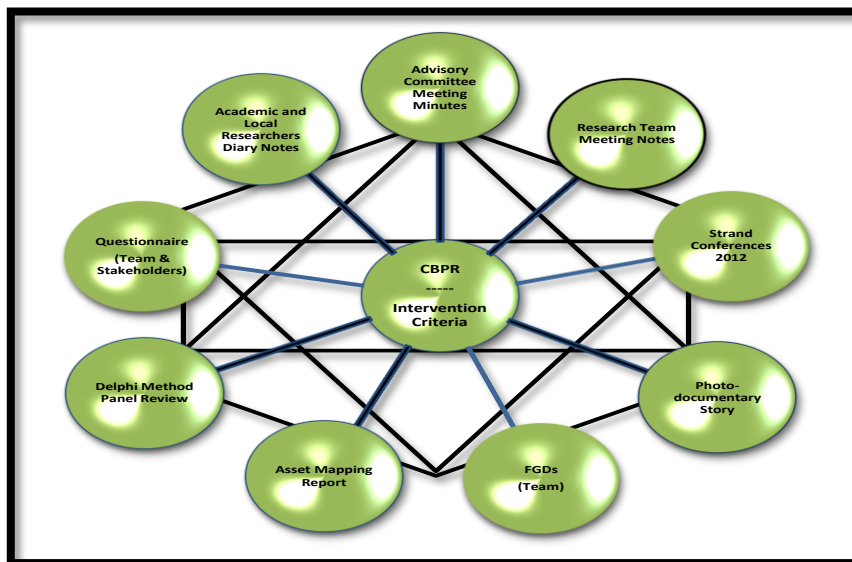
Figure 5.3. **Process evaluation of the intervention planning and evaluation: 2012-2014 (Phase 3).**

Cresswell (2007) advises that researchers would do well to develop a filing system of qualitative data collected including a master list of the types of data they collected. The data collection methods and instruments used in this study are listed in Table 5.7 below.

Table 5.7

Data Collection Methods

DATA COLLECTION METHOD	INSTRUMENTS	PURPOSE	PARTICIPANTS
Literature reviews and theoretical studies	Keywords	To conduct an in depth review of the literature on best practice in violence prevention and safety and peace promotion, mobilising spiritual capacity and religious assets and promoting positive masculinity	Desk-top review conducted by the key researcher
Community asset mapping (a variety of qualitative and quantitative data collection methods)	(a) Asset Mapping Manual for Community Members, (b) Manual for Service Providers, and (c) Action Planning Workshop Manual	To identify and understand community assets, with particular focus on spiritual and religious assets to promote safety and peace; and to make recommendations for future local action	3 Asset Mapping Workshops with members of the community (76 people in total) 1 Asset Mapping Workshop with service providers (15 sectors) 1 Action Planning Workshop (22 service providers and 20 community participants)
Key Concepts focus group discussions	Focus group interview schedule for exploring masculinities and SCRA	To identify community members' conceptions of spiritual capacity, religious assets, and positive masculinity	Three workshops including group interviews with community members and key informants – conducted by local community research team
Violence assessment survey	Questionnaire	To identify key informants' perceptions and experiences of violence in the community – providing another part of the baseline data	Monthly violence assessment survey conducted by local researchers, together with the above mentioned key informants
Photodocumentary; Photographs and narratives	(a) Story of Community Asset Mapping, (b) Story of Intervention Planning, and (c) Story of violence surveillance and Safety & Peace index development	To document the different phases of the SCRATCHMAPS intervention programme development	Compiled by community research team
Planning & development of positive masculinity intervention and manual	(1) Planning Workshop Programme; (2) Intervention Programme Plan of Action	To collectively plan an intervention focusing on promoting positive masculinity and to develop the violence prevention manual	SCRATCHMAPS research team in collaboration with Hearts of Men.
Evaluation of intervention development and product (i.e., manual)	(1) Delphi Panel Review questionnaire; (2) Community workshop; (3) Focus group interview schedule; (4) Questionnaire	(1) To evaluate the planning, development and design of the intervention (2) Exploring participants perceptions of the planning, design and development of the violence prevention intervention, and (3) To identify how community members have experienced the CBPR process;	(1) Experts in the fields of masculinity, theology, violence, Hearts of Men members, community members. (2) Community members, service providers and university staff (3) Community research team

5.8.2 Literature review of existing interventions

This study undertook a wide-ranging evaluation of existing interpersonal violence prevention initiatives by conducting a qualitative meta-synthesis as outlined in chapter 2. Electronic database literature searches were employed as the principal method for locating articles. The search strategy for the review of existing interventions explored several search engines, including Springerlink, SAePublications, Proquest, Google Scholar, Pubmed, Ebscohost, and PsychInfo. Specific journals included in this review were the Journal of Men, Masculinities and Spirituality, the Journal of Interpersonal Violence, and other grey literature included theses, dissertations and reports.

Various combinations of the following relevant primary and secondary search terms were included as outlined in Chapter 2 (see Figure 2.1). Titles and abstracts were then looked over for relevance, and full articles were obtained when they seemed relevant. Articles were then assessed for meeting the study's selection criteria. Reference lists of identified articles were then hand-searched in order to identify additional articles as well as to gain more comprehensive information on particular studies. Further articles were then retrieved and evaluated for inclusion. A total of 365 abstracts met the inclusion criteria and of these, 47 articles were retrieved for a complete evaluation review and 18 articles from the reference lists of these full articles were used.

The scope of this review embraced programmes that addressed interpersonal violence, but excluded child abuse, elder abuse, and institutional violence except school-based violence. This review particularly looked at studies that made use of qualitative methodologies to assess the effectiveness of the interventions, studies that applied a gendered lens, studies that were published in journal articles, studies published in English, theses and dissertations or reports, and/or programmes that incorporated a spiritual capacity and religious assets component and/or a community development component.

The overall effectiveness of interventions was judged by using a qualitative meta-synthesis as outlined in Chapter 2. To rate interventions on their gender approach, we used the following categories derived from Barker et al. (2007, pp. 3-4): (1) programmes were regarded as *gender neutral* when they distinguished little between the needs of men and women and neither reinforced nor questioned gender roles; (2) programmes were regarded as *gender sensitive*

when they recognised the particular needs of men grounded in the societal construction of gender roles; and (3) programmes were viewed as *gender transformative* when they aimed to transform gender roles and promoted gender-equitable relationships amongst males and females.

5.8.3 Asset mapping instruments

Asset mapping is a positive approach that enables community members to focus on "what they have," i.e. on the assets that can be found within their community as opposed to focusing on the negatives. The process of asset mapping, which has been outlined in Chapter 3, offers a critical component of community development that entails the active engagement of locals in shaping their community (Fuller, Guy, & Pletsch, 2002).

In this study, three mapping manuals were developed: (1) Asset Mapping Manual for Community Members (Appendix C), (2) Asset Mapping Manual for Service Providers (Appendix D), and (3) Action Planning Manual Programme (Appendix E) which served as a direct extension to the community asset mapping and service provider workshops. These asset mapping manuals were based on the PIRHANA community asset mapping tool developed within the International Religious Health Assets Programme (IRHAP) which was designed and tested in a prior research project. The SCRATHMAPS team (including researchers who worked with the PIRHANA tool) re-designed the tool for this project, but the tools' core logic remained the same. Both asset mapping manuals were devised in the form of exercises, the flow of which reflects the aforementioned logic. The activities and details of the two tools were slightly different. Table 5.9 below outlines the different exercises contained in the two asset mapping manuals.

5.8.3.1 Community asset mapping manual.

In this manual (see Appendix C), Exercise 1 began with a deliberate focus on content, with participants drawing community maps, and identifying the key social entities and facilities in their community as well as key contextual considerations. Table 5.9 below outlines the various exercises in the community asset mapping workshop. Exercise 5 included a guided discussion on spiritual capacity and masculinities, which then moved towards an integrated identification of the characteristics of local examples promoting positive forms of

masculinity, peace and safety. Activities concluded with an exploration of suggestions for further local action.

Table 5.8

Asset Mapping Workshop Exercises

Community Members Workshops	Service Provider Workshop
1. **Community Mapping:** Participants draw maps of the strengths and resources (assets) in their community.	▪ **Mapping Footprint of Organisations:** Participants identify and add organisations to the map (developed in community workshops), and describe how they contribute to general community development.
2. **Peace/Safety Promotion Index:** Participants identify the most important factors contributing to and working against peace and safety in the community, and then rank community organisations on how well they promote safety and peace in the community.	▪ **Areas of Engagement/Peace & Safety Index:** Participants identify the ways that local entities contribute to safety and peace.
3. **Spirituality/Religion and Peace/Safety Index and Matrix:** Participants share views on religion and spirituality, and identify ways spirituality/religion and religious organisations contribute to peace and safety.	▪ **Spiritual Capacity/Religious Assets and Masculinities Index and Matrix:** Participants share views on spiritual capacity and religious assets, and then identify ways that these assets contribute to community development, safety and peace, and positive forms of masculinity.
▪ **Masculinities and Peace/Safety Index and Matrix:** Participants share views on how masculinities contribute to violence, peace and safety, and then list current assets that contribute to promoting positive forms of masculinity, describing the characteristics of good practice.	4. **Social Capital and Networking Spidergram:** Participants develop a spidergram to capture how community entities link with one another around community development (and safety and peace more specifically) and identify good practice.
5. **Local Action:** Preparation for final workshop, which will focus on planning action aimed at mobilising spiritual capacity and religious assets to promote positive forms of masculinity, and thereby promoting safety and peace.	▪ **Collaboration Contribution Grid:** Participants identify existing and potential collaboration partners and shared resources, particularly in relation to promoting safety and peace. ▪ **Local Action:** Preparation for the final workshop.

5.8.3.2 Service provider manual.

This manual (see Appendix D) contained 5 exercises. Exercise 1 began with a mapping exercise where participants had to locate their organisation geographically on a map, indicating where their organisation provided services, and identify any gaps or overlaps in service areas. This led to a greater awareness of organisations present in the area, communities they served and specific organisational contributions to community development. Table 5.9 outlines the various exercises in the service provider asset mapping workshop. Exercise 2 explored how local entities (non-religious/spiritual and religious/spiritual) contributed to safety and peace; described services offered more explicitly, and identified potential gaps and opportunities in services. This led to an expanded matrix (based on the matrix produced by community members). Exercise 3 developed a list of masculinity factors that worked against or contributed to peace and safety by listing these factors. Drawing on exercises 2 and 3, participants added to the matrix developed in the community members' workshop any services or programmes that each organisation provided in relation to the factors listed in order to illustrate how their organisation contributed to the promotion of generative masculinities and safety and peace. Exercise 4 then focused on developing a spidergram to obtain data on important relationships that contributed to the success of health service delivery. Exercise 5 centred on completing a grid in which participants had to identify existing and potential collaborative partnerships and shared resources. This set the foundation for action steps in terms of strengthening partnerships and building capacity.

Both asset mapping manuals were piloted with the community research team (n=10). Participants found the manual accessible, the language simple and the instructions clear. However, participants found it difficult to differentiate between the two mapping manuals, as the covers looked very similar, and one manual did not have page numbers. We subsequently added the page numbers and enlarged the titles on the front cover of the manuals.

5.8.3.3 Action planning workshop programme.

This manual's main purpose (see Appendix E) was to elicit suggestions for local action to promote safety and peace in the local community by listening to participants' suggestions for community and action development in Erijaville. The first item on the agenda was a presentation by the local research team on the SCRATCHMAPS story. This was followed by a presentation on the initial findings of the three community asset mapping workshops and the service provider workshop. This was followed by the facilitation of an open discussion,

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allowing questions and comments from participants. All questions and comments were noted, and thereafter their suggestions were incorporated into the action plan. The succeeding exercise, 'Suggestions for local action', listed the 'local action' suggestions derived from the community and service provider workshops onto a newsprint wall chart with suggestion cards arranged beneath each preceding card. New suggestions emerging from the discussion were written on post-its' and added to the list. In the next exercise, 'Prioritising Actions,' participants were asked to arrange the high ranking local action suggestions onto a grid with columns labelled 'short-term,' 'medium term' and 'long term'. Each column on the grid was sub-divided into rows labelled 'high priority,' 'medium priority' and 'low priority'. In the final exercise, all of the high priority actions were then arranged onto a new grid with columns labelled 'We can do it … on our own;' 'We can do it … with a little money;' 'We can do it …with a little help and some money;' 'We can't do it … but we can tell someone what needs to be done' and 'Who else can help?'

5.8.4 Focus group discussions

Following the asset mapping workshops, focus group discussions (FGDs) were conducted. FGDs are interviews conducted with a group of participants. The nature of the focus group interview enabled us to extract greater meaning and answers (see Searle, 2002). This type of interview also provided an opportunity to utilise probing in order to gain more in-depth responses without biasing later responses (see Babbie & Mouton, 2006). FGDs were especially meaningful in exploring thoughts and feelings, for understanding diversity, and for investigating complex behaviour such as gender role socialisation and the construction of masculinities (see Greeff, 2005). Two semi-structured interview schedules were constructed to guide the FGDs in this study: (1) to explore participants' perceptions on masculinities and spiritual capacity and religious assets (Appendix E), and (2) to explore participants' views on the planning and development of the violence prevention intervention (Appendix F).

5.8.4.1 Focus group interview key concept schedule.

The First FGD-schedule aimed at exploring the grounded theory aspects of conceptual development and understandings and perceptions of key concepts of this study. The schedule was divided into two sections that were preceded by an introductory pattern and a general question to help establish rapport and put participants at ease. Section A focused on exploring participants' views on masculinities, in particular what the concept *masculinity* meant to them

(what it means to be a 'real man'), how they were raised to think about masculinity, how they would raise their children, how spirituality and spiritual capacity could contribute to positive masculinity, how positive masculinity could contribute to safety and peace, and how they could mobilise spiritual capacity and religious assets to promote positive forms of masculinity, peace and safety. Each question had two or more probes that the facilitator could draw on to clarify and/or explore key questions further.

Section B focused on exploring community understandings of spiritual capacity and religious assets. The questions looked at their understanding of the term 'religious asset,' what their views were on the factors that made something 'religious' and what made it an 'asset' in relation to safety and peace. Thereafter, it explored what 'spirituality' meant to them and the kinds of spirituality there were; what 'spirit' was and what made the spirit strong or weak; and finally, it explored human beings' creative capacity.

5.8.4.2 Focus group intervention planning and development schedule.

The second FGD explored participants' views regarding the planning and development of the violence prevention intervention. The aim of this semi-structured FGD interview schedule was to evaluate the planning phase of the intervention, including reflections on the conceptual development process and the intervention manual, with a focus on the (a) CBPR method (section 1), and (b) the intervention itself (section 2). The first section, which focuses on the implementation of the CBPR principles in the development of the manual, explored whether and how historical and current community dynamics were taken into account during this process, the relevance and responsiveness of the interventions for local needs, the extent of community participation, the research process, whether partnership as a framework directed the study, co-learning and co-creation of knowledge, whether an asset or strengths-based approach had been pursued, the contribution to local action, the extent to which empowerment and ownership had been promoted, and whether the intervention had contributed to sustainable community development and how this has been pursued. In this doctoral study, both of these FGD interview schedules were piloted with members of the community research team who, apart from making some minor suggestions for improvement, found the interview schedules to be clear and accessible.

5.8.5 Survey questionnaires

Questionnaires, the most widely used method of data collection, are constructed with the basic aim of obtaining facts and opinions regarding a phenomenon from individuals who are informed about the phenomenon (Delport, 2005). It normally comprises several measurement scales consisting of close-ended items and some open-ended items to obtain qualitative responses (Kanjee, 1999).

5.8.5.1 Violence assessment survey.

A violence assessment survey tool (questionnaire) was developed for this study by the research team (Appendix B). The primary purpose of this data collection instrument was to detail experiences of violence and track the extent and distribution of interpersonal violence within the targeted community. This survey collected information on three primary areas: demographics, biographical details and the nature of the violent incident. The instrument was divided into four sections. Section A sought to obtain demographical data including the date and time that an incident of violence occurred, the type of violence that took place, and whether or not the police had been notified of the violent incident. Section B of the instrument sought to elicit the biographical particulars of the victim and the perpetrator or perpetrators, and the relationship between the victim and perpetrator. Section C of the instrument explored the nature of the violent incident, its precipitating factors, the object (weapon) or force used to inflict the violence, whether there was any underlying motive, and the nature and severity of the injury sustained. The final section provided a qualitative segment to elicit any other relevant information pertaining to the incident.

The response format of the instrument was predominantly close-ended, with questions in which respondents were limited to a fixed set of responses and included discrete variables such as yes/no and male/female questions as well as multiple choice questions with several options from which the respondent could choose. It also had one open-ended, unstructured question where the respondents could provide any additional information relating to the incident.

After the original questionnaire was constructed, it followed a rigorous piloting process. It was first reviewed by a team of academic experts who made some suggestions for improvement, in particular regarding the focus of the questionnaire, which was initially constructed as a household survey. It was suggested that we remove the general information

section and reconstruct the survey to focus on specific incidents of violence that occurred in the community. The draft questionnaire was pre-tested in a pilot study to determine the understandings of test-takers regarding the research problem and questions, to gain additional information regarding improving the final draft, and to determine how much time was needed to complete the questionnaire (see Welman et al., 2005). It was piloted with the community research team (n = 10) and the advisory committee (n = 11). The questionnaire was then revamped and translated into Afrikaans by the community research team members, and then it was checked by myself (I am proficient in English and Afrikaans). Subsequently, the community researchers were trained to conduct a pilot study with the questionnaire. Two community research team members and I then piloted the translated instrument with members of the local Hearts of Men organisation (n = 16). The pilot enabled us to check the clarity of instructions, identify unsuitable, poorly worded items, check the translation, confirm the accessibility of response categories, identify omitted questions, and train the community researchers with regard to tool implementation. Based on feedback from the piloting process, the researchers clarified instructions so that the local data collectors could easily complete the survey. For example, we clarified what data collectors should do in the case of suicide where the victim and perpetrator are the same person. We also added response categories to some of the questions (e.g., we added 'town/city' as a response to where violence has occurred) and adjusted, re-worded or removed any problematic items from the instrument.

5.8.5.2 Delphi panel review questionnaire.

This questionnaire (Appendix H) was constructed to evaluate the intervention based on specific information that was required from the expert panel. Panellists' opinions were solicited regarding a list of indicators that focused on the overall structure and presentation of the manual, and the three main dimensions of the programme: violence prevention and safety and peace promotion; spiritual capacity and religious assets; promotion of non-violent egalitarian positive forms of masculinity. The Delphi technique was used to develop consensus on (1) the components of the intervention, (2) the structure of the manual, (3) whether the activities aptly mobilised spiritual capacity and religious assets (4) whether the activities promoted the construction of non-violent, pro-social and egalitarian masculinities, and (5) whether activities covered all dimensions of the ecosystem.

The Delphi panel review questionnaire elicited panellists' opinions on the feasibility, relevance, suitability, length, and structure of the manual components by means of a four-point Likert scale: *strongly agree* [5], *agree* [4], and *don't know* [3] to *do not agree* [2] and *strongly disagree* [1]). Delphi panellists were selected for their recognised expertise on the topic under study, for being stakeholders who would be directly affected, or for being community members (see Colton & Hatcher, 2004; Scheele, 1975). Panellists in this study were then asked to provide qualitative feedback on the sessions and make suggestions for improvement. The final part of the questionnaire elicited panellists' general opinions by means of open-ended questions about the manual as a whole, the appropriateness of session and module titles, whether the activities were better suited elsewhere in the manual, whether the key content areas were sufficiently covered in the manual, the accessibility of the language, and any other general comments they may wish to add. Whilst the Delphi method is a predominantly quantitative method focusing on statistical and numeric consensus, in this study we combined both quantitative and qualitative techniques to obtain a more comprehensive and deeper understanding.

5.8.5.3 Intervention development questionnaire.

The third questionnaire used in this study was a 61 item questionnaire (Appendix I) developed to measure three key components of the intervention development. The objectives of the questionnaire were to determine: (1) the extent to which the planning and development of the intervention reflected the CBPR principles, (2) the extent to which the planning and development of the intervention covered the overall intervention criteria, and (3) how well the intervention manual had been developed. Section one of the questionnaire contained 22 questions to measure the first objective, section two contained 10 questions to examine the second objective, and section three contained 29 questions that assessed the manual as a whole (including the overall structure and specific activities). The response format for all of the items consisted of a five-point Likert scale: *strongly agree, agree, don't know, disagree,* and *strongly disagree.* As with the violence assessment survey, the latter two instruments were piloted with the community research team and revised as per the feedback received.

5.8.6 Photo-documentary: photographs and narratives

Photographs are visual depictions of reality. Photographs can be used to assist in explaining complex issues in a visually comprehensible format (Given, 2008). Glesne (2006) asserts that the utility of photographs is limited only by the researcher's imagination. Photographs are

regarded as a primary source of data, as they enable researchers to gain insights normally not accessible through other structured methods like interviews; as with verbal data, they require analysis and interpretation (Keegan, cited in Given, 2008, p. 622). Keegan however warns that the danger with photographic methods is that photographs, as with all visual data, could be misconstrued as self-explanatory, particularly since they can at times be visually very powerful. Photographs require input from research participants through discussion and interpretation before it can be analysed and integrated into the overall research findings (Given, 2008).

Photographs were used in this study by the community research team under the tutelage of the academic researchers to develop 'photo stories' (photo-documentaries). Apart from the overall story of the SCRATCHMAPS project, three photo-documentaries depicting the sequential process of the different phases of the current study over time were developed. These were: (1) the story of community asset mapping, (2) the story of intervention planning, and (3) the story of violence surveillance, safety and peace index development.

The three photo stories of the current study were developed by the community research team. They collectively decided on which photographs to use, how they wanted to tell the story, and they developed their own narratives to accompany the photographs. Photographs were used by researchers and participants in this study to capture important events, document actions, depict perceptions, and express emotions.

5.9 Data Collection Procedure

Case study data collection comprises a broad array of procedures enabling the researcher to construct an in-depth, detailed picture of the case (Cresswell, 2007). Full ethical approval for the overall SCRATCHMAPS study, including the current study, was obtained from the University of South Africa's Ethics committee (18 July 2011 and 26 November 2012).

The study phases spanned over a period of four years. Prior to making initial contact, the researcher compiled a community profile of the targeted community. In order to gain access, initial contact was made with the targeted community via a gatekeeper, who was an 'insider' familiar with the locals and the prevailing dynamics within the targeted community. He provided us with invaluable information and advice around making access decisions (see Glesne, 2006). We, three academic researchers accompanied by the gatekeeper, conducted a

transect walk through the community. This provided us with an opportunity for establishing rapport with the local community so that we were not strangers to them when the actual project commenced.

On the gatekeeper's advice, an initial meeting was set up with a small group of community leaders to present the proposed study, obtain their feedback on its relevance, and ask for their suggestions on how to take it forward. The first stakeholder meeting was held at Rusthof Primary School. The proposed study was presented and specific questions were posed to the community, including whether the proposed study would address the community's needs. An open invitation was then extended to the stakeholders, who were mostly members of the targeted community, to be part of the study's community advisory committee. A date was then established for the first advisory committee meeting. At this meeting, decisions were made on how to employ community members to be part of the community research team. The research team was established through a democratic process, including submission of curriculum vitae and interviews. The research team and the advisory committee were provided with basic training on conducting research. Subsequently, a number of formal training workshops were conducted with the community research team in relation to the various specific data collection strategies.

Guided by the academic and community research team, the participants for the various data collection strategies were selected purposively or conveniently in order to select a sample on the basis of the researchers' knowledge of the population, its elements, and the nature of the aims (see Babbie & Mouton, 2006). Participants were informed of the study's aims and objectives, provided with an information sheet, and invited to participate voluntarily without any coercion. They were also informed of the process requirements, they gave their permission to participate in the community asset mapping workshops, they were informed of the service providers' asset mapping workshop, the action planning workshop, the focus group discussions, and the necessity to complete the questionnaires and to be interviewed. Special emphasis was placed on getting permission to record the proceedings by camera and dictaphone, and signed informed consent (Appendix J) was obtained from all of the participants.

The researchers conducted the Community Asset Mapping Workshops and the FGDs at a local place of worship, the Elclessia Tabernacle; the Service Provider Workshop was held at

the local library, the Action Planning workshop at the local Methodist church, and various other workshops and meetings were held at the Elclessia Tabernacle.

The asset mapping workshops with the community were conducted by the four academic researchers, assisted by the community research team, who were given various tasks such as small group facilitation, adding frequencies of responses in certain activities, documenting the proceedings by hand, taking photos, and making audio-recordings of the proceedings. The asset mapping workshop with service providers was facilitated by the community research team, and they were assisted by the academic researchers. The Action Planning Workshop was facilitated primarily by the community research team and one of the study's key researchers.

Seven semi-structured focus group discussions were then conducted by the research team, myself and another academic researcher. Separate focus groups were conducted within the same venue and facilitated by two researchers (academic and community researchers), with the co-facilitator documenting the proceedings by hand, recording the proceedings with a dictaphone and assisting when necessary. This enabled the facilitators to maintain rapport with participants, as the main facilitator could give his or her undivided attention to the participants. The FGD schedule made use of semi-structured questions and was prepared in advance. The religious leaders and service providers were purposively selected, whilst community members were chosen using both purposive and convenience sampling. Community members were invited purposively to participate, and when a number of them did not turn up for the FGDs, other participants were invited using convenience sampling. The workshops and FGDs were conducted primarily in Afrikaans with one FGD conducted in English, as some of the participants could not speak Afrikaans; Afrikaans was used in this FGD as a means of clarifying certain questions. After the violence prevention intervention was completed, it was evaluated by presenting it to the community and service providers in a workshop held at a local church. The manual was also evaluated by a Delphi panel of experts, and the research team completed a survey questionnaire and participated in a FGD facilitated by an independent researcher with the sole aim of obtaining their perceptions on intervention planning and development.

The violence surveillance questionnaire was then administered by the community research team. The data were collected on a monthly basis from the beginning of 2012 until the end of

2013. The questionnaire took about 25 to 30 minutes to complete. After having received training in data capturing, the community research team assisted a member of the academic research team in capturing all hardcopy surveys onto an electronic template and, thereafter, subjected the data to 'cleaning' in order to remove any errors.

The Delphi Panel Review questionnaire was emailed and a hard copy of the intervention manual was delivered to the panellists. They were given a month to provide feedback on the manual. The feedback was then triangulated with the feedback from the community workshop, the FGD, and the questionnaire, and changes were made to the intervention manual prior to implementing the intervention.

Since the inception of the SCRATCHMAPS project, the research team was given the task of capturing the whole process through photographs. They were trained on how to compile a photo-story of events and activities. They were then assigned the task of compiling the photo-story, which entailed reflecting on, discussing and devising narratives for the various pictures that they chose to tell the story. Throughout the study's lifespan, both academic and community researchers kept reflexive diaries as well. Various meetings and workshops and local conferences were held to present the findings of the different data sets collected in this study as well as to obtain local input.

An important process step in research centres on data storage, as researchers need to decide how they will store data so that it is easily accessible and protected from harm or loss (see Creswell, 2007). I organised the raw data into files before transferring it into electronic format. Digital audio-recordings of the various data sets were downloaded onto a computer and saved in a password protected folder. The community research team was trained to transcribe audio-recordings, and consequently they worked in pairs to transcribe the recordings (e.g., FGD interviews) under the key researcher's supervision. They first listened to the audio-recordings and made brief notes to augment the notes made during data collection, thereby facilitating transcription. After completion, the transcribed data were also saved in a Microsoft Word document in a password protected file, which was only accessible to the research team for later analysis.

5.10 Establishing Quality, Trustworthiness and Rigour

Quantitative and qualitative researchers need to both assess and show that their studies are credible (Golafshani, 2003). However, judging the quality of qualitative research differs from that of quantitative research. Reliability (i.e., the extent to which the research findings are replicable), validity (i.e., the extent to which research findings accurately represent what is really happening, independent of the researcher's own ideas), and generalisability (i.e., the extent to which the research findings can be generalised from a sample to the broader population) are the cornerstones for validating quantitative research (Burr, 2003; Delport, 2005; Welman et al., 2005).

There is apparent disagreement among qualitative researchers around the applicability of conventional notions of validity and reliability as used by social scientists conducting research within the ambit of a positivist paradigm. Glesne (2006) equates the quantitative notion of research validity with establishing trustworthiness in a qualitative study. Lincoln and Guba (1985) argue that in order to sustain the trustworthiness of a qualitative research report, researchers do in fact depend on the issues conventionally referred to as validity and reliability. Finlay (2006) strongly opposes this view. She claims that reliability is largely irrelevant in the qualitative paradigm since qualitative research does not endeavour to obtain consistent results, as situations can never be precisely replicated. Instead, qualitative researchers seek to obtain participant responses at a particular time and place. Burr (2003, p. 158) corroborates this view and attests that 'all knowledge is provisional and contestable, and accounts are local and historically/culturally specific'. Finlay (2006) further contends that the criterion of validity is based on the belief that the phenomenon under study possesses 'reality' in a certain and objective sense, which is viewed as inapposite by qualitative researchers who maintain that there are multiple realities. Furthermore, qualitative research, by definition, entails subjective interpretations (often furnished by both participants and researchers), which cannot be omitted from the research process. As for generalisability, she argues that qualitative researchers do not aim to extrapolate results from a specific sample to the broader population, but instead endeavour to demonstrate that findings can be transferred and could possibly have meaning, significance or relevance if applied to other contexts, situations, or individuals (Finlay, 2006).

Notwithstanding the above, qualitative researchers have devised alternate concepts for validity and reliability. These conventional notions are conceptualised in the qualitative paradigm as quality, trustworthiness and rigour (Golafshani, 2003). Agostinho (2005, pp. 6-8) highlights that qualitative research literature indicates that assessing the quality of a qualitative research study hinges on three factors: (1) the design of the research, that is establishing how appropriate the research design is for the research problem; (2) the process in which the inquiry is undertaken, in other words demonstrating rigour and the extent to which the research process can bring about 'truthful' and accurate findings, and (3) the outcome of the research, that is, determining the usefulness of the research project to the community. The current study has adopted a qualitative research approach, so these three factors will be utilised as criteria to discuss how this predominantly qualitative study represented quality research (see Agostinho, 2005).

5.10.1 Quality criterion 1: appropriateness of the research design

Lincoln and Guba (1985) declare that in order for any research to produce meaningful results, there needs to be congruence between the phenomenon being studied, the inquiry paradigm, and the research context in which the study is being conducted. This study was framed by a critical public health framework that enabled us to deal critically and holistically with the issue of violence and the promotion of safety and peace and positive forms of masculinity by mobilising spiritual capacity and religious assets. Guided by the CBPR framework, this study further ensured that the community had a voice through active participation, thereby ensuring research relevance to the local context.

5.10.2 Quality criterion 2: demonstrating rigour

The qualitative paradigm demonstrating the rigour of the research process (to what extent the process results in 'truthful' and accurate findings) requires a researcher to engage in at least two of nine recommended verification procedures in a research study: (1) prolonged engagement, (2) persistent observation, (3) triangulation, (4) peer review or debriefing, (5) negative case analysis, (6) member checks, (7) rich, thick description, (8) external audits, and (9) reflexive journaling (Creswell, 1998, 2007).

In this study, rigour was achieved by spending extended time in the field, thereby building trust (prolonged engagement) through persistent observation at various points in time through the different phases of the research process (as outlined in sub-section 5.3), and by means of

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member checks whereby community members were directly involved in the collection and analysis of data; two community members reviewed the analysed data, interpretations and conclusions (the results chapters of this thesis) to check and verify the accuracy with which I represented them and their ideas (see Babbie & Mouton, 2006; Creswell, 2007; Glesne, 2006; Lincoln & Guba, 1985). Rigour was further established through a rich and thick description of the study setting and participants; keeping reflexive journals (academic researchers as well as the community research team), and through triangulation (see Cresswell, 2007; Lincoln & Guba, 1985). Triangulation was achieved through the following: (1) data (using more than one data source); (2) investigators (using more than one researcher in a single study to gather and interpret data in order to achieve inter-subjective agreement); (3) theory (using more than one theory to interpret data), and (4) methodologies (use of multiple methodologies to study a single topic) to provide corroborating evidence that sheds light on the conclusions and outputs of this study, including the intervention (see Babbie & Mouton, 2006; Cresswell, 2007; Denzin cited in De Vos, 2005, pp. 361−362; Lincoln & Guba, 1985). These recommended procedures embrace the trustworthiness criteria proposed by Lincoln and Guba (1985).

5.10.3 Quality criterion 3: usefulness of the research product

The findings from a qualitative study must be communicated in a manner that is understandable by others, and the research product should improve and enhance human understanding (Agostinho, 2005). This criterion has been achieved through various publications and outputs, including research articles, research reports, community booklets, information brochures, and formal conference and community presentations.

5.11 Data Analysis

The goal of data analysis is to convert information or data into an answer to the research question (Durrheim, 1999). The analysis of the multiple sets of data in this study was pursued relevant to the particular data collection methods utilised and the demands of both qualitative and quantitative analysis. The different data sets were triangulated around the research aim and the study's specific objectives.

5.11.1 Quantitative data analysis

Quantitative data were analysed using Microsoft Excel to compute descriptive statistics, and the Statistical Package for the Social Sciences (SPSS) version 21.0 was used specifically for analysing the violence survey data. Descriptive statistics are particularly useful for analysing and interpreting the results of the surveys through comparisons of basic descriptive data, which is necessary to render the results meaningful (Welman et al., 2005, p. 233). It was thus used to summarise, organise and present the quantitative data for this study in a meaningful and suitable format. Frequency distributions were used to arrange the values of a quantity of different variables or ranges of scores by means of histograms, bar diagrams and pie charts. Frequencies determine whether the distribution across all categories of scores is even (Welman et al., 2005). Histograms were used for interval data and pie charts were used for nominal data (see Welman et al., 2005). Means or averages were also computed for ratings and rankings.

5.11.2 Qualitative data analysis

For analysis of qualitative data, I made use of manual analysis by hand, and a Microsoft Word processor by coding and pulling ideas (copy paste). Data analysis in qualitative research entails 'preparing and organising the data for analysis, then reducing the data to themes through a process of coding and condensing codes, and finally representing the data in figures, tables, or a discussion' (Creswell, 2007, p. 148).

Thematic analysis was used to analyse the FGDs and other 'qualitative' data. Thematic analysis is a method that can be used to identify, analyse, and report patterns (themes) in qualitative data (Braun & Clarke, 2006; Clarke & Braun, 2013). Ritchie, Spencer and O'Connor (2003) highlight that this method is useful for working within the participatory paradigm and for working with participants as collaborators; it is flexible and easy to learn, which renders it quite accessible to novice researchers. It is thus suitable to the CBPR approach followed in this study. It can also be used to highlight differences and similarities across data sets, and it allows for psychological and social interpretations of the data (Ritchie et al., 2003).

This study used the Framework Method to manage and analyse the various sets of qualitative data pertaining to the CBPR process and the Building Bridges manual analysis. The name 'framework' is derived from the 'thematic framework' which constitutes the central

component of this method (Ritchie et al., 2003). An analytical framework is defined as the following:

> A set of codes organised into categories that have been jointly developed by researchers involved in analysis that can be used to manage and organise the data. The framework creates a new structure for the data (rather than the full original accounts given by participants) that is helpful to summarize/reduce the data in a way that can support answering the research questions (Gale, Heath, Cameron, Rashid and Redwood, 2013, unpaginated).

The framework approach is situated in the general category of analysis methods labelled "thematic analysis" or "content analysis" (Gale et al., 2013). Gale et al. (2013) note that the Framework Method is a very good tool for supporting thematic content analysis, as it provides a systematic structure for managing and mapping qualitative data. It shares many similarities with thematic analysis, especially during the initial stages when identifying recurring and significant themes (Smith, 2011). The thematic framework can be utilised to classify and organise data per central themes, concepts and emerging categories (Ritchie et al., 2003). Categories refer to the clusters that are formed when grouping codes under similar and interrelated ideas or concepts (Gale et al., 2013). In this perspective, the aims and objectives are very focused, and researchers use structured topic guides to extract and manage data (Smith, 2011). Figure 5.4 below outlines the steps in the framework approach, which has been derived from Nigatu (2009) and Gale et al. (2013).

As outlined in Figure 5.4 below, stage one entailed transcribing and translating the raw data. This was followed by data cleaning and becoming familiar with the data by listening to recordings, reading transcripts, contextual or reflexive notes and diaries. Gale et al. (2013) regards these as two distinct steps, whereas Nigatu (2009) regards these and coding as part of the first phase. Stage two entailed coding of the data by carefully reading a few of the transcripts and applying a label or code that described our interpretation of a particular passage. Gale and colleagues (2013) note that in deductive studies, codes may have been pre-defined, for example by a specific area of interest in the project or by an existing theory such as the CBPR framework and the process evaluation framework used in this study.
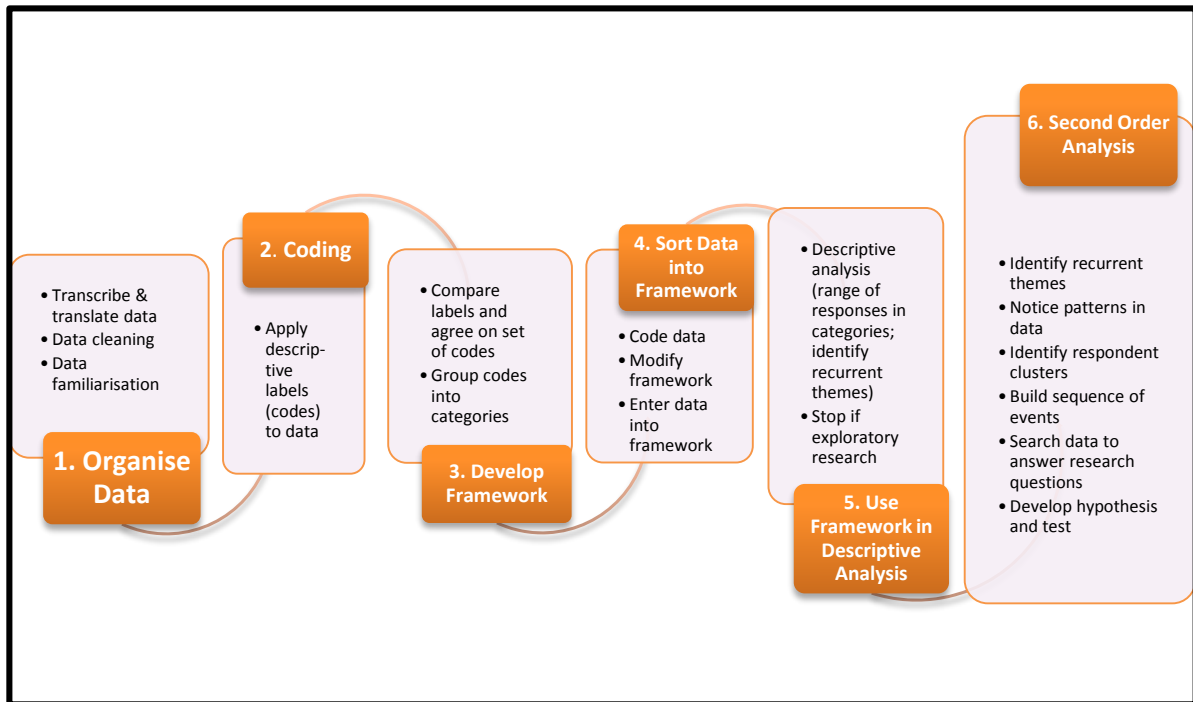
Figure 5.4. **Steps in qualitative data analysis using the framework approach.**

After having coded the first few transcripts, stage three commenced with the comparison of labels that we applied and then we agreed on a set of codes to be applied to all subsequent transcripts. Codes were grouped together to form categories that were then defined clearly. This forms the working analytical framework (Gale et al., 2013). A framework may be exploratory, i.e. guided by data, explanation or the research question (Nigatu, 2009). The framework served as the coding plan that was used to structure, label and define the data (Nigatu, 2009).

The next stage entailed the application of the analytical framework and charting the data into the framework matrix. This was achieved by indexing ensuing transcripts by means of the existing categories and codes. Each code was allocated an abbreviation or number to facilitate identification, and was written directly onto the transcripts. This was followed by sorting the data by category from every transcript into the framework matrix by using a spreadsheet (see Gale et al., 2013; Nigatu, 2009). The next stage, which is regarded as the final stage, entailed using the framework for a descriptive analysis.

This approach has numerous benefits, especially for novice qualitative researchers. It provides an effective guide and allows for a case and theme-based method of data analysis; it

also allows researchers to trace decisions, thereby ensuring that links between the original data and findings are preserved and transparent; finally, this method "adds to the rigour of the research process and enhances the validity of the findings" (Smith, 2011, p. 62). The following section will outline the analytical frameworks used in this study to assess the CBPR and community engagement used, and the intervention development.

5.11.3 Assessing the CBPR approach and community engagement strategy

This process evaluation study was guided by the values and principles of community engagement, pursued through a CBPR approach. Accordingly, the values and principles for community engagement, articulated through a CBPR approach, guided the process evaluation. The categories, or *a priori* themes drawn from the key CBPR principles outlined in Analysis Framework 1 (Table 5.10) below provide direction for what to search for in the data, and act as the key criteria for the process evaluation in this regard (Minkler et al., 2003; Parker et al., 2003; see also http:www.ihpr.ubc.ca/guidelines.html).

Table 5.10

Analysis Framework 1: CBPR Process Evaluation Analysis

AREA OF FOCUS	GUIDING QUESTIONS
Erijaville as 'Community'	How has 'community' been defined in this project? How has this project engaged with both historical and current community dynamics?
Research Relevance and Responsiveness	Is the SCRATCHMAPS research relevant and responsive to the needs and supportive of the local community's agenda?
Community Participation	Has optimal participation of key community stakeholders been promoted in this project, and how has this been pursued?
The Research Process	Was participation and 'empowerment' pursued through all steps in the research process?
Partnership as a Framework	To what extent and how has a 'partnership' framework guided the SCRATCHMAPS work?
Co-Learning and Co-Creation of Knowledge	To what extent and how has this project facilitated co-learning, and co-creation, or the production of knowledge?
An Asset-Based, Strengths Approach	How has the 'strengths-based' approach been pursued, and in particular, how have the values and principles of an 'asset approach' been pursued
Promoting Local Action	How has this project contributed to local action in the community?
Community Empowerment and Ownership	To what extent and how has this project facilitated capacity building and local control? Is this project 'owned' by the local community?
Community Strengthening and Sustainable Development	Has this project contributed to sustainable community development in this local community? How has this been pursued?

The analysis of the Asset-Based, Strengths Approach adopted in this project includes the following sub-criteria/questions:

- Has this study focused on human capacity and assets (particularly religious and spiritual capacities, strengths and resources), recognizing that important assets lie in networks and relationships that foster it (social capital)?
- Have the spiritual capacities and religious assets been made visible for the community?
- Has leadership engagement occurred so that the information that is created in the mapping process can be mobilized and leveraged by community leaders?
- Has a participatory inquiry approach been adopted, ensuring that local people drive the inquiry and have ownership of the knowledge produced and action pursued?
- Have new theoretical understandings 'from the ground up' been created, particularly around key concepts such as safety, peace, religion and spirituality?
- Has this study contributed to the development of innovative community research methodologies with a particular focus on the use of community asset mapping?

5.11.4 Examining the intervention development and valuation

Rossi et al. (1999; 2004) highlight that during the planning phase of a programme, when changes can be made relatively easily and when formulating the basic design of the programme, there are certain pertinent issues that are evaluated. They state that evaluation is often initiated when new programmes are developed to assess the social needs the programme has to address, the design and objectives of the programme, the definition of the target population, the expected outcomes, and the means by which the programme intends to attain those outcomes. They further state that appraisal of the programme conceptualisation could also be the central point of an evaluation when the planning phase has concluded and the programme is in the initial stage of implementation (Rossi et al., 1999; 2004). The above mentioned pertinent issues served as a guide to devise the framework for assessing and reporting on the processes involved in the conceptualisation and initial evaluation of the Building Bridges violence prevention intervention. The second analytical framework pertaining to the criterion for the evaluation of the intervention development process is depicted in Analysis Framework 2 (Table 5.11) below.

Table 5.11

Analysis Framework 2: Intervention Development Process Criteria Analysis Framework

INTERVENTION DEVELOPMENT PROCESS	
CRITERIA	**QUESTIONS**
Conceptual basis of the programme: A clear theory of causal mechanisms should be stated (Logic Model)	• Was the conceptual basis of the programme (causal logic) explained and sound? Have the linkages between all major variables/dimensions of the study been clarified (inputs, activities, outputs, and expected outcomes)?
Relevance of programme aims and objectives	• What is the adequacy with which the programme aims are stated? • Do the objectives of the programme flow from the aims?
Intervention congruence (correspondence)	• To what extent were the project aims consistent with local priorities or needs of the target population when designed? • Do the activities address the stated aims and objectives? • To what extent was there agreement between the theory about delivering an intervention, the issue being addressed by the intervention content (interpersonal violence), and the research paradigm (CBPR principles)?
Evidence-based	• Does the community-engaged research programme draw on 'best practices' in other programmes, including the characteristics of successful researcher community partnerships? • Are the programme activities the best ones for the intended recipients and the purposes of preventing violence? 5. Refer to CBPR Analysis Framework, Section One
Target population and context: 'for whom' and 'under what conditions' the intervention is expected to be effective need to be clearly stipulated	• Were the programme participants/study population fully described? Were contextual factors described?
Logistics: organisation and management	• Have detailed action plans for the implementation of the intervention been drawn up (including preparation, tasks, persons responsible, etc.)? What do they entail?
Sustainability of intervention: A clear statement of the factors that are expected to assure the sustainability of the programme once it is implemented needs to be provided.	• Were expected sustainability factors of the programme clearly stipulated? 3. Refer to the CBPR Analysis Framework, Section One

5.12 Ethical Considerations

When dealing with human subjects, researchers are guided by ethical principles in order to protect the rights and well-being of individuals. These ethical principles that underlie 'research

ethics' are universal and involve concerns such as honesty and respect for the rights of participants (Welman et al., 2005). Ethical guidelines serve as yardsticks, and a basis upon which researchers should evaluate their own conduct (Strydom, 2005). Welman et al. (2005, p. 181) state that ethical principles come to the fore during three stages of a research project, namely (1) when recruiting participants, (2) during an intervention and/or data collection procedure to which they are subjected, and (3) in the release of findings.

Full ethical approval for the overall SCRATCHMAPS study, including the current study, was obtained from the UNISA Ethics committee (18 July 2011 and 26 November 2012) (see Appendices A). This research was executed in conformity with the ethical guidelines provided by UNISA, and the ethical code of professional conduct in social research as expounded by Babbie and Mouton (2006).

5.12.1 Informed consent and voluntary participation

Participation was voluntary, and voluntary informed consent was obtained from all participants (Appendix J). Research participants must be provided sufficient information so that they can make an informed choice on whether to participate in a study (Glesne, 2006). Participants were thoroughly informed about the study's nature, aims and purposes as well as the data collection procedures that would be utilised; participants were also assured that there were no foreseeable risks involved. In this study, participants were provided with an information sheet (Appendix J) that imparted an overview of the project as well as ethical considerations. Signed informed consent was then obtained from participants.

5.12.2 Privacy, confidentiality and anonymity

The ethical principles pertaining to violations of privacy, confidentiality and the right to self-determination, according to Strydom (2005) can be viewed as synonymous; they were maintained in this study. Participants' right to anonymity and confidentiality was respected by ensuring that the data collected about and from them remained confidential. "Privacy implies the element of personal privacy while confidentiality indicates the handling of information in a confidential manner" (Strydom, 2005, p. 61). In this study, participants were assured of their right to privacy and confidentiality, and were informed that their identity would remain anonymous. Participants' privacy was ensured by obtaining information anonymously; their identity was safeguarded by not disclosing their names or identifying personal information on questionnaires, workshop evaluation sheets, research reports, or in any other publications.

5.12.3 Beneficence

Participants were informed about the possible benefits that they may gain from the study. They were informed that the community research team would gain financially from the study, as they would be paid a stipend to conduct various research activities. They would also gain knowledge and skills from various training opportunities provided by the project. The advisory committee would gain from the experience of steering the project as well as from being involved in various training opportunities. The broader community would gain from the community engagement process and from being involved directly in the development and evaluation of an intervention that addresses their identified needs as well as the various workshops and events coordinated and funded by the broader SCRATCHMAPS project. It should also be noted that I gained from this process in the form of knowledge as well as completion of a PhD dissertation, which has been approved by the community.

5.12.4 Protection from harm

Participants were assured that there were no foreseeable risks or harms attached to this study. Conflict resolution workshops were built into the broader SCRATCHMAPS study so that the academic and community research team as well as the interventionists could manage any conflict that emerged during the research process. Participants were also assured that the research would be conducted in a respectful and honest manner. Their right to freely extract themselves without penalty at any juncture during the research process was explained to them and valued throughout the research process.

5.12.5 Reflexivity: Researcher role and ethical dilemmas

Welman et al. (2005) warns researchers to guard against manipulating participants and treating them as numbers or objects instead of individual human beings. In this regard, Glesne (2006) poses a pertinent question regarding the role of the researcher and the ethical dilemmas that he or she faces. Glesne asks: "Do researchers, as uninvited outsiders enter a new community, mine their raw data of words and behaviours, and then withdraw to process those data into a product that serves themselves and, perhaps, their professional colleagues?" (p. 133). To guard against this ethical dilemma, this study was guided by a CBPR approach and a participatory community engagement strategy throughout the research. It thus involved community members as equal partners not only in research and intervention development, but also in implementation, evaluation and writing up research outputs.

When locating myself reflexively within this study, I reflected especially on my past and where I was situated within the notions of spiritual capacity and religious assets as well as masculinities, femininities, or gender. Firstly, I am a married Muslim woman who grew up in a coloured community. Some would call me coloured and others would call me a Cape Malay. Anyone who grew up in a Cape coloured community knows that there prevails amazing religious tolerance and many families, like my own, have Christian relatives. I regard myself as a spiritual human being, and therefore I derived intense pleasure and contentment from being involved in a study that explores the 'nicer' and more 'peaceful' side of religion, which from my own experience in community work had intense power to transform human lives. I have personally seen and met boys and men who were able to transform their lives from having problems with substance abuse and violence to living as clean and peaceful men who became role models for others. I am empowered by my spirituality and I believe that it is my duty as a vicegerent on this earth to improve human lives and to make a difference not to be known, but to be fulfilled.

It is within this belief and my faith that I locate my beliefs about masculinities and femininities. I think it is important to note that for me as a Muslim woman, the promotion of positive forms of masculinity (and by extension femininity) is within the ambit of my belief system. For me, it is in fact in conformity with my faith. I draw particularly on the following two passages from the Quran: [Women have rights over men just as men have rights over women]; [And live with women on a footing of equity and kindness]. This, along with numerous other passages and prophetic injunctions that allude to not being harsh to women, not to treat them with disrespect, not to try and change them as this would break them, and men and women being garments of protection to each other, are all directions for relationships of equality, fairness, kindness, non-violence and peacefulness. All of these are in conformity with the positive masculinity qualities identified in this study. I believe that it is this positive religious guidance that can be promoted as an asset to prevent violence. I also believe that words are used, interpreted and gain meaning in particular contexts. Words gain new meaning in different contexts when they are adapted or re-interpreted. So, others might disagree with me, and I respect that.

Insofar as gender roles are concerned, I think back to my childhood and in conformity with the cultural norms of the time, my parents had a patriarchal relationship (my father was the decision-maker and my mother was subservient), which for me was just an unspoken acceptance of what they had learned from their own parents and the society in which they grew

up. However, gender roles were never carved in stone within our house and I recall my father showing me how to fix a plug and telling me "come here let me show you how to do this so that you don't have to wait on a man". I also recall my middle brother baking and frying, whereas my eldest brother would not even lift a knife! I also see my father now, in his old age, often helping my mother and sweeping the house. My husband, an academic and religious scholar, and I have an egalitarian relationship. For example, we adopted a baby (a boy) and had a baby (a girl) at the same time. My husband and I negotiated the roles that we played at that time and for 'night-duty' he would see to the demands of my daughter and I would see to the demands of my son. It is from these unspoken lenses that I view gender and gender roles, and I see gender roles as something not carved in stone, but rather negotiated, changing with times, and transformable.

My reflexive thoughts now take me to the community and the challenges that emerged in conducting this research. I started with the study since its inception in 2011 and through the CBPR community engagement framework, formed a relationship with the community, particularly the research team members. We became like a family and often the relationship boundaries were blurred as I was seen as a friend, counsellor, researcher and mentor to some, and I had to ensure that the boundaries remained clear. This is often difficult and sometimes impedes into one's family time, but they became a part of me as much as I became a part of them. This relationship was tested when I was diagnosed with bone-marrow cancer in 2013 and I had to get chemotherapy and a bone-marrow transplant. It was difficult for me not to be able go to the community because my immune system was compromised. It was also difficult for community members to accept new people, and they tended to constantly compare the new people to me (I used to cook for them every week, which is beyond the role that a researcher should play, but I love cooking and I love giving food to people) and the project might have suffered. CBPR and community engagement requires continuity and the visibility of the researcher.

However, in the case of SCRATCHMAPS, we were a team: the principal investigator, community coordinator and I. This continuity and presence was upheld through my other two colleagues, and was supported by the master's interns who came and went. Community research team members came to visit me at my home and during 2014 when I became well, I returned. Sadly, during 2014, one of the research team members known as the *Protective Panda*

(we all had animal names to signify a strength – mine is *Soaring Eagle*) passed away. Her death was a great loss to the team and to me. I realised then, not only did I lose a friend, but also a mother figure who cared very much about me. The reciprocal nature of the research team relationships was characteristic of this project.

In conducting CBPR, my colleagues and I were confronted with various power issues. It became clearly evident that even though I was an educated coloured woman doing research with a coloured community, my 'colouredness' gave me a certain sense of 'sameness' amongst the community researchers and this created an environment where it was easy to foster co-creation, egalitarianism, and transparancey. With our weekly check-in process, people were given the opportunity to openly express their grievances and it was addressed as required. I was therefore treated as an equal and likewise saw my colleagues in the community as my equals. As a researcher, I also handled the money and had to manage the budget, which also placed me in a position of power in the team. Whilst this could impact my position in the decision-making processes, this power was neutralised through making the budget and all expenses and incomes visible to the team. In fact, during this final year (2015) year, the team was given project money and had to manage the finances for certain events themselves, write up an income and expenses sheet, and reconcile with me on a regular basis. This was a means of capacitating them for the project's sustainability, and capacitating me as financial manager of the project.

Sustainability has been key and has continuously been discussed at various points throughout the different stages of this project. In this regard, the NPO was set up at the community's request (which has particularly been pursued in 2015) where people need to begin to organise and mobilise formally. While important for the sustainability and continuity of the project itself, it is still a work in progress and comes with a different set of challenges. If the community is not skilled enough to establish and run an NPO, the whole project might fall flat. This has been a continuous struggle with on the one hand the community wanting to establish the NPO, and on the other end not being ready to run such an organisation (although one member of the team was skilled in NPO work) (see Lazarus, Taliep et al., 2012). The team has subsequently (during 2015) attended various Community Chest workshops on managing and NPO, thus community capacitation continues.

It is clear from the above that my location did create certain biases but, when weighed against the positive aspects and our attempts to address bias wherever possible, this was not a major limitation in the study. I further believe that my commitment to and involvement in the project was a positive factor from a research point of view.

5.13 Conclusion

This chapter outlined the current study's methodology and the procedures that were followed to achieve the study's aims and objectives. It provided an overview of the research perspective, research design and the phases of this study, which spanned over a period of four years. It gave an overview of the target population and the context in which the study was conducted, and it described the data collection strategies as well as the methods used to ensure reliability and validity. The data sources and instruments employed to collect the data were expounded, including a brief overview of the piloting of these instruments. This was followed by an explanation of the statistical procedures and data analysis frameworks used to analyse the data. The chapter concluded with the ethical considerations taken into account and adhered to in this study. The subsequent chapter illustrates and reports the findings of these analyses.

CHAPTER 6

FINDINGS AND DISCUSSION:

INITIAL COMMUNITY ENGAGEMENT STRATEGY

I believe that the data, which have been painfully collected, should "be the star" in the relationship. By this I mean, the main focus in qualitative research is the data itself, in all its richness, breadth, and depth.

(Chenail, 1995, *Presenting the qualitative report*)

6.1 Introduction

The previous chapter delineated the methodological underpinnings that framed the development of the *Building Bridges* violence prevention intervention that mobilises spiritual capacity and religious assets to promote safety and peace, with a particular focus on promoting positive forms of masculinity. The chapter also presented and elucidated the theories of change that outlined how the processes and components of the intervention will hopefully bring about learning and change. One of this study's key aims was to foreground the community engagement strategy pursued in the planning and development of the aforementioned intervention. In this chapter, I present the key findings of this study by narrating the story of the research preparation process that served as the groundwork to develop the aforementioned intervention, with an emphasis on the application of CBPR principles and values (outlined in chapter three). This includes phases two and three of the research design.

I have chosen to portray my findings in a chronological narrative as this method of writing lends itself to providing insight into programme processes and therefore conducting programme evaluation, especially evaluations done within communities (see Krueger, 2010). A narrative is generally regarded as a story that comprises a temporal ordering of actions and seeks to make sense of or construct something out of those events so as to present the experience of individuals in a manner that is personally and culturally coherent and acceptable (Sandelowski, 1991). In this story, I recount the events, and make visible the meaning and perceptions of the participants using the various data sets described in the methodology chapter.

In order to provide context to the story, I first re-construct the study setting, to allow the reader to revisit with me the locality where the data were brought into being so that the reader can

have a perspective from which to evaluate the reflections and interpretations (see Chenail, 1995). The setting provides the context to the study which, according to Chenail (1995), is vital. Without information on the setting there can be no context and without context for the data, the meaning extracted from the analysis cannot be regarded as significant. To paint the 'bigger picture' of the context, I recount the initial community engagement strategy employed in this study. Next, I narrate the establishment of the local structures within the community. This is followed by an explanation of the research preparation. These three steps comprise phase 1 in this study as outlined in Figure 6.1 below. Phase two (see Figure 6.1 below), represents the sequence and flow of the asset mapping process and the exploration of the key concepts.
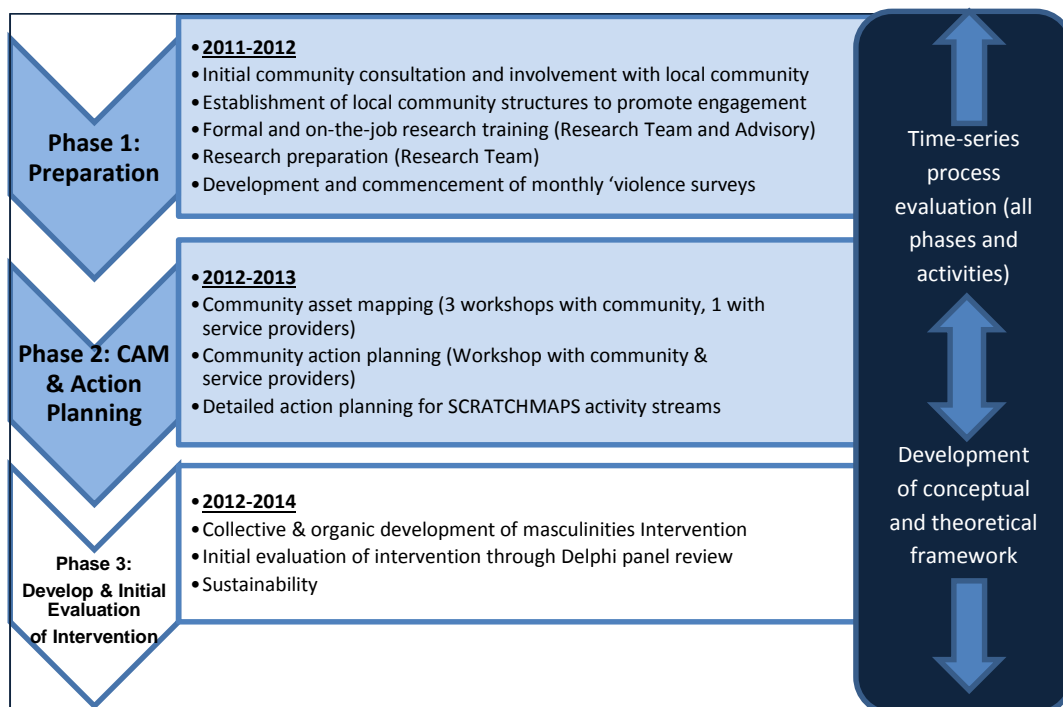
Figure 6.1. **Research phases.**

Phases one and two were underpinned by the following research objective of this doctoral study:

Research Objective 2: *To record and evaluate the research preparation process conducted as the groundwork to develop the violence prevention intervention focused on the promotion of positive masculinity.*

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6.2 Phase 1: Initial Community Engagement

The first phase in this study comprised the initial community engagement strategy which is described in three steps (See Figure 6.2 below), each building sequentially on the former.

Step 1: Understanding Context

1.1 Community Profiling
1.2 Initial Community Consultation and Involvement with Local Community
1.3 Transect Walk
1.4 First Community Stakeholder Meeting

Step 2: Establishing Local Structures

2.1 Establishment of Local Community Structures (Advisory Committee and Research Team)
2.2 Ethics Agreement

Step 3: Research Preparation

3.1 Formal and On-the-job Research Training
3.2 Research Preparation (Research Team)
3.3 Development and Commencement of Violence Survey

Figure 6.2. **Schematic organisation of the storyline: Phase 1.**

Figure 6.2 depicts the temporal ordering of events or the 'storyline' for Phase 1 which follows a narrative logic (recounting the story). The data are arranged in a chronicle-like fashion (the steps), presenting my journey (as a researcher) by plotting the particulars and the different phases in the story from my perspective (see Chenail, 1995).

The first step (Understanding Context) enabled us to learn as much as we could about the community, and it established the study's focus. The second step (Establishing Local Structures) enabled us to lay the foundation for the establishment of a partnership with the community to promote optimal participation, and the third step (Research Preparation) enabled us to empower the community Research Team by providing them with essential research skills.

6.2.1 Step 1: Understanding the context

Stories start with essential background information to set the stage and help the reader understand the context. This background provides the reader with insight into what has transpired before; the actual context, and/or other significant aspects that make the story important (Krueger, 2010). The SCRATCHMAPS story, as mentioned in chapter 1, unfolds in

a low-income, predominantly coloured[6] community situated in Strand, a seaside resort town situated within the Helderberg region at the foot of the Hottentots Holland Mountains in the Western Cape province of South Africa. This community is nestled not far from a famous local tourist attraction, the pristine five kilometres of white sandy beach caressed by the waters of False Bay. The community can be accessed via the main N2 Highway and Beach Road that runs alongside the coast. This pristine setting belies the harsh social reality with which the people of Erijaville contend on a daily basis. Various strategies were pursued to learn as much as possible about the community. In order to obtain a depiction of the demographic context of the community, we developed a community profile prior to making initial contact. This was followed by an initial meeting with a core group of community leaders, a Transect Walk, and a broader community stakeholder meeting.

6.2.1.1 Community profiling.

Prior to conducting research in the community, a community profile was drawn up using secondary data sources as well as drawing from primary sources by conversing with community members (see Taliep, Lazarus, Bulbulia, & Philips, 2011). A community profile is a broad description of the history, residents, demographics, socio-economic conditions, circumstances and resources within a specific geographic area of interest. The community profile enabled us to identify the assets, needs and strengths within the community as well as possible key stakeholders that could play an important role in the success of the research. The following extract taken from the community profile describes the community:

> *According to locals, Erijaville was named after Bishop Eric James, a veteran of the first committee that was established in that community. Many residents of Erijaville started off as squatters, for under the old apartheid Group Areas Act of 1950 they were forcibly evicted from other areas in the Helderberg region. The settlement [known as 'Blikkiesdorp' (Tin Town)] started initially with three families in the early 1960s, which grew rapidly until in 1992 there were approximately 700 informal structures (Development Action Group [DAG], 1997). Today, there are 164 houses in Erijaville, but many houses have backyard shacks which they rent out to people and serve as a means of income in a community where poverty is rife and resources are scarce.*
>
> *Even though there is still a great need for housing in Erijaville, priorities within the community has shifted from housing to social issues. According to the 1997 report by DAG, the shortage of rooms in the houses has brought about a perceived breakdown of family life. The spotlight was on getting the houses built, and hence*

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[6] Coloured is the name given by the previous South African dispensation to an ethnic group of people who are of mixed race.

issues of size, workmanship and building resources were neglected (DAG, 1997). Residents report that there are eight to ten people in their one-bedroom homes. Thus overcrowding and its associated social problems become challenging.

A fact sheet later compiled by the SCRATCHMAPS community research team stated that *"Erijaville consists of 250 households"* (8/8/2012) which includes backyard dwellings. Demographically the majority of residents speak Afrikaans, but due to the influx of refugees, there is a small number of foreign nationals, mostly Somalians, in the area who speak English. In terms of income and trade or profession, the following extracts from the Community Profile indicate that Erijaville is a low-income community and residents work primarily in the building industry or in factories:

> *The majority of males in the area are artisans whilst many women are employed as domestic helpers, or are employed in local factories and during holiday seasons some women clean beachfront toilets. According to key informants, about 80% of residents are currently unemployed … There are no specific population estimates and income data for the community, other than outdated previous income estimates drawn up by Bulbulia (1998) in an overview of the three neighbourhoods initiative in Rusthof (the broader area within which Erijaville is situated) and Nomzamo. These estimates indicate that the majority of the inhabitants (75%) are living at the upper bounds (R1500) of the poverty line.*

This picture has not changed much over the years, as community members highlight that the majority of people are still unemployed.

6.2.1.2 Initial community consultation and involvement with the local community.

Access to the community for this study was initially facilitated by a gatekeeper - an 'insider', familiar with the community and the prevailing dynamics within the community. He provided us with valuable information and advice concerning access decisions (see Glesne, 2006). He set up an initial meeting with a small group of community leaders (n10). Our main aim for this initial meeting was to establish whether the proposed research would be valid for the community, and to obtain their input on the best strategy to engage and involve key stakeholders and the broader community in the project, including various logistics for this process. We provided a brief overview of the projected SCRATCHMAPS study and the intervention design at this meeting and we specifically asked them whether interpersonal violence, with a focus on males, was a relevant issue to investigate within the community. The

following extract from the minutes taken at this meeting indicated the research relevance of the SCRATCHMAPS project:

> *All community members confirmed that violence among young males is a relevant issue that needs to be addressed within their community. Community members highlighted the fact that this is an important study as living in such an environment makes one used to violence and the research will serve as a mirror to reflect reality – what actually happens. Some said that … the research is very relevant if you look at the challenges young people face.* (Core Group minutes 13/5/2011)

This indicates that violence is a key challenge in the community, and as such the need exists to create awareness and intervene in this regard. One community member pointed out that *"this study sounded very appealing and that he is very eager to see what the outcome of the study and the intervention would be"* (Core Group minutes 13/5/2011). Another male participant stressed the importance of establishing the determinants of violence within the community before embarking on any intervention activity and stated that *"you cannot do anything [about violence] unless you know what actually happens [in the community]"* (Core Group minutes 13/5/2011), highlighting the need for sound background data and knowledge about violence. Others reiterated that *"it is very important to get to the root of the problem and the reasons behind delinquent behaviour"* (Core Group minutes 13/5/2011). This informal group discussion served as a guide for making key decisions around engaging the community. Information collected included participants' advice regarding the most appropriate time and date to conduct a transect walk in the community.

6.2.1.3 Transect walk.

Based on the advice of the core group, we (three academic researchers from VIPRU along with the gatekeeper) embarked on the transect walk through the community during the afternoon of 30 May 2011. A transect walk is a participatory method that entails taking a walk with key informants from the community, down a pre-determined route and exploring the characteristics and layout of the area of intervention (Nadu, 2005). We met at the Hearts of Men (HOM) office, a local NGO on the border of Erijaville, where we were met by "*the gatekeeper, who is also a member of HOM, [who] welcomed us warmly"* (Academic Researcher [AR] diary 30/5/2011) and introduced us to members of the organisation. The following diary reflection particularise this encounter:

We started off at the Hearts of Men building - which is really impressive, besides looking good, it also had a warm, welcoming feeling. I liked the drums in particular! While chatting, before starting on our walk, we met a few men (and women). The organisation felt alive. (Principal Investigator [PI] diary 30/5/2011)

We then embarked on our walk and braved typical winter weather (See Figure 6.3 below). It was *"really cold, wet and very windy weather"* (PI diary 30/5/2011) but *"we were well prepared, warm jackets, umbrellas and excitement* (AR diary 30/5/2011).

Figure 6.3. **Initial community engagement: transect walk, stakeholder meeting and local structures**

Our first experience of the community confirmed the overview outlined in the community profile as pondered in the following diary entry:

It looks like it was a typical low socio-economic 'plot and plan' scheme, so all the houses have the same shape and basic size. The plots however are not too small like in other RDP housing areas such as Delft, so homes can be extended and additional structures can, and have been, erected on the same plot ... . (AR diary 30/5/2011)

Most of the homes have backyard dwellings (shacks) (see Figure 6.3 bottom row left) constructed of pieces of wood and corrugated iron, with some using heavy duty plastic as a roof covering, pinned down by bricks or other random objects. The PI agreed that the housing was *"low-socio-economic in nature [but] some houses are in good shape, while others are close to being informal settlement shacks (especially the backyard buildings)"* (PI diary 30/5/2011). Transect walks are embarked on to obtain an understanding of the resources of a

community, the diversity and associated problems, as well as to assess opportunities (Nadu, 2005). Whilst the general appearance of the planning and housing structures was of a sub-economic type and the general environment looked a bit neglected, it was heartening to see the extent of pride that some of the home owners displayed in the care of their properties and their gardens (see Figure 6.3 top row). The two key researchers agreed that *"there [was] clearly some real 'care' and pride evident in many of the houses… and in some of the gardens (especially the vegetable ones)"* (PI diary 30/5/2011); and *"the man cleaning the pavement in front of his house"* (AR diary 30/5/2011). There were a few open spaces, which were a bit dilapidated and neglected, but it was an asset that *"had great potential for community recreational areas"* (AR diary 30/5/2011). In this regard, the PI reflected as follows:

> *It was interesting to see two 'common' spaces in Erijaville: the grass section (where there used to be a market place, and the tarred square where there used to be a netball court, and around which the pastor and many of his family seem to live.* (PI diary 30/5/2011)

Walking through the community gave us as academics the chance to meet the people, introduce ourselves, and gauge their feelings; laying the foundation for building a relationship and trust with the community. It also presented us with the opportunity to *"experience the community"* (AR diary 30/5/2011). The openness and friendliness of the community made us as academics feel welcome; the manner in which they addressed us and the ease with which they openly shared with us (albeit on a superficial level) all made us feel at home and positive that the study and intervention would be welcomed. Our next stride in our community engagement journey was to set up our first broad community and stakeholder meeting.

6.2.1.4 First community stakeholder meeting.

Based on consultation with community members at the first core group meeting, we developed pamphlets, posters and letters to invite people to attend the first community stakeholder meeting. The following extract brings to light the suggestions made:

> *Community members suggested that taking flyers door to door with a brief explanation of the importance of the meeting is the best way to get people involved. They suggested the proposed meeting should be held … on either a Tuesday or Wednesday in the evening after 7pm. They said that on Mondays' people still recover from the weekend. Thursdays are for church services, and on the weekends many residents are not at home; in terms of the appropriate time, residents watch their favourite South African*

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'soapie' (Sewende Laan -7th Avenue) in the evenings, so after seven in the evening is best. (Core Group minutes 13/5/2011)

The above extract highlights that the SCRATCHMAPS project valued the recommendations and by extension practical knowledge of community members to guide our decision making processes. All key sectors relevant to the focus of the project, and community development more broadly, were identified and invited to attend the first stakeholder meeting using multiple strategies as indicated in the following diary entry:

I had a meeting with two key informants within the community to identify the key stakeholders that play an important role within the community of Erijaville. They assisted us in obtaining telephone numbers, e-mail addresses, fax numbers or the physical addresses of individuals and organisations…, especially those involved with young males. I contacted these individuals and organisations in advance by telephone and informed them about the meeting; I then e-mailed or faxed the letters to them. For those who did not have a fax or e-mail, I provided with a letter which was delivered to them by the two key-informants. (AR diary 14/6/2011)

The meeting, which was held in the library at the Rusthoff Primary School, was well attended as indicated by the following journal entry: *"There was a wide representation of interests, organisations, and individuals"* (PI diary 14/6/11*); "All the stakeholders that were invited were either present at the meeting or they sent a representative"* (AR diary 14/6/11). Thirty stakeholders representing diverse sectors, including education, health, community safety, police, justice, correctional services, social development, faith-based and non-governmental organisations (NGOs), as well as a recognised, valued and respected NGO that works with men, namely Hearts of Men, attended the first community stakeholder meeting.

The academic researchers then presented the SCRATCHMAPS presentation (which we prepared in English and Afrikaans), provided some discussion points and opened the floor for questions. The questions that emerged centred on the breadth of the research, whether people would be required to work on the project, and whether the research would be expanded more broadly after completion. One participant wanted to know whether the study would address all of the "social factors that play a role in violence, such as unemployment, socio-economic disparities between the rich and the poor" (AR diary 14/6/11; PI diary 14/6/11). In terms of the

relevance of the research, participants "stated that the project has the endorsement of the entire group present" (AR diary 14/6/2011 and "participants agreed that it is a positive study for the community (AR diary 14/6/2011). One of the academic researchers noted in her diary entry that "All in all, the proposed research project was well received by the community and they felt that it was necessary" (AR diary 14/6/2011).

One participant from the Erijaville community neighbourhood watch remarked that "as a group, they have prayed for this and she believed that the research project and our presence there was an answer to their prayers" (AR-diary 14/6/2011). Involving the community right from the start of the project in decision-making and gaining their approval for the study, ensured research relevance and enhanced participation. Similar observations were reported by others who involved community members from the inception of projects (see Freudenberg, 2001). The meeting ended with the community supporting the establishment of two structures to facilitate community participation.

6.2.2 Step 2: Establishing local structures

In order to facilitate optimal community participation, communication and collaboration within a partnership approach, two community structures (Advisory Committee and Research Team) were established (see visual depiction in Figure 6.3, middle row, left and right). In other projects, the establishment of such structures have proven to solidify CBPR partnerships and enhance collaboration and community participation. For example, the Community Action Against Asthma (CAAA) project in Detroit (Parker et al., 2003), the Centre for Urban Epidemiological Studies (Freudenberg, 2001), the Railton Community Assessment Project (CAP) in the Western Cape (2011), and the Healthy Environments Partnerships in Detroit (Strong et al., 2009).

6.2.2.1 Establishment of the community advisory committee.

As agreed upon in the first community stakeholder meeting, we initiated a process to develop a community Advisory Committee (AC). The following quote demonstrates their approval: "*When asked whether they thought it was important to have an Advisory Committee to guide and steer the research. They responded with a unitary affirmative (yes)*" (PI diary 14/6/2011). Letters were sent to all the stakeholders that were present at the aforementioned meeting, inviting them to either volunteer or nominate one or two people to serve on the AC. The letter highlighted that the nomination process was a democratic process; it outlined the research aims

and objectives and the main tasks to be fulfilled by the AC. We received a number of nominations telephonically and by e-mail and *"all nominations were accepted"* (AC minutes 13/8/11). The minutes of the first AC meeting, attended by 17 members with four apologies, reflect the continuous attempt by the SCRATCHMAPS team to ensure an inclusive process and a balanced representation as far as members were concerned:

> *The open door and open chair policy for these advisory meetings [were highlighted] ... All nominations were accepted but ... [we] had to ensure a balanced representation across different organisations, between males and females, between different faiths, including police and correctional services, the health sector and people from the community itself (including youth). As an adequate balance has yet been achieved, efforts will still be made to obtain balanced representation. All members present were asked to make suggestions for additional people or stakeholders who should be considered for this committee in order to address specific stakeholder gaps, particularly in relation to and including all relevant faiths.* (AC minutes13/8/11)

This extract elucidates the structure of the AC. Membership spanned over a broad spectrum of stakeholders (see Figure 6.3, middle row, left) and diverse faith traditions, including Christianity, Islam, Khoisan and Rastafarianism. The AC had an 'open-door, open-chair' policy which meant that anyone who wished to become a member of the AC could join. After numerous efforts to ensure a balanced representation, *"we filled the gaps in terms of representation of all the stakeholders, except for having more young people on board"* (AC minutes 9/9/2011). It was brought to our attention that *"young people have been invited but they have other commitments (e.g. sports) on Saturdays and could not make it… We have decided to try and fill the gaps by including youth in the research team"* (AR diary 10/9/2011). At the initial AC meeting the following Terms of Reference were presented and accepted by the AC:

> *Finalisation of the initial research process and plan, based on the proposal presented by VIPRU staff members; development and finalisation of the research instruments, based on the initial drafts by VIPRU staff members, ongoing monitoring and development of the research process and plan over the whole period; guidance on and steering of the process of setting up of the SCRATCHMAPS Research Team; ongoing oversight of the SCRATCHMAPS Research Team's work over the whole period; [as well as] guidance on all 'whole community' engagement processes, including meetings and other forms of communication with the Erijaville community.* (AC minutes 13/8/11)

These Terms of Reference clearly outline the role that the AC sought to play in the research project. The AC served as an oversight and approval body that provided guidance, leadership

and presided over all final project decisions. They provided a sense of community to the SCRATCHMAPS team through their active involvement, support and supervision throughout the development of the Building Bridges intervention programme and beyond. The committee met monthly from August 2011 to the end of 2015, as *"it was agreed that meetings will be held at monthly intervals, on the second Saturday of every month unless otherwise indicated"* (AC minutes 13/8/11). The AC was attended regularly by a core group of at least 10-15 members throughout the lifespan of the project, although maintaining this presence was not without its challenges. The meetings were chaired by a local male and female chair and co-chair.

6.2.2.2 Establishment of the community research team.

At the first community stakeholder meeting, *"participants also agreed that a local Research Team should be established to 'do' the research"* (PI diary 14/6/2011). The community Research Team (CRT) members (see Figure 6.3, middle row, right) were recruited through public processes, including household distribution of pamphlets and the dissemination of posters at strategic points in the community. Of the 29 applications received, 18 were local community members who submitted formal applications (letters and CVs), and all went through an interview process with a panel consisting of four advisory members and three academic researchers from VIPRU. Interviewees were rated by the panel on a scale of 1-4 ranging from '*does not meet criteria', 'meets criteria but is not suitable', 'consider as a possible candidate', and 'recommended').* These ratings were documented on newsprint along with age, gender, religion, locality, educational level, and abstemiousness (habits relating to the abuse of substances) to make recommendations and to ensure inclusivity. Regarding the democratic process followed to employ these research team members, one AC member noted that *"this is a very fair and transparent process and it is beautiful to see how it unfolds"* (AC minutes 12/11/11). Another remarked: **"***Our job (as interviewers) was to 'recommend' and not to make the decision ourselves. The advisory [has] to make the final decision at the next meeting"* (AC minutes 12/11/11). This reflects a partnership approach whereby the community was centrally involved in decisions that affect their lives.

The number of selected community researchers (n = 10) was determined by the AC based on information on the research team's tasks and the overall budget available from UNISA, a partner on VIPRU. These ten members were all from the local community, and reflected a combination of youth (n = 4) and 'experience' (n = 6). All of them were unemployed at the

time, indicating that the project provided employment to at least 10 members of the community. The final activity in step two entailed the Ethics Agreement between VIPRU and the community.

6.2.2.3 Ethics agreement.

The purpose of the Ethics Agreement (Appendix K) developed in this study, was to offer a general framework for cooperation between the parties concerned, providing a guideline for the collaborative management of, and engagement around the research project. More specifically, in pursuit of this purpose, the Ethics Agreement aimed to establish and guide the project in Erijaville, Strand. The Ethics Agreement outlined the background and purpose of the project, the terms of collaboration, project approach, ethical considerations, publications and ownership of data, research methodology and research design, proposed timeline and plan of action, financial and legal responsibilities as well as commencement, renewal, termination and amendment issues. After the Ethics Agreement was reviewed with the AC and accepted by them, it was translated into Afrikaans (the dominant and preferred language of the community) and signed by the PI and the two AC chairpersons. This process was reflected on in the following diary entry:

> *We had a good, simple process of approving the Ethics Agreement document, which was presented in both English and Afrikaans (for ethical reasons). So all we need to do now is finalise the documents, in both languages, and get them signed at the next meeting.* (PI diary 8/10/2011)

The signing of the Ethics Agreement by the chair and co-chair of the AC and the PI occurred on 12 November 2011. Reflecting on this happening, one academic researcher noted: *"This was quite a memorable occasion … It felt like the final step in cementing the partnership between MRC/UNISA and the Erijaville community by making the SCRATCHMAPS agreement official"* (AR diary 12/11/2011). Following the signing of the Ethics Agreement through formal university processes, we embarked on the research preparation step.

6.2.3 Step 3: Research preparation

The research preparation step involved the groundwork or capacity building protocol to prepare the community research team (RT) and provide them with the necessary skills to conduct research and the specific information they needed to obtain a clear idea of what was expected from them and what they could expect in this process.

6.2.3.1 Formal and on-the job research training.

Various formal and informal capacity building opportunities were created to empower the RT with research capacitation skills as well as project management skills and numerous personal development skills. Initial research training occurred over a period of two days in November 2011. The training was divided into five sessions that covered the following core topics: overview of the project, an introduction to research, community-based participatory research, ethical guidelines in research, specific data collection methods, data collection instruments, sampling, and making sense of the data (i.e., data analysis) and how to present and share findings. The first session also included the interactive establishment of a code of conduct for training and meetings as well as participants' expectations for the two-day training. In order to facilitate the continuous empowerment of the research team, members were given an opportunity to brainstorm the areas they felt they needed to develop by drawing up a personal development plan.

> *A list of tasks, skills and roles needed for the work of the Research Team was brainstormed. Each person then drew [a picture of] themselves on newsprint, and then wrote down (using pot-its') (a) their strengths, and (b) areas of improvement wished for (referring to a list referred to above). ... [These] individual 'Personal Development Plans' would be developed and monitored throughout the year.* (RT minutes 24/2/2012)

Drawing on the strengths and needs of the research team members, they were allocated to particular research activities for the next few months. To ensure that the research team was well prepared for conducting the tasks, training was often repeated as is evident in the following reflection:

> *The piloting preparation went well, with [name] taking the lead in helping the team prepare for the interview and survey methods. This is the second time they have gone through practical preparation. I must say, that I was very impressed to see how the team members performed in this regard.* (PI diary 9 March 2012)

Various skills were acquired by the research team throughout the project's lifespan, including developing and piloting data collection instruments, practical training for conducting interviews, focus group discussions, violence survey data collection, data capturing, quantitative and qualitative data analysis methodologies, conflict management, presentation skills, workshop facilitation skills, project management, tax education, community development, and local action planning, amongst others. The following extracts were taken from different research team members' diary entries:

"Our research team started with a computer course at Loretto Creche" (16/11/2012); *"The computer class was for me a good experience. I had learnt a lot about things I really did not know"* (16/11/2012); *"Quality assurance is being done on the survey and some have handed in [name]. The data capturing is on track and going well"* (28/8/2013); *"The community development workshop [was held] on the 12/04/13 … I did learn about community building"* (12 April 2013); and *"I learnt about the analysis steps. For homework I need to do the analysis".* (28/6/2013)

6.2.3.2 Development and commencement of the violence survey.

The violence surveillance process formed part of the broader project goals of promoting safety and peace within the community. In the absence of reliable data on the violent incidents specific to the local community of interest, it was agreed that a violence surveillance system would give us a clear picture of the demographics and nature of violence and the extent and distribution of violence, and enable us to monitor safety and peace within the community. At the same time, this would establish whether the need for intervening in this sphere was justified or not and as such, scientifically substantiate the relevance of the research focus in the community. As outlined in the methodology chapter, the survey tool was constructed by academic researchers as well as community researchers and was piloted within the community. The purpose of the survey and data collection strategy is outlined in the following quote: *"[To] be used with specific key informants ... to keep a regular check of violence incidents in Erijaville"* (RT Minutes 16/3/2012).

Various formal capacity building workshops were conducted during 2012 and 2013 to capacitate the community research team on the development, piloting, collection and analysis of data concerning the violence survey. The following extract from the research team meeting minutes shed light on one of these sessions:

> *The Afrikaans translation of instruments, which was done in three small groups, went very well. This exercise 'proved' that the inclusion of local community researchers in the finalisation of instruments is very useful, if not essential, as the translation process highlighted a number of factors relating to the validity of the instruments.* (RT Minutes 16/3/2012)

Four members of the Research Team were allocated to specific zones in Erijaville to ensure that the whole community was covered. This demarcation was recorded in the following extract from the community RT minutes:

The community was divided into four blocks: (1) From Rusthof to Fredericks Street, (2) from Fredericks to Tooi and Grootboom Streets, (3) From Tooi and Grootboom to Mbadu and Titus Streets, and (4) From Jacobs, Mbado and Titus to Forbes Street. One data collector was assigned to a block, but they will work together in twos for their own safety and to avoid duplication and challenges. We worked through the survey tool again, so that data collectors are certain how to complete the tool. (RT minutes 20/4/2012)

Once each questionnaire was completed, it was handed over to another research team member who then had to do a quality check of the data. During 2013 two formal training workshops were held where academic researchers in the team provided training on capturing data from hard-copy surveys onto an electronic template. After participating in training, the research team helped to capture the data on an electronic template.

The results of the violence surveillance within the community indicate that interpersonal violence is a major problem, especially among young males between the ages of 23-35. The following table (Table 6.1) delineates the various categories of violence that occurred in the community during 2012 and 2013. Data for 2012 were only collected for the period March to December, as the instrument was in the development and piloting phase during the first quarter with data for March collected, retrospectively.

The results tabulated in Table 6.1 reveal that interpersonal violence is a serious problem in the community. Of the 165 cases during 2012 for which the type of violence was available, *common assault* emerged as the leading type of violence (n = 51, 30.7%). The same was found for 2013 *(*n = 96, 42.5%), with 2013 showing a notable increase (although data were not collected for the period from January to February 2012). Closely linked to this, *assault with serious injury* emerged as the second leading type of violent crime for both 2012 (n = 46, 27.7%) and 2013 (n = 61, 27%). *Domestic violence* also emerged as highly prevalent, constituting 20. 5% (n = 34) of all cases in 2012 and 23% in 2013 (n = 52). The *attempted murder* rate dropped by half from 2012 (n = 6, 3.6%) to 2013 (n = 3, 1.3%). The total *murder* rate (n = 1) for Erijaville appears relatively low for 2012 but increased for 2013 (n = 4).

Table 6.1

Type of Violence

Type of Violence	March – Dec 2012		Jan – Dec 2013	
	Frequency	Percentage	Frequency	Percentage
Murder	1	0.6	4	1.8
Attempted Murder	6	3.6	3	1.3
Common Assault	51	30.7	96	42.5
Assault with Serious Injury	46	27.7	61	27
Robbery with Aggravated Circumstances	6	3.6	2	.9
Domestic Violence	34	20.5	52	23
Child Abuse and Neglect	3	1.8	1	.4
Youth Abuse and Neglect	1	0.6	1	.4
Suicide	2	1.2	0	0
Intimate Partner Violence	19	11.4	27	11.9
Attempted Rape	1	0.6	0	0
Rape	0	0	0	0
Gang Violence	0	0	0	0
Xenophobic Attacks	2	1.2	0	0
Bullying	11	6.6	16	7.1
Other	7	4.2	4	1.8

If one compares these findings to the total murder rate for the whole Strand area (n = 10 per 100 000 of the population for April 2012 − March 2013; n = 13 for April 2013 to March 2014) (SAPS, 2014), the rate is quite high for 2013, even though the time period differs slightly. The same can be said when comparing the results above with SAPS statistics for the broader Strand area apropos common assault (n = 376; n= 444) and assault with intent to inflict grievous bodily harm (n = 142; n = 168) for the same period (SAPS, 2014). Notably, there has been an increase in incidents reported in the SAPS statistics for all the types of violence compared here, as well as in the community with the exception of attempted murder, which shows a decrease in both sources.

A key focus of the study was on males and masculinities. It was, thus, important for us to determine whether interpersonal violence was indeed a problem for young males within the

community. The following figure disaggregates the characteristics of the perpetrators in terms of sex, race, employment status and age.
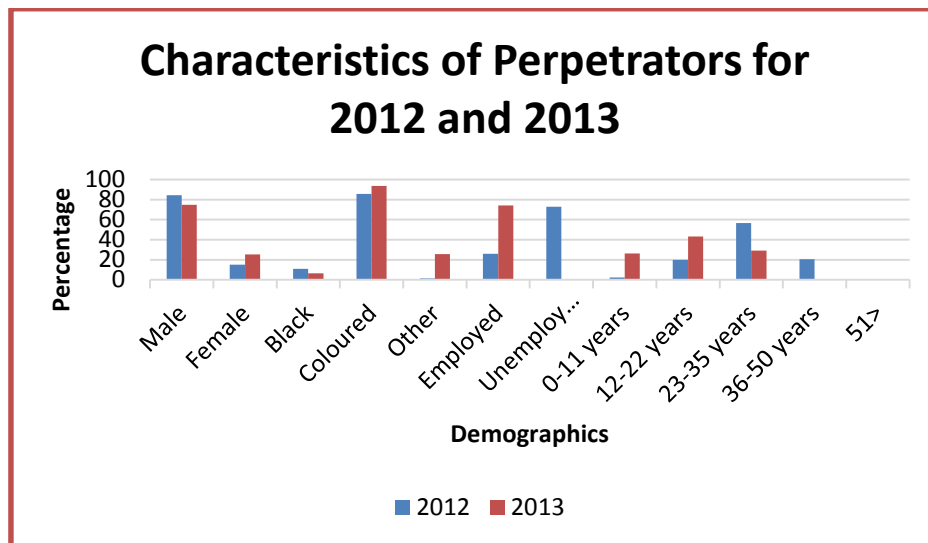
Figure 6.4. **Characteristics of perpetrators for 2012** *(n = 166)* **and 2013** *(n = 281).*

Figure 6.4 above indicates that of the 166 cases in 2012 for which gender information was known, more than three quarters of perpetrators were male (n =140, 84.3%) and were aged between 23 and 35 years (n = 116, 43.28%). Similarly, of the 281 recorded incidents in 2013, for which sex data was known, the vast majority were also male (n = 202, 74.81%). Consistent with the demographic profile of the community, the greater majority of perpetrators were classified as coloured in both 2012 (n = 142, 85.5%) and 2013 (n = 251, 93.66%).

Unemployment, generally known to be a contributory factor to violence perpetration (see Butchart, 2004; Sethi et al., 2010), appears to also play a major role in the occurrence of violence within this community, as the majority of perpetrators were unemployed for both 2012 (n = 121, 72.9%) and 2013 (n = 202, 74.26%).

It is clear from the above that violence is indeed a social challenge for this community, and the characteristics of the perpetrators are consistent with international and national trends, i.e., being male and young (see Seedat et al., 2009; Sethi et al., 2010). This highlights not only the need for intervening in this regard within the community, but also substantiates the need identified by the community and the focus of the project.

6.3 Phase Two: Community Asset Mapping and Action Planning

In line with one of the key values of CBPR (to build on strengths and resources within the community), the study included three asset mapping workshops with community members and one with service providers as well as an action planning workshop. This was followed by an exploration of the key concepts in this study (spiritual capacity and religious assets, masculinities and safety and peace). Figure 6.5 below outlines the community asset mapping and action planning phase of the project.

PHASE TWO: COMMUNITY ASSET MAPPING AND
ACTION PLANNING (May 2012 – June 2013)

Step 4: Asset Mapping

4.1 Community Asset Mapping
    Workshops
4.2 Service Provider Asset Mapping
    Workshop
4.4 Data analysis and reports

Step 5: Exploring Key Concepts

5.1 Focus Group Discussions (FGDs)
5.1.1 Development of FGDs
5.1.2 Training for FGDs
5.1.3 Conducting FGDs: Key
      Concepts (Spiritual Capacity
      and Religious Assets;
      Masculinities and Safety and
      Peace)

Figure 6.5. **Schematic   organisation of the storyline: Phase 2.**

6.3.1   Step 4: Asset mapping

The project is rooted in a positive approach and, therefore, centres on what people have and not what they lack. It focuses on strengths, assets and resources that can be mobilised to foster community development. *Community asset mapping* is a specific methodology utilised to present communities with an opportunity to recognise and leverage existing strengths and resources (Cutts et al., 2015; Kramer et al., 2012; Minkler & Hancock, 2008). The participatory process of asset mapping serves as a starting point, or 'spring-board' to actively engage the community in the process of community development. Evidence indicates that community asset mapping is an effective method to become aware of the frequently unrecognised wealth of assets within communities, and has contributed to a growing interest in community research and action, particularly in low- and middle-income countries (Kramer et al., 2011; Kramer et al., 2012).

Figure 6.6 below provides an overview of the asset mapping process used in this study, and delineates the various asset mapping workshops conducted with community and service providers as well as the action planning workshop (discussed in Chapter 7).
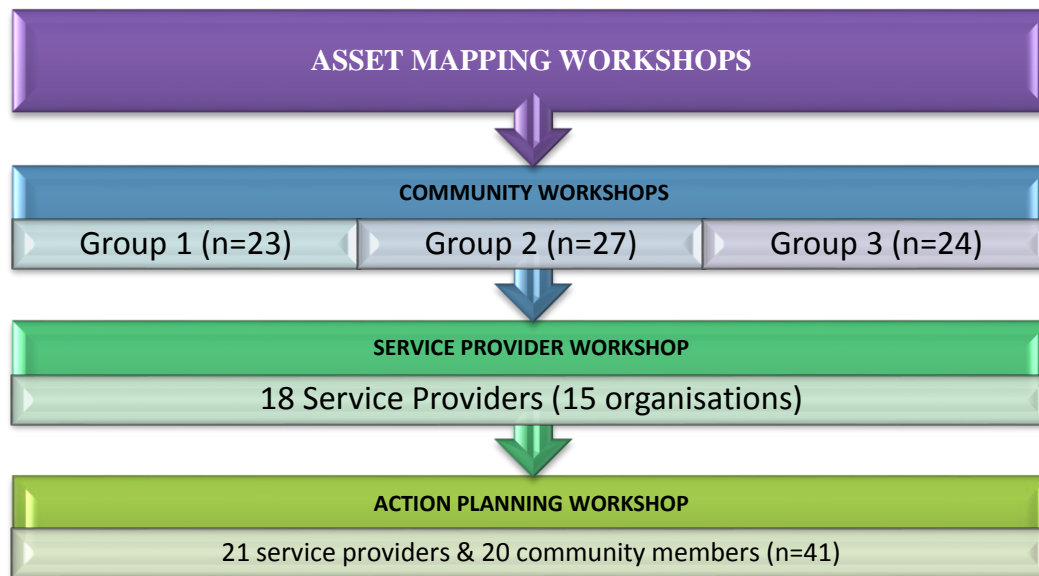
Figure 6.6. **Overview of the asset mapping process.**

The overall aim of this process was to map both tangible and intangible community assets and resources that community members regard as central strengths in their community. These resources refer to individual skills, talents and abilities as well as organisational resources within the community or that provide services to the community. The aims and principles of the asset mapping process used were the following: (1) to promote general community development, and more specifically, safety and peace; (2) to work within a participatory approach, fostering community ownership and action; (3) to focus on human capacity and assets (particularly spiritual and religious strengths and resources), recognizing that important assets lie in networks and relationships; (4) to make community assets visible for the community and other relevant stakeholders; (5) to promote leadership development and engagement; (6) to create new theoretical understandings 'from the ground up', around key concepts such as safety, peace, religion, spirituality, and generative masculinities, and (7) to contribute to the development of creative community research methods (Cutts et al., 2015; Kramer et al., 2011; Kramer et al., 2012; Lazarus et al., 2014).

6.3.2   Community asset mapping workshops

As indicated in Figure 6.6 above, three asset mapping workshops were held in Erijaville on 5 May, 12 May and 22 May 2012 with 74 community members in total and an almost equal amount of males (n = 36) and females (n = 38). The majority of participants were within the age group of 36 to 55 years (n = 34) and a significant number of participants (n = 33) were within the age range of 15 to 35 years. Figure 6.7 below provides a visual depiction of the community asset mapping story.

Figure 6.7. **Community asset mapping workshops.**

The community research team was centrally involved in the preparation and implementation of the community asset mapping workshops as well as the data collected and analysed through this strategy. The research team put up posters and handed out pamphlets and personally invited members of the community. Getting community members to participate was a key challenge during this phase, and every effort was made to ensure that we obtained a reasonably representative sample from the community. Prior to the first asset mapping workshops, the SCRATCHMAPS team (academic and community researchers) had a trial run on the workshop and together prepared all of the necessary logistics for the workshop.

Once the data were collected, it was collectively analysed by the research team. The following extract explains this process:

The team meeting focused on analysing the data from the community asset mapping workshops. The team were divided into three groups to deal with each of the community asset mapping workshops held in May. They then collectively analysed the data – from the newsprints and from the notes taken by various people in the team during the workshops. This was such a good example ... of community researchers learning and doing both manual quantitative and qualitative analysis. It revealed to me, again, that community members are very capable of such activities, despite the 'traditional' view that only academic researchers should take care of this step of the research process. [Name] played a key role in managing this process and in pulling the data together on one of the computers. This triangulated data was then shared with everyone later – through powerpoint. (PI diary 1/6/2012)

Based on the findings from the community asset mapping workshops (CAM), I will now provide a detailed description of the community asset mapping 'story' in Erijaville, which aligns with the various activities in the asset mapping workshops. The story is told under the following main headings: Mapping community boundaries; Mapping safe and unsafe spaces; Factors that work against and factors that promote safety and peace in Erijaville; Mobilising spiritual capacity and religious assets to promote safety and peace, and Promoting positive forms of masculinity to create safety and peace.

6.3.2.1 Mapping community boundaries.

The first exercise, the Mapping exercise, located the rest of the workshop in the real life context of the community; provided insights into community life that served as background for the following exercises; and elicited perceptions regarding existing community assets. Participants were first asked to map the boundaries of Erijaville as a community (see Figure 6.7 above). Participants identified Erijaville as a community born out of the oldest squatter camp in the area (32 years). When asked where Erijaville was situated, the majority agreed that Erijaville is situated between Rusthof and Gustrow. It stretches from 5th Street to 9th Street and Rusthof Street to Forbes Street.

6.3.2.2 Mapping safe and unsafe spaces.

Next, participants were divided into small groups and asked to draw a map of Erijaville, including all main features, safe and unsafe spaces, and community assets/resources (see Figure 6.7 above). An analysis of all the maps drawn, in all three community workshops, highlighted various 'unsafe spaces'. The most unsafe areas identified by participants were the drug 'hot spots' and 'shebeens' (informal liquor outlets) in the community. The awareness (or otherwise) of the extent of these hot spots differed from workshop to workshop, with the first group

identifying 27 such hot spots as opposed to two in the second workshop and five in the third workshop. One of the reasons cited for classifying a particular area as a 'hot spot' was "*because there are many young girls and boys who sell drugs for a living at this place*". The women were particularly vocal about the drug 'hot spots' and 'shebeens' highlighting the many 'hot spots' and drug houses. The presence of, and exposure to drugs and alcohol within a community have been identified as key risks for violence (Butchart et al., 2004; Sethi et al., 2006).

The lack of adequate community infrastructure was linked to the lack of safety in Erijaville. The lack of infrastructure and resources, alongside the community disorganisation has been identified as contributory factors to violence (Sethi et al., 2010). In Erijaville, this included lack of lighting, good streets, garbage dumping, and generally a lack of safe spaces for extramural activities (for all ages, but for youth in particular). Participants in all of the workshops noted that the soccer field and local park was especially unsafe for children as it had no fence and drug peddling often occurred at the site. Other danger zones identified by participants included areas where street racing occurred, a dilapidated netball court with many potholes, and gambling spots. The presence of young people loitering on street corners was also regarded as an unsafe community feature. Whilst some participants mentioned that there were gangs in Erijaville, others disagreed, saying that there are just one or two groups of young men who loiter on corners – suggesting particular perceptions of what constitutes 'gangsterism'.

Many participants stressed that the absence of a committee or organisation in Erijaville was a problem for the community, and highlighted the need to re-establish such a committee. This was related to the lack of a central information point, as several participants noted the lack of a place to share community information (which is currently being shared around the 'mobiles' – or shops) which the young people in particular brought to our attention. In this regard, young male participants highlighted that they do not get information, there is a lack of education, the school drop-out rate is high, and unemployment is high.

In terms of assets and 'safe spaces,' an analysis of all of the maps drawn in the three CAM workshops revealed various tangible community assets (see Table 6.2 below).

Table 6.2

Community Members' Views of Safe Spaces in Erijaville

SAFE SPACES	Workshop 1 5/5/12	Workshop 2 12/5/12	Workshop 3 22/5/12
Churches	10	2	4
Mobiles	8	3	10
Soup Kitchen	1	1	1
Barber Shop	1		1
Neighbourhood Watch	1	1	
Mechanic	1		
BADISA	1		
Public Transport	1		
Schools	1		
Sport Field	1		
Park	1		
Take Aways		1	
Loretto Cresche		1	
Absolom Street			1
Juries Street (clean)			1
Elders/Grandmothers	In discussion during workshops		

As indicated in Table 6.2 above, churches in particular were linked to safety by many workshop participants (n = 16) (although possibly influenced by the fact that the workshops were being run in a church space). However, during the discussions, female participants particularly noted that there were many churches in this small area, but some emphasised that these churches did not reach out adequately to the surrounding community, thus highlighting the need for more active involvement of religious institutions. The neighbourhood watch was identified as an asset in two of the workshops, but the older men seemed particularly concerned with the local neighbourhood watch. They wanted to know why the neighbourhood watch was currently inactive (which created some tension in the group, as there was some history around different neighbourhood watch groups in the same small community, some of whose members were taking part in the different community workshops).

Other key structures (see Table 6.2 above) or groups identified as creating safety in the community included the following: mobile shops (in relation to their function as a communal gathering space and providing a service to the community, but also identified as an unsafe aspect at other times); the sports field or park (also seen, by some, as unsafe); local schools,

barber shops, local mechanic shops, Loreto Crèche (which some participants maintain does not have space for Erijaville children), the existence of a soup kitchen, run by one community member, and contributions by some specific people and organisations in the community. In the discussion that ensued at the end of this activity, some participants remarked that the elders in the community are also an asset as they talk with and help the youth. It was noted that grandmothers commonly look after children in the community and keep them safe when their parents are out working.

6.3.2.3 Factors that work against and factors that promote safety and peace in Erijaviile.

The objective of the next exercise was to obtain a participant driven list of the factors that impact peace and safety promotion, and to have a reflective discussion on the significance of these factors for the participants (see Figure 6.7, bottom row). The most common factors identified by participants that work against safety and peace in Erijaville were substance abuse, unemployment, and violence.

(1) **Substance abuse***.* One participant, who admitted to peddling drugs, said that *"drugs give work"*. It was for him merely a means to an end because he needed to feed his family. He said that if he could find a job, he would stop selling drugs immediately (this participant subsequently stopped peddling and relocated to a different area). Participants mentioned that government and NGO structures helped with substance abuse but that it was a long and tedious process to get youngsters into the programme. It was also noted that substance abuse programmes tended to work on short-term detox, and did not address longer-term issues related to substance abuse.

(2) **Unemployment.** Unemployment was the second most common factor identified. There were many identified gender dynamics in this conversation. Some of the women remarked that they had to work because men do not *"get up and search for work"* and that men *"get into trouble when they don't work"*. It was noted that in this community, men were traditionally employed and skilled in the construction industry, but that it was currently difficult to find work in that sector. Participants noted that having to be supported by their wives (in a culture in which the male role is to support his family) and to stay at home caused great stress in the individual and in the home. Some

participants argued that the lack of access to work was because the people do not get information on available work because there was no committee in Erijaville, or no central 'information board'. It was noted, however, that a main concern was that there was little work available in general for the young people of the community who are generally unskilled and poorly educated.

(3) Violence. Violence was the third most frequent 'risk factor' identified. The participants were quick to stress that these key factors were related to each other – unemployment lead to drugs which leads to violence, or as a participant remarked: *"violence emerges out of drugs and unemployment"*. The link between unemployment and violence has been identified by others (see Butchart et al., 2004; Sethi et al., 2010). The literature indicates a complex relationship between violence, alcohol and substance abuse. Valdez, Kaplan and Curtis (2007) found poverty to be a mediator between substance use and violent crime among male arrestees. They also found self-reported alcohol abuse to have a stronger relationship with violent crime than with substance abuse. Alcohol has been found to have the strongest relationship with violence among all substances in an Idaho study, with approximately 42.7% of all cases of intimate partner violence involving alcohol or other drugs (Idaho Incident Reporting System, 2010).

This discussion also highlighted some negative reactions towards the police, particularly with regard to communication and respect. Some participants mentioned that the police were rude, and sometimes resorted to physical assault (described as smacking). They also said that police response was very slow, that they needed to be more visible, and that there should be a police mobile unit in the area. There was some discussion on police corruption, which was seen as rife in the area (although this conversation might have been limited in some of the workshops by the presence of the police-community coordinator who was part of the research advisory team). There were clear signs of distrust of the police and the neighbourhood watch from different community members. Some of the young people said that they did not join or provide information to the neighbourhood watch as they feared being targeted or getting into trouble for "telling". It was agreed, however, that the neighbourhood watch did help as they made the community safer.

Other key factors that were commonly identified in the CAM were the following: lack of amenities, broken families, lack of values, and lack of education. Whilst it is important to note

the factors that act against safety and peace, the main focus of this community asset mapping was on positive factors, thus the emphasis was on identifying factors that promote safety and peace in Erijaville. However, the identification of factors that work against safety and peace in the community highlighted the need to address such factors in the promotion of safety and peace, as espoused by Lazarus, Taliep et al. (2014) and others (Kramer et al. 2012; Kretzman & McKnight, 1993; Schlossberg, 1998). Participants felt that peace was a precursor to safety and mentioned that *"when there is peace you would feel safe"*.

The key factors identified in the three community asset mapping workshops that contribute to peace and safety, are outlined in Table 6.3 below. Table 6.3 directs attention to community cohesion (especially respect, love, working together and unity) that was considered to be the most important factors contributing to peace and safety in Erijaville. These findings correspond with Goodman's (2012) suggestions for fostering a culture of peace, which includes positive values, solidarity and principles of respect. This was followed by employment as a key protective factor for safety and peace, but which participants highlighted was a key challenge for men since employment opportunities were scarce for this predominantly artisan community.

Table *6.3*

Community Members' Views of Factors that Contribute to Safety and Peace in Erijaville

FACTOR	WORKSHOP 1 05/05/2012	WORKSHOP 2 12/05/12	WORKSHOP 3 22/05/12	TOTAL
1. Community Cohesion (Respect/love/working together/unity)	10	8	4	**22**
2. Employment	0	4	15	**19**
3. Police/Neighbourhood Watch	9	8	2	**17**
4. Religion/Churches/ Worship	9	2	1	**12**
5. Sport	1		5	**6**
6. Education	0	4	1	**5**
7. Housing	0	3	1	**4**
8. Amenities (Advice office, Committee, Hall, Fire station)			4	**4**
9. Awareness campaigns	3	1		**4**
10. Family	0	3		**3**
11. Workshops	0	2	1	**3**
12. Welfare/Feeding			3	**3**
13. Identity	2			**2**
14. Health	2			**2**
15. Family values	2			**2**
16. Activities	0	2		**2**

17. Keeping community clean			2	**2**
18. Celebrating life	1			**1**
19. Hope			1	**1**
20. Vision	1			**1**
21. Responsibility	1			**1**
22. Honesty	1			**1**
23. Reaching out to youth			1	**1**
24. Soup Kitchen			1	**1**
25. Government involvement	1			**1**

What emerged from this activity was the central value that has been placed on various spiritual or universal values and conditions relating to community cohesion, and the role of religious assets and spiritual capacity to achieve it. Tangible religious assets identified in the mapping included religion, church and worship. Most of the 'religious assets' identified as important for promoting safety and peace were intangible , and were, therefore related to what we are calling 'spiritual capacity' as proposed by Cochrane et al. (2015) (see Chapter 2 and 4). These include attributes such as hope, a sense of identity, and celebrating life. This is an important finding for this research. In particular, the role of instilling positive values (particularly respect) was highlighted by many, and developing a positive mindset, which many believe will result in positive behaviour. Cochrane et al. (2015) link spiritual capacity with respect, regard for the self and others, and mindfulness. In this regard, participants also identified tolerance and respect for different religions; different religions working for safety and peace together and promoting community cohesion as important.

Other factors considered as important contributors to safety and peace in Erijaville were the police and neighbourhood watch, infrastructure, educational activities, community activities (e.g., sport), family, and social services (e.g., welfare, soup kitchen). Also important is the emphasis on both people and structures in this set of findings.

During the discussion, one participant mentioned that a safe and peaceful community would be *"crime free – no mugging"* in other words free from crime and violence. Others were very much concerned about the link between drugs and safety and peace promotion, and noted that a safe community would have *"no hot spots"* (meaning places where there are frequent drug peddling), so there was a need to *"root out drugs"* and *"find out why children used drugs ... what [was] lacking?"* in order for the community to be a safer place. They suggested that there was a need to *"talk about it ... the curse (drugs) ... because change comes if we take*

responsibility, otherwise the community suffers ... If someone around you uses, you suffer". Participants also noted that neighbourhood characteristics contributed to peace and safety and highlighted the need for *"more trees, [amenities such as] a community hall, and a safer park"*. These findings were important in the context of developing the intervention with a key focus on preventing violence. For example, the community voice repeatedly emerged through their reiteration of the need to focus on substance abuse.

6.3.2.4 Mobilising spiritual capacity and religious assets to promote safety and peace.

Next, participants were asked to identify the two most important ways that religion or spirituality contributes to peace and safety in their community. This was followed by a discussion concerning what was meant by the various factors that they had identified. The key findings of the ranking exercise from the three asset mapping workshops are presented in Figure 6.8 below.
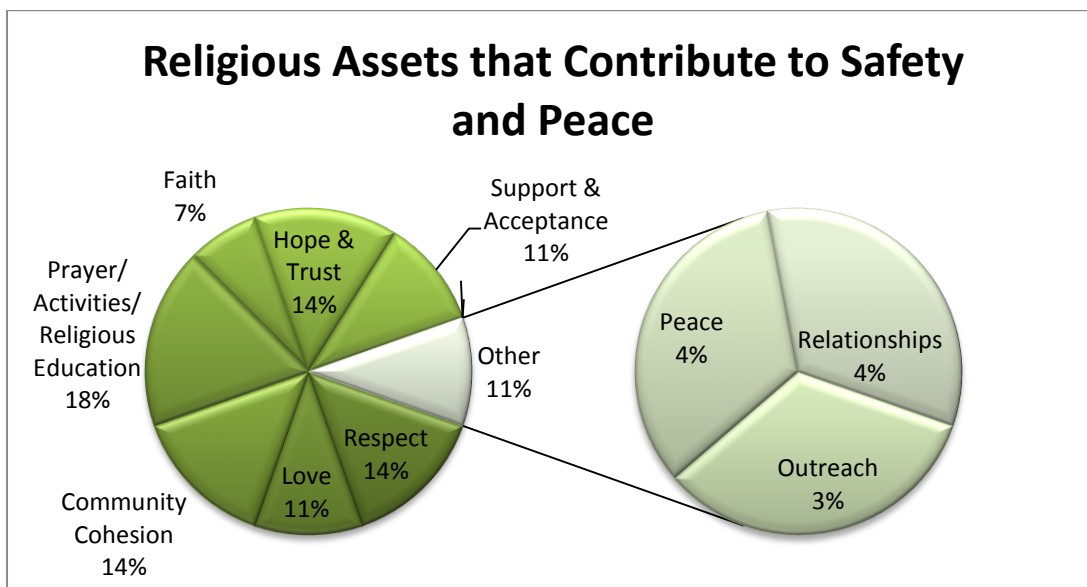
Figure 6.8. **Community views on religious assets that contribute to safety and peace in Erijaville.**

From Figure 6.8 above, it is clear that the identified religious assets that contribute to safety and peace are mostly intangible aspects such as respect, love, faith, trust, hope and peace. Respect was highlighted as a very important characteristic in this regard– respect for the young, old, different races and religions. Participants emphasised that the Bible says that they should respect everyone. Participants said that we should respect all people and religious beliefs and

not put a label on spirituality. One participant stated: *"What is inside a person is what must grow, to establish the spiritual levels, so that we can plough back into the community"*.

Coming together, community cohesion, support, activities, relationships and prayer are all relational and collective factors that speak to community cohesion, which may be both tangible and intangible. Religion, some said, is a personal thing, and room must be created to incorporate all faith traditions and spiritualities as indicated in the following quotes: *"People with differing spiritualties' should be accommodated"* and *"Other faith denominations also help in the community [for example], Muslim groups help by handing out food and soup on a weekly basis…"*. Thus, an interfaith framework was suggested for promoting peace and safety.

Another important aspect that was emphasised was hope, including hope for the future. As one person said, *"Whilst hope is something which you cannot see, it is important"*. Participants highlighted that although churches bring people together, they should work more together, and should focus particularly on youth. Churches are important because, as one person said, churches *"make people feel safe, change people's lives and help people"*.

It was suggested that youth camps be offered as one way of providing opportunities to talk about sex and drugs. One participant mentioned that he used to use drugs and then he started to pray. He said that, *"Even the drug user is looking for God"*. As discussed in Chapter 2 and 4, spirituality and religion have been identified as important resources for violence prevention (Amos, 2010; Britto et al.; 2014; Little, 2006; Longwood et al., 2004). Religion and spirituality can serve as positive resources by promoting pro-social values and norms and instilling a sense of purpose and hope through religious and community events, including rituals and ceremonies, pastoral counselling, provision of safe spaces, and the facilitation of dialogue across sectors.

The next activity in the community asset mapping workshops explored the views of community members on masculinity and, in particular, the role of positive forms of masculinity in promoting safety and peace. The evaluation of this discussion will be picked up later in the results of the focus group discussion on masculinities.

6.3.3 Service provider asset mapping workshop

The service provider asset mapping workshop, held on 7 June 2012, was attended by 18 service providers from 15 different sectors including various police, correctional services, the

Department of Justice, the Department of Housing, Rape Crisis, local NGOs and local religious organisations. Regarding the turnout for the workshop, one of the research team members noted in his diary that there was *"a large number of participants in the library hall -more than [he] expected for service providers"* (Research Team [RT] Diary, 7/6/2012). The service provider workshop followed the same logic as the community workshops, but additional information on the historical developments; service provision and collaboration in Erijaville were explored with service providers (and through facilitation, balanced this against what had already been found in the community workshops).

The Service Provider asset mapping 'story' is told under the following main headings: A historical perspective of Erijaville, Factors that work against and promote peace and safety in Erijaville, Exploring masculinities and spiritual capacity and religious assets, Organisational networks and relationships in Erijaville, Characteristics of good practice, Towards local action in Erijaville, Workshop evaluations, and Conclusion. Figure 6.9 below depicts the service provider asset mapping story.

Figure 6.9. **Service provider asset mapping workshop.**

6.3.3.1 A historical perspective on Erijaville.

This exercise's objective was to gain a deeper appreciation of the historical trends and social constraints as well as to introduce the stories of organisations so that they could appreciate each

other. In order to make a time line and time trends analysis, participants were asked to write down key organisations or events on post-it notes, and then to stick the note in the appropriate block in a previously prepared timeline (see Figure 6.9 top left).

Next, participants were given the opportunity to reflect on the causes and effects of certain events and their wider relationships. A history of the development of Erijaville was created in the discussion. As can be seen in the following quote from the asset mapping process notes, the workshop discussion drew attention to the damage of the past, particularly in relation to the effects of apartheid, and the resultant trauma that many people feel they still causes suffering.

> *'Blikkiesdorp', the name originally given to this community, was the only squatter camp in the Western Cape where inhabitants paid rent and people were locked out of their shacks/homes for non-payment. The term 'Blikkiesdorp' had many negative connotations of poverty, violence and humiliation attached to it. This left negative effects on children who grew up in that community. It was noted that adults of today come from that background and walk around with the wounds of that time.*

Adults who grew up in and around 'Blikkiesdorp' still hurt and feel damaged. They very clearly indicated a need for healing for themselves and for the young people in the community. One could hear from their stories that the historical traumas of apartheid had left an indelible mark on their well-being. One of the religious leaders present said that *"whilst one's past is in the past, it is also your future"* highlighting how we carry our past 'baggage' into our current lives. Participants mentioned that a dark cloud hovered over the children of Erijaville. One participant mentioned that *"all that the community see is crime and drugs… and it is hard to change from negative to positive"*. Participants highlighted that we needed to involve young people. One religious leader said that *"young people sit with a dark cloud and are tomorrow's future – so we need to get young people involved"*.

Participants emphasised that the negative image of police that currently prevailed in the community could be traced back to the violence of the early morning raids during apartheid, and that the police were used as watchdogs to enforce certain laws. One participant remarked that the hostile apartheid police led to *"hostile manhood"*. With regard to men and violence, one participant said the following:

> *Not all men are perpetrators of violence, so children can have positive role models. Times are different but things are the same. We must start change with ourselves.*

Women and men must support each other. A man must cry - it brings healing. The time for action is now.

On a positive note, it became evident during the workshop that hope enabled people to see a brighter future. Participants mentioned that their attendance at the workshop made them see that there was hope for change. In this regard, one participant mentioned that *"there is hope"*, while another said that *"the negative mindset must be changed to a positive"*. Another participant, working in the child abuse sector, said that we should teach children that there is hope and we should *"give them hope"*. Another participant said that, whilst she "*could not help with the past, she could help with the future - she could bring a change*". Others have highlighted the role that hope can play in promoting positive forms of masculinity and peace and safety (Amos, 2010; Religions for Peace, 2009; Taliep et al., 2015). Another participant still remarked that this exercise highlighted the horrific things that happened in the past that many people could not forget, but that they could repair themselves through their lifestyle and by creating a better future for their offspring. That participant further mentioned that this workshop showed that *"all of us are part of a bigger story".*

Despite a predominantly negative picture painted during the discussion, the actual 'mapping' of services and actions on the *Time-Line* painted a very positive picture of many community assets over time. There have been, and still are, many in and around Erijaville who are trying to contribute to community development. As many said, they had hope. This workshop was perceived to help with the development of this hope for a better future.

6.3.3.2 Factors that promote safety and peace in Erijaville.

In order to obtain a participant-driven list of factors that impact peace and safety promotion, participants were asked to write down the two key factors that contribute to peace and safety in their community. The key findings in the ranking exercise are depicted in Figure 6.10 below. Findings indicated that churches were the most common factor identified by the service providers. In addition, the roles of the police and neighbourhood watch were identified as important contributors to safety and peace in Erijaville. Significantly, most of the factors identified related to 'spiritual capacity' in one way or another, with most of the factors being intangible personal or interpersonal phenomena such as trust, love, positivity, good morals and respect, all of which have been identified by others as important for promoting peace (Lazarus

et al., 2015; Cochrane et al., 2015; Der-Ian Yeh, 2006; Esparanza, 2010; Mandour, 2010; Rayburn, 2004).
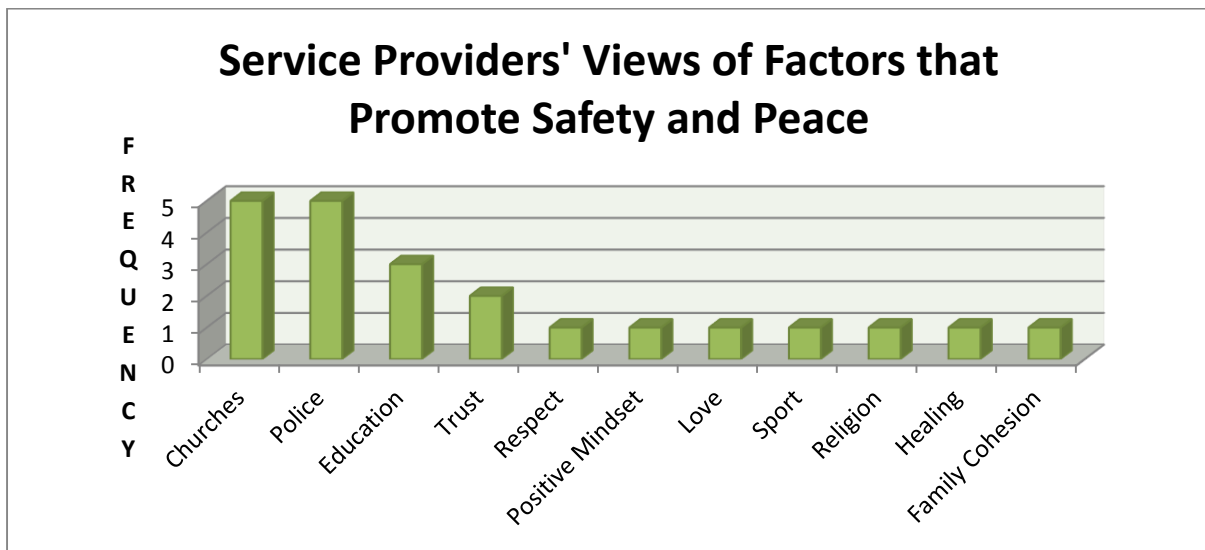
Figure 6.10. **Service providers' views of factors that contribute to safety and peace**

An exploration of factors that were perceived to work against peace and safety indicated that substance abuse was by far the most "risky" factor according to the service providers. This was followed by violence and poverty. In the discussion that followed, participants mentioned that things had changed in Erijaville in recent years. *"Things changed when it took a turn for worse when drugs, especially 'tik' (methamphetamine) were introduced within the community".* However, another participant said that *"there was hope and a better future for their community as the country is still in a transitional period".* The value of hope once again was identified as an important factor in promoting peace and safety in the community.

6.3.3.3 Exploring masculinities and spiritual capacity and religious assets.

In the next exercise, service providers' views were explored around the contribution of religion and spirituality to safety and peace. Participants identified various tangible and intangible factors as indicated in Table 6.4 below.

Religion was identified as an important factor, with some participants saying that men, in particular, must attend church since very few men did so. The churches in turn need to preach about *'what is a man'*. To achieve this, one participant said that *"we need to bring the church*

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to the people" and another emphasised that *"men should be taught how to be priests in their households",* and learn what role they should play in their homes.

Table 6.4

Service Providers' Views on the Contribution of Religion and Spirituality to Safety and Peace

Intangible Factors	Tangible Factors
Values	Fatherhood programmes
To love	Help with youth
Strengthening the family	Teaching values
Respect	Sharing
Compassion	Forming Partnerships
Prayer and meditation	Expressing spiritual well-being– beliefs
Trust	Church
Repentance	Security
Peace inside and outside	
Changing mind-sets (see things differently)	
Morals	
Healing (dealing with the past)	
Positive mindset	

Parenting, seen as a religious responsibility, was highlighted as an important factor in the promotion of peace and safety. The role of parenting in setting boundaries for young people was linked to religion. One participant noted that *"young parents need to monitor and control their children"* since it was their responsibility. The role of fathers was identified as being important, particularly in relation to promoting positive forms of masculinity. It was argued that spirituality brings inner peace, and programmes such as fatherhood projects, *"could bring outside peace".* Similarly, Pembroke (2008) linked fatherhood to spirituality emphasising the importance of a father's involvement in nurturing his children.

Similar to the findings in the community asset mapping workshops, Table 6.4 indicates that most of the 'religious assets' identified as important for promoting safety and peace were intangible – and therefore related to what we call 'spiritual capacity'. Participants argued that religion and spirituality could contribute significantly to safety and peace by promoting moral values and love. One participant stressed that, *"we need to go back to basics such as fostering respect and compassion, as compassion deepens understanding of love".* Others have identified the promotion of spiritual values, including compassion, as key strategies for

promoting positive forms of masculinity and peace (Barker & Ricardo, 2005; Esplen, 2006; Lazarus et al., 2011). Another participant highlighted that religion and spirituality can enable individuals to express their spiritual well-being to others by living up to what they believe and making it a reality.

Certain religious practices were identified as important to the promotion of safety and peace. For example, prayer was highlighted as a form of support, particularly between partners. *'Trust in God"*, one participant said, *"would make it easier to trust others"*. Spiritual practices and counselling were also identified as mechanisms to aid in the healing process.

This discussion highlighted that many participants valued the role of churches and other religious structures and practices, and saw them as assets that could and should be mobilised to promote safety and peace. In concert with suggestions by others (Barker & Ricardo, 2005; Esplen, 2006; Lazarus et al., 2011), participants suggested that religious organisations should focus on the youth through youth groups, music and so forth. It was suggested that *"people's mind-sets need to be changed in order to see things differently."* Teaching through critical engagement should therefore be used as a medium to promote safety and peace. The importance of addressing issues relating to masculinities was also highlighted. In this regard, it seems that the churches and religious leaders are viewed as potentially playing an important role in promoting positive forms of masculinity in Erijaville. Various authors have highlighted the important role that religious leaders can and do play in mitigating violence and promoting positive forms of masculinity (Dolley, 2006; Taliep et al., 2015; Petersen, 2013; Woods, 2015).

6.3.3.4 Organisational relationships and networks in Erijaville.

Two exercises were used to help workshop participants make their organisational relationships and networks visible. This included an individual sector mapping process and the development of a collective 'spidergram'.

An analysis of the diagrams developed by the workshop participants indicated that ten network sheets were completed and that the organisations provided a number of services to communities in Erijaville and other areas of the Strand. These organisations had a number of relationships with other organisations that were present or absent in the workshop. Some of the relationships were uni-directional, where a service was provided to another group or organisation, while

others were bi-directional, where services were shared between or provided in partnership with other organisations. An example of a network sheet is provided in Figure 6.9 (top right).

The next task was to complete a collective 'spidergram' (see Figure 6.9, bottom row). Using different colours, participants were invited to draw lines between themselves and other organisations to indicate the type of relationship (strong, medium, weak, none) they have and with whom they would like to have a relationship. It should be noted that this drawing reflected the reality of only those who were present during the workshop, and noted relationships as they were being experienced at that time.

Discussion and analysis of the spidergram highlighted many black lines (strong relationships), green lines (medium relationships), red lines (weak relationships), and blue lines ('would like to have' relationships). Interestingly, most of the lines were blue, indicating organisations wanting to have relationships with others. There were only a few red lines (weak relationships). Some organisations working in the same field (e.g., child safety) were not linked. Some extra organisations (not at the workshop) were added, but few links or lines with other organisations were made. Many organisations that were not at the workshop were identified and considered important. On the whole, the relationships between service providers were considered to be fairly strong, with no obviously isolated groups (although some might have been missed). The public providers indicated a strong willingness to engage at a community level (also demonstrated by their presence at the workshop focused on a small community such as Erijaville).

6.3.3.5 Characteristics of good practice.

The aim of this last exercise in the service provider workshop was to gain a perspective on characteristics of good practice in Erijaville. Participants were asked their views on the qualities of a good service provider contributing to peace and safety in the community and to identify the organisation, asset or entity (whether religious or secular) that stood out for them as the most positive or beneficial within this community, and to state why they thought so.

Participants highlighted the following qualities of a 'good' service provider: showing love and compassion; respecting and acknowledging each other and others; holding hands, working together, and building strong links; having a common purpose – keeping people together;

building trust in the community; emphasising that positive values are important, including 'Ubuntu', and rekindling passion to have commitment to the community.

One NGO, Hearts of Men, was highlighted as an exemplar for good practice in Erijaville. The following quote captures some of the views expressed in this regard.

> *They do very inspiring work, especially building relationships between fathers and sons with their Fatherhood project. It is not so much what they bring but what they bring out. It is the network that makes HOM work and that Hearts of Women contribute to positive masculinities. HOM also acknowledges what others do.*

Thus, HOM was identified as an important partner in the project, and they played a central role in the development of the Building Bridges violence prevention intervention (see Chapters 2 and 7).

6.3.4 Asset mapping workshop evaluations summary

At the end of each asset mapping workshop, a formal evaluation was conducted to assess the workshop process and design, as well as the effectiveness of the workshops in raising participants' awareness of assets within their local community. A summary of the views of both the community members and service providers on the asset mapping workshops conducted in the community is outlined in Table 6.5 below.

Table 6.5

Community asset mapping workshop evaluation responses

Process Evaluation Focus	QUESTIONS	Main Responses in order of frequency weighting
1. **Workshop components that worked well**	Which part of the workshop do you think worked well	1. Everything (most frequent response) 2. Group work 3. Mapping 4. Identifying assets 5. Community working together 6. Opinions were valued 7. There is hope
2. **Workshop components that did not work well**	Which part of the workshop do you think did not work well?	1. *"Everything worked well."* (Most frequent response) 2. Other responses did not reveal any significant pattern
3. **Workshop facilitation and structure**	Do you think the workshop was well facilitated? Yes/No, Explain.	Yes (unanimous) *"It was very good"; "Professionally presented"; "It made sense, I learnt a lot"; "It was well planned"; "Explained well"; "Friendly atmosphere", and "It was linked to faith."*
4. **Raising awareness of**	Did the workshop make you more aware of	Yes (overwhelming response)

		strengths/assets/ resources in your community? If so, how did it do this?	*"Things I was not aware of ... I know more about my community now"; "The community want to work together and see/feel they can bring about change" and "Spiritual foundation."*
5.	**Benefits to community**	Do you think information generated in this workshop can be beneficial to your community? Yes/No, Explain.	Yes (large majority) *"Learnt a lot"; "Need to have more workshops like this, also in other communities "; ""Major role players were involved"; "It helps prioritise needs and creates a systematic process of working in communities"*
6.	**Recommendations to others**	Would you recommend other people to attend this workshop? Yes/No, Explain.	Yes (large majority) *"It is beneficial" and "I learnt more about the community."*
7.	**Suggestions for improvement**	What suggestions for improvement would you make?	Main responses (in order of frequency weighting): *"Good as is"; "The community must support this project"; " Get more young people involved"; "Focus on drugs"; "Include more ice-breakers."*

It is clear from the above table that the majority of participants felt that the workshops were well structured, well presented and beneficial to the community. All participants felt that the workshops made them more aware of the assets within their community. In this regard, one participant noted the following: *"I did not know that [about] the community. [I] now have better knowledge of it now".*   Another stated that *"The greatest visible asset was that many people are prepared to work together".* Participants said that this awareness was raised *"by listening to all the community voices about the concepts of peace and safety as it relates to their lives"* and they highlighted that *"everyone knew about the problems but nobody reached out to them".* Another response indicated the community's readiness for change and stated that *"Because the community wants to see positive change in Erijaville",* The positive approach pursued in the project was commended as indicated by the following quotes: *"Identifying strengths helps to build cohesion. It also builds community"* and *"Everybody worked well together."*

Other interesting responses regarding suggestions for improvement included the following: *"Have more workshops"; "Don't start something and then leave ... endure and keep going";* *"Create more build up programmes",* and *"Always ask people's advice when suggesting something."* This suggests that participants' feel valued when their opinions are sought and they want to be involved in decisions affecting their lives. These are in concert with the benefits of an asset based approach identified by others (Ngunjiri, 1998; Cochrane et al., 2015).

In general community participants entered the workshop with feelings of caution, but left with a sense of hope. One participant said that *"now I know that I can also do something and make a difference. You learn a lot and realise you can be somebody"*. It is precisely this realisation of their own capacity and their personal agency that emerged from the asset mapping processes as a key motivating factor for various outcomes, as discussed later under the results of the CBPR reflections and as highlighted by Cutts et al. (2015). Many noted that they were grateful as they have been *"living past one another"*, yet nothing stops them from solving their problems.

6.3.5 Data analysis and asset mapping reports

As noted previously, an important principle of CBPR is community capacitation. In this regard, every effort was made to capacitate and involve community members in tool development, data collection, data analyses and outputs that emerged from this study. After completion of the asset mapping workshops, the community research team received training in both qualitative and basic quantitative data analysis techniques. This included the thematic content analyses of the various discussions and concept explorations pursued in the asset mapping workshops, as well as frequencies of the responses collected during the workshops.

The community research team was actively involved in the preparation and facilitation of the asset mapping and action planning workshops as well as the development of the different research outputs of the project, such as the research reports, posters, flyers, compiling the photostory of the project. This is further discussed in the CBPR results chapter.

Two reports on the asset mapping process were developed by the community research team and the academic researcher (REFS). One report was geared towards the community and one towards academia. These reports were then distributed in the community to all the key stakeholders. The outcomes of the asset mapping workshops were also presented to the broader community and academia by the community research team.

6.4 Step 5: Exploring Key Concepts

In order to obtain a deeper understanding of the community's perceptions around the key concepts in this study, FGD schedules were developed. This section tells the story of this process as well as the training and actual facilitation of the FGD workshops. As noted previously, we explored the views of community members on masculinity and, in particular,

the role of positive forms of masculinity in promoting safety and peace in the community asset mapping workshops as well. Findings from these two data sets will be triangulated in this section.

6.4.1 Development, capacitation and facilitation

One semi-structured interview schedule compiled by academic and community researchers comprised two sections: the first focusing on masculinities and their construction and the second focusing on spiritual capacity and religious assets. The instrument was then piloted with community members, amended and translated into Afrikaans by the team. Fifty-seven participants comprising 19 religious leaders, 22 community members and 16 service providers were then recruited to share their views on masculinities, spiritual capacity, religious assets and safety and peace; in 14 focus group discussions were held in the Erijaville community. Numerous capacitation sessions were conducted with the community research team in order to develop the schedule and prepare the research team for facilitating the FGDs. The process was recorded as follows in the RT meeting minutes:

> *The development of the semi-structured interview schedule for the focus group discussion on positive masculinity... was done in concert with the process of conducting a FGD… This was a very interesting task, as it led to a lot of discussion and exchange of ideas. After an overview of FGDs, the presentation started out with the aims and objectives of conducting FGDs, and the questions one should ask bearing in mind ones' aims and objectives. Thus, we started out with [me] asking the following questions: 'What are the objectives of the FGDs that we want to conduct in Erijaville?' and 'What do we want to learn from the FGDs we want to conduct in Erijaville?' in terms of masculinity. Keeping our objectives in mind, every question that was formulated involved extensive discussion with some even giving answers and we continually referred to our Power Point. … After completion of this task, we continued with the presentation on conducting the FGDs. This way of compiling the interview schedule proved to be very innovative and helpful as the presentation served as a guide to focus the questions.* (RT minutes 9/03/12)

The team then prepared for the piloting process and facilitation of the FGDs. This process was highlighted in the following quote from the AC minutes: *The preparation for piloting went very well. We did some recap training of data collection ... to prepare for piloting ... They then role played the facilitation of FGDs*" (AC Minutes 10 March 2012). After collecting the data, the RT received training in transcribing raw data and thematic content analysis.

6.5 Exploring Masculinities

The most salient themes that emerged from the FGD on masculinities and the exploration of masculinities in the community asset mapping workshops (CAM) can be classified under the following broad categories: patriarchal notions of masculinities, socialisation, creating negative masculinities, positive forms of masculinity, and promoting positive forms of masculinity.

6.5.1 Patriarchal notions of masculinities

The following sub-themes relating to patriarchal notions of masculinities emerged from the findings:

6.5.1.1 Provider role, bread winner or working man.

The 'provider' tradition in men refers to the way men instinctively assume the role of breadwinner and obtain purpose and a sense of meaning through the work (Kiselica & Englar-Carlson, 2010). Participants indicated that for a man to be recognised as a man, they have to be employed and be the breadwinners in their house. One participant indicated that *"the man must work so that bread can be put on the table"* (FGD). Others echoed this sentiment stating that a man *"provides for his family"* (FGD, female participant); *"In the house, the man is the provider"* (FGD, pastor) and *"he is a provider… he is a responsible, homely man"* (pastoress). Providing for his family is, therefore, regarded as a responsibility that defines a man's manhood. Whilst the provider role for men is regarded by some researchers as a positive masculinity characteristic (Kiselica & Englar-Carlson, 2010), the inability to fulfil this role can have grave complications for men. Accordingly, one participant stated that *"If he doesn't work, he is not a man – he is weak"*(FGD). This is noteworthy, as being a man is often equated with being physically strong (see Skovdal et al., 2011) and here the participant linked the man's employment status to his manhood and strength, suggesting that when a man is unemployed he is not only emasculated, i.e., not a man, but he is a 'weak' man (see UN, 2011). The provider role is really then a double-edged sword.

6.5.1.2 The provider role as a double-edged sword.

One participant drew on religious discourses to emphasise that males must provide for their households. The extract below lends credence to this belief: *"We must sweat for our household. It says so in the Bible. The Lord said your yoke is you will work for that wife"* (FGD). The implication of this finding is that the religious injunction of being the provider could place men

under considerable duress if they are unemployed. In this regard, a community member noted: *"The man is supposed to be the main breadwinner – that is how society wants it to be. However, in reality, this is not the case"* (CAM). This, therefore, begs the question: If men derive their identities and primary social purpose from being providers, what then happens when men are unemployed or unable to meet the social and religious expectations placed on them as providers (Barker & Pawlak, 2011)? The lack of ability of men to live up to male role expectations and the loss of traditional masculine roles have been identified as key risk factors for violence (Lazarus et al., 2011). The perpetration of interpersonal violence by males emerges as an outcome from attempts for empowerment in an environment in which the male identity is experienced as being in peril or challenged (Bauman, 2010), for example, their inability to live up to the 'breadwinner' expectation (Connell, 2005; Lazarus et al., 2011).

6.5.1.3 Symbolisation and provider role.

The fact that a man is employed needs to be displayed to the broader community as a source of social affirmation or declaration of his manhood. The following quote from a female participant highlights the importance of men's outer symbolisation or exhibition of their employment status to the broader community. *"When a man is seen in his working clothes at night he is seen as a man as he provides for his wife and children and he gives his pay to his wife."* Clothing, which carries unseen symbolic meaning, is thus used to construct manhood through the outer visible depiction of employment status. It conveys the message: "You can see from my clothes that I am employed and, therefore, you can see that I am a man". Whilst this outward depiction serves to confirm his manhood, it is worthy of note to hear that he has to hand over his money to his wife in order to be a real man. This is in stark contrast to his being the head of the household and the woman being subordinate. What emerged from other reflections is that men often go drinking when they get paid (usually they are paid on a weekly basis) and if a man did not hand over the money to their wives/partners, then there would be no money for the household. There is thus an unspoken understanding or regulatory system at play among some couples.

6.5.1.4 Provider role as justification for male superiority.

The superior role that men generally occupy appears to be linked to their role as being the 'provider' to their household, as one male participant noted: *"A man is a man in his house, he rules, the woman is not above the man, the man works"*. Work, then, affords a man with the status of 'ruler' within his household. Again, this would mean that if manhood is defined by a

man's position in the household and his employment status, unemployed men would then be 'de-throned' and therefore occupy a lower status and would search for alternate ways to redefine their manhood.

6.5.1.5 Silent reality.

Another general factor that emerged centres around the existence of a silent reality in the community regarding men being stay-at-home fathers and women being income generators. One participant noted that *"many women work and men stay at home and look after the children (reversed roles) …"* (CAM). This reality is something that is present in the community, but it is not talked about, as it contravenes conventional norms (i.e., "men work and provide; women stay at home and care for children"), hence, an ominous silence surrounds this reality. Participants highlighted that it is expected that men are to be the providers. However, in reality many women work either alongside their male partner or are the only breadwinners in the household. Hence, one participant noted that *"there is a need to redefine work and family roles"* (CAM).

6.5.1.6 Male superiority.

Participants placed emphasis on male superiority over females. Similar to findings by others (Wyrod, 2008), participants in this study depicted a domestic hierarchy in the home with men at the top of the hierarchy. One male participant stated that: *[A man is a man] when he is the head of the household – a man wants to know he's the head of the household and the woman must be obedient."* This indicates that a man not only wants to be 'in charge', but he also needs affirmation of his status as head of the household – a status that is co-constructed by women whose duty it is to affirm his social position within the home. Another participant remarked that *"he shows that he is in charge by being in command (raise his voice) and his wife listens to him (women encourage this behaviour)"*. This status is then constructed through the woman's obedience, reflecting her submission and subordinated role to the masculine ideal of being the 'head' of his household. The co-construction of hegemonic masculinities through reinforcement by subordinated masculinities (including femininities) has been reported by others (Demetriou, 2001; Hirose & Kei-ho Pih, 2010). Indicating the extent to which this superior role is actively co-constructed by both men and women in relation to the subordinated role of women is the following quote from one of the female participants: *"The man is the roof and the woman is the floor."* Literally, this means that women are continuously trampled upon, occupying a lower position to that of men. Taking into account the above notion of women

being 'obedient', this could have grave implications for violence against women. Since the construction of manhood is co-constructed (see Ratele, 2013; Schofield et al., 2000), directly linked with 'who we are', 'how we respond' and how we perpetuate these through our actions and behaviours, this also indicates the need for critically reflecting and unpacking the status of both men and women in this community in order to de-construct the oppressive nature of this identity formation.

6.5.2 Socialisation

6.5.2.1 Sex role socialisation.

The socialisation of men and women from an early age into gender stereotypical roles emerged as a common process within the community. This is evident in the words of one participant: *"A man must work hard; he must lift stones and carry cement; whereas a woman does not do this* (FGD)." Others have indicated that men are reared and socialised into gendered roles (Courtenay, 2000; Longwood, 2006). Another participant stated that: *"Girls must work in the house, do the washing, do the dishes. That's girls' duties. The boys' duties are they must go chop wood and carry water. Clean up the yard and all those manly duties"* (FGD). Specific roles and behaviours are, therefore, deemed appropriate for a specific sex only. Similar findings were reported by Wyrod (2008) who stated that participants saw men and women as having different roles. Children are taught from a young age what it means to be a male or a female. For example, one participant highlighted that *"Ladies don't shout, sit properly [and are] responsible for cooking"*. Another spoke about his son and stated: *"He began at 12 to talk like a girl. I told him, in God's name, you will laugh properly. There's no girlies in this house. I got him out of that. Now he's a man - you can't be both"* (E2, p. 5). This quote elucidates that parents and family members thrust aside any behaviour that they regard as 'less masculine' (even feminine) from children. However, not all participants ascribed to this narrow view of gender roles. One participant noted that *"a woman can also do hard labour"* (M3, p. 5) which indicates the existence of a more egalitarian view.

6.5.2.2 Family as primary socialisation agent.

Family plays a critical role in sex role socialisation. The following quotes underscore the role of the family as the primary source of sex-role development. Participants noted that *"the home plays a key role in socialising men"* (CAM); *"My parents taught me ..."* (FGD)*; "My mother taught me"* (FGD)*; "... I was taught by my father; actually my grandfather..."* (FGD) and *"A man's views come from his family; how he was raised, and is carried over from generation to*

generation" (CAM). This indicates that participants viewed socialisation, particularly at home, as central to the process of developing a sense of manhood. Participants emphasised the important role that socialisation plays in the formation of masculinities.

Participants also highlighted the important role that the home environment should play in the formation of values and discipline, especially emphasising the role of fathers. In this regard, one participant noted the following: *"Fostering respect needs to start at home"* (FGD) so parents should not rely on the school to instil discipline and respect. As indicated by another participant: *"Fathers should instil discipline"* (FGD). This highlights an important challenge relating to absent fathers. One participant pointed out that *"there are many female single parents who experience difficulty in raising their sons as they need fatherly love…"* (CAM). Another participant added that *"boys long for their fathers to be there and rebel when they are absent"* (FGD). The absence of fathers from the lives of their children was therefore seen as another reality that leads to anti-social behaviour on the part of youth.

Studies have shown that involved fathers provide positive benefits to their children (Popenoe, 1996) such as better educational outcomes and emotional security (Rosenberg & Wilcox, 2006). One participant stated: *"My father was my role model and when he passed away my brother and brother-in-law taught me about respect …"* (FGD). This highlights the important role extended family, mentors and role models can play in the lives of young people in the absence of biological fathers.

6.5.3 Creating negative masculinities.

Within this broad theme, the following sub-themes emerged: violence as a marker for manhood, virility as a marker for manhood, difficulty expressing emotions, and unemployment makes life tough for men.

6.5.3.1 Violence and power as markers of manhood.

Participants identified a number of ways in which masculinity was linked to violence within their community. Participants talked about violence and power as key markers of manhood: *"Men abuse to express their masculinity"* (CAM)*; "Men expect women to be subservient and respect men"* (CAM)*; "Power is not negotiated … a man may care but then turn around and expect that the woman must be subservient"* (CAM). As identified by others (Jefthas & Artz, 2007; Lazarus et al., 2011; Shefer, Bowman et al., 2008), this indicates that gender inequities

such as power inequalities and inflexible gender roles or stereotypes are key risk factors for violence. Participants emphasised that criminal behaviour was not only endorsed, but was also equated with being 'cool'. As a result, status seemed to be conferred on such activities, as indicated in the following quote: *"A cool guy could be a criminal also"* (FGD). Being a criminal was therefore regarded as being 'hip'. Another participant corroborated this statement and noted that: *"Most of the young men they promote, like it's a good thing to have these chubs (prison number-gang tattoos) and if you talk like a man who was inside [prison] it's like you are the man"* (FGD). The high status afforded to prisoners or ex-prisoners and the wearing of tattoos as indicators or badges of honour and markers for real men is problematic.

Gangs are grounded in a culture that promotes violence (Standing, 2005), where the affirmation of manhood is expressed by showing physical strength (Eriksson, 2011). Prison gangs, in particular, are notorious for using the male body to structure gender and power through violence perpetrated against 'weaker males'. Criminality is inextricably linked with violence, and as such these ideas highlight the need for positive role models to guide and provide support to young children as well as the need to critically engage these issues. The link between masculinities and violence has been made by numerous experts in the field (see Bird et al., 2007; Connell & Messerschmidt, 2005; Lazarus et al., 2011; Longwood, 2006; Kenway & Fitzclarence, 1997; Vetten & Ratele, 2013; Seedat et al., 2009).

6.5.3.2 Virility as a marker of manhood.

Hegemonic notions of masculinity generally define 'real men' as sexually unrestrained (Skovdal et al., 2011). In line with conventional hegemonic notions, participants also linked the male sex drive to their manhood, indicating that there are no restrictions on men as far as their sexual antics are concerned. One participant stated that *"A cool guy ... could be a 'playboy' too"* (FGD). Another participant stated that *"Many men here are busy themselves with worldly activities. Sex, drugs, gangsterism..."* (FGD). This points to a hegemonic masculinity that is sexually risky and often very violent. Other studies have shown that manhood is equated with being sexually unstoppable (Nzioka, 2001), with success demonstrated through the acquisition and control of female sexual partners (Jewkes & Morrell cited in Morrell & Jewkes, 2011).

6.5.3.3 Difficulty expressing emotions.

Another hegemonic notion of masculinity that emerged in the focus group discussion was that men are tough and in control of their emotions. Negative forms of masculinity are characterised by certain affective traits such as restricted emotions (Canham, 2009). One participant stated that a *"[A real man] is strong, he does not cry"* (FGD). This implies that crying is for 'sissies' and to show emotions is not manly because real men should be in control of their emotions. Being in control has been identified as a key aspect of the Western hegemonic script (Canetto, 1990). In South Africa, studies point out that 'real men' are expected to be tough, unemotional, aggressive, denying weakness, and appearing physically strong (Nzioka, 2001).

6.5.3.4 Unemployment makes it difficult for men.

Since participants linked employment to manhood, it is only to be expected that the converse also holds true. One participant stated that *"... if he doesn't work then he is not a man. He is weak"* (FGD). Thus, unemployment could be a key precursor for men feeling worthless. The following quote indicates that that is exactly what people in the community think of someone who is unemployed: *"If a man works then he is good enough, if he doesn't he is nothing, worthless and that is wrong"* (FGD). Community perceptions, thus, construct unemployed men as 'worthless' and this can lead to negative mental health (Barker & Pawlak, 2011). Since unemployment is so rife within this community, this could have grave implications for the construction of manhood. Evidence shows that violence perpetrated by men against their partners is associated with economic stress (UN, 2011). Findings from a study by Shefer, Crawford et al. (2008) indicate that the emasculation of men through unemployment and their partner's employment was seen as a precursor for re-establishing their worth, resulting in violence. For many men, being unemployed results in ignominy, depression, stress, lack of social identity and, for young men especially, increased likelihood of engaging in violence and delinquency or other antisocial behaviours (Barker & Pawlak, 2011).

6.5.4 Positive forms of masculinity

Various positive forms of masculinity were identified by participants. These included positive values, responsiveness, generative fatherhood, being a positive role model and egalitarian relationships.

6.5.4.1 Positive values.

Participants linked various moral and religious values to being a 'good man', or to positive forms of masculinity. This included respect for self and others, trustworthiness, care, honesty and being positive, peaceful and supportive. The following quotes foreground the importance of these values: *"A man must be positive and live out what is inside himself - his morals... and respect... "* (FGD); *"A good man has respect"* (CAM); *"Respect for others and myself so that others can trust me"* (FGD); *"A man that honours his promises"* (FGD); *"Peaceful, happy, supportive and problem-solving..."* (FGD); *"…treat her decently; with love"* (FGD); *"Has religious values"* (FGD). Positive manhood is, thus, evident in living out these core moral and religious values. Other studies have identified values such as respect, love, care and concern as positive masculinity traits (Bitar, Kimball, Gee, & Bermúdez, 2008). Others have identified the promotion of positive values linked to masculinities as key protective factors against violence among males (Longwood et al., 2004; Ward, 2007).

6.5.4.2 Responsiveness.

A man's approachability, responsiveness and sensitivity were linked to positive forms of masculinity. Participants particularly linked positive constructions of masculinity to a man's openness to listen as indicated in the following quote: *"[He is a 'good man'] when he listens to you ..."* (FGD)*;* and one male participant noted: *"...good communication with my wife..."* (FGD)*.* Another male participant stated: *"...I must communicate with my children without them feeling afraid when they speak to me [in order to be a 'good man'] ... (FGD)".* Being responsive and approachable has thus been regarded as an important trait of positive masculinities. Pembroke (2008), for example, linked a man's emotional involvement with his children to the spirituality of fatherhood.

6.5.4.3 Generative fatherhood.

Generative or positive fatherhood was seen as a positive male quality. Participants particularly highlighted the role that fathers play or ought to play in the rearing of their children. One participant stated that a good father shows care to all members in his household and he is an example for his children. The following quotes illustrate this point: *"...Be good fathers and care for his household as well as setting an example to others"* (FGD); *"A good man is always there for his children"* (CAM)*.* One participant particularly emphasised the treatment that fathers give to children and said that: *"He wants to handle his children right"* (FGD). Another participant drew attention to 'the positive role his father played in his life and stated: *"My*

father was my role model because he was hard-working and because he was respectful". (FGD). As a positive figure in his life, his father was someone he could look up to because of his father's values and work-ethic. The following quotes demonstrate the importance of fatherhood as a positive form of masculinity: *"Fatherhood and responsibilities that go hand-in-hand with being a father are important to being a 'good man'";* and *"The hearts of the fathers need to be connected to the hearts of the sons and daughters".* Generative fatherhood is thus connected to being present and actively participating in the rearing of children.

6.5.4.4 Being a positive role model.

Participants regarded men who served as positive role models in their home and in the community as exhibiting positive masculinity. One participant stated that *"A real man is a role model for his family and children"* (FGD). Others added that *"A good man should be a good role model for children and community"* (CAM) and *"A man needs to set an example"* (CAM). Emphasising the importance of role models and mentors, another participant highlighted the role that community members played in his life as positive role models and as people he could look up to that were his mentors. He expressed the following: *"I had no father; my mother taught me everything, values... I had a good foundation. I learnt from role models, positive males in my community from whom I learnt"* (FGD). This highlights the importance of having positive male role models and mentors within the community that can guide young people and teach them positive forms of masculinity. In this regard, Ratele, Shefer and Clowes (2012) emphasise the urgency of exploring the role that social fathers, fatherhood figures or role models can play in the lives of young people.

6.5.4.5 Protector-provider role.

Female participants framed protection as a requirement for manliness, especially in relation to the man's role within the family. One participant noted that *"A man must make me feel safe in my home. The kids and I must feel safe"* (FGD). This was corroborated by another participant who stated that *"The man protects his wife and family"* (FGD). Since it requires courage and strength to protect those who are seen as 'weak' and keep them safe, this protector role is regarded to be intrinsically linked to the quality of 'courage', seen as an essential element of manliness (McKay & McKay, 2014). Male courage is regarded as a positive masculine quality by some (Kiselica & Englar-Carlson, 2010), but is often used negatively by adolescents to prove their manhood. Courage as a positive masculinity quality is balanced by good judgement in opposition to foolhardiness and recklessness (Kiselica & Englar-Carlson, 2010), which is

often difficult during adolescence. The salience of protection as a *sine qua non* for manliness has been ascribed to the general anatomy and physiology of men, in particular, their greater physical strength, which is why men are given the most difficult and perilous jobs (McKay & McKay, 2014). This is apparent in the following quote: *"A man must work hard; he must lift stones and carry cement"* (FGD).

Being hardworking and able to provide for a family were also seen as positive masculinity traits. Participants stated that *"a good man has a job"* (CAM) and *"A good man is hardworking ... and responsible"* (CAM). Barker and Ricardo (2005) highlight men's sense of responsibility as a protective factor for violence.

6.5.4.6 Egalitarian relationships.

Positive constructions of masculinity were linked to relationships that are egalitarian and democratic, where women are regarded as being on par with men. One participant indicated the following: *"I consider myself as equal to my partner... I believe also that she can do all things that I can... we are equal"* (H2, p.3). Adding to this, another participant who is a priestess, emphasised that *"[A real man is] very calm and treats women equally"* (FGD). Indicating the importance of consulting women and respecting their views and suggestions in decision making, a Muslim cleric noted that "*Among older generation[s] a man held 'mashura' (consultation/ meeting) with his wife to discuss family issues [and] money matters were open."* This was emphasised by another participant as is clear in the following extract:

> *He must have respect for the relationship ... respect is very important. You need to have respect for your wife and children ... you must also respect their ideas and feelings. You would not give orders. You would not [say] 'because I say so', but you would ask respectfully.* (FGD)

This elucidates that men who are positive treat their wives as equals. Similar to the literature, positive forms of masculinity have been defined in this study in terms of positive aspects or strengths of masculinity. These attributes include male ways of caring, perseverance, loyalty, healthy self-reliance, dedication and humour, positive fatherhood, as well as the male group orientation and worker-provider tradition (Kiselica, Englar-Carlson, Horne, & Fisher, 2008; Levant, 1992).

6.5.5 Promoting positive forms of masculinity

In the focus group discussions, participants' views were explored regarding how they think positive forms of masculinity could be promoted within their community. The following core themes emerged from the suggestions of participants: men as partners to promote generative masculinities, mentoring, and mobilising spiritual capacity and religious assets.

6.5.5.1 Men as partners to promote generative masculinities.

In concert with recommendations that emerged from other studies (Flood, 2005; White, Greene, & Murphy, 2003), participants suggested that we need to work hand in hand with men to promote positive forms of masculinity. In this regard, one participant indicated that we need to get men to speak to young people about their personal experience with negative forms of masculinity. One participant recounted an example: *"I remember we had a guy at this school, but he was [a] gang member in prison. And he spoke to them and he said: 'You think [a] gang is this, talking about the numbers.' ... And he started talking to them and ... the children listened and that there was a bit of peace. He could tell them what really happened ... could motivate them and help them ... and tell them 'this is not cool' this is where I ended up. You have a better future"* (FGD). Learning from the experiences of others was, therefore, regarded as a means to promote positive forms of masculinity. Based on an extensive literature review on the prevention of interpersonal violence with a particular focus on masculinities, Lazarus et al. (2011) emphasised the importance of building partnerships across gender lines and involving men in violence prevention initiatives.

6.5.5.2 Mentoring.

Many participants emphasised the need for and the role that mentoring can play in the promotion of egalitarian masculinities. One participant suggested that we need to *"Take the young people along a process"* (FGD) indicating that mentorship is a path that a more experienced person walks with a younger person in order to support him or her and give advice when needed. Another participant highlighted that a mentoring relationship is one in which the mentor *"Gives love and guidance"* (FGD). Emphasising the constructive quality of mentorship as a positive form of masculinity, another participant stated that *"[A mentor] is a teacher, a preacher and role-model for everybody"* (FGD). Thus, the mentor does not replace the role of the parent. It has been suggested that the presence of positive male role models, such as mentors, in the lives of young people, can break the cycle of violence (Seedat et al., 2009).

6.5.6 Mobilising spiritual capacity and religious assets to promote positive masculinity.

Within this theme, five sub-themes emerged, namely, mobilising religious assets, community connectedness, religiosity as a change agent; building spirituality in men; and leadership.

6.5.6.1 Mobilising religious assets.

Participants suggested that there are various religious assets in the community that could be mobilised to promote positive forms of masculinity. These include: *"Hold a candle chain, hold prayers, advertise in [news] papers, [and] involve religious leaders"* (FGD); *"All churches and religions should get together in the square and ... to pray..."* (FGD). Thus suggestions to mobilise religious assets include, but are not restricted to: holding a candle vigil; prayers including interfaith prayers; newspaper advertisements, in particular advertising to mobilise community members; making a peace offering; involving all community members and praying together. Others emphasised that the church can help in preventing violence. Participants noted that *"the church and religion can help with this (i.e. prevent abuse)"* (CAM). The mobilisation of religious assets as well as spiritual capacity as unexplored resources has been pointed out by many (Amos, 2010; Hipple & Duff, 2010; Religions for Peace, 2009) especially in relation to violence prevention (Taliep et al., 2015; Vendley, 2005).

6.5.6.2 Community Connectedness.

Continuous calls were made by participants for unity and connectedness among community members as a key means of promoting safety and peace. The following quotes demonstrate this appeal: *"There's so many churches in this place but every church is only there for itself ... Whereas all of us worship one God ... That's the only way spirituality can serve; by all of us uniting and praying in unison"* (FGD). This relates to intangible religious assets as described by Cochrane et al. (2015) which indicate the motivational, volitional, and mobilising capacity of religious belief, faith, behaviour and ties (e.g., motivation, trust, solidarity, cohesion, etc.). Emphasising the importance of unity and cohesion, another participant stated: *"...put differences aside ... even if they are drug dealers ... include everyone and make a peace offering"* (FGD).

6.5.6.3 Religiosity as an agent of change.

Participants also suggested that being religious or being connected to a religion can be a solution to addressing the social challenges that young people face. One participant said: *"My life was in chaos, but God helped me. I could still have been living such a life but God helped me to rise [above] that. In other words, He has a solution and a way out for everyone. Young people can play sports and we also need to pray for one another"* (FGD). Another participant stressed that being religious is an important positive masculinity trait indicating that *"A real man in his manliness is a man of God. He must live out the Word in his house and around his house"* (FGD). Referring to fathers in particular, another participant suggested that *"he must educate his children in Godliness"* (FGD). Moreover, having a relationship with and faith in a Higher Power was believed to lead to respect for others, healthy relationships and, ultimately, a positive community as indicated in the following quote:

> *Faith does a lot of things to a person. You'll listen to your wife. You'll solve problems for her and for your children. That's what faith causes...faith respect and work ethic is what makes a man.* (FGD)

6.5.6.4 Building spirituality in men.

Participants emphasised the importance of spirituality in laying a positive foundation for a positive life and constructing positive community. *"In terms of spirituality, you need to have a spiritual life. Build a positive spiritual life to build a positive community"* (FGD). This indicates that in order to build positive notions of manhood and a positive community, it would be important to build spirituality or fill the spiritual void in the lives of men. Another participant suggested that *"religious assets help develop spiritual capacities so that you can grow spiritually"* (FGD). These findings are congruent with other findings that highlight the role of spirituality in promoting positive forms of masculinity and peace and safety (Clowes et al., 2010; Longwood et al., 2004; Tirri & Quin, 2010). One participant, for example, emphasised the importance of spirituality as a key characteristic for being a good role model and suggested that *"spirituality can help men to be good role models"* (CAM).

Participants highlighted the importance of rites of passage. Participants highlighted that *"processes to help young males through the transition to manhood are an important means for making young males feel validated as men and thereby preventing violence"* (CAM). Smith (2006) describes rites of passage as momentous communal rituals that characterise a psychological and spiritual defining moment or turning point in life. Researchers have noted

that traditions and rites of passage provide positive mechanisms of social control that can be combined with new information and values and standards (see Barker & Ricardo, 2005; Greeff & Loubser, 2008; Smith, 2006).

This is in concert with findings from a study that suggests that a key component of spirituality was a growing propensity to confront the hegemonic ideal of masculinity in the identity formation of young males (Engbretson, 2006). Others have also highlighted the importance of spirituality as a protective factor against violence among young males (Greeff & Loubser, 2008; Lazarus et al., 2011).

6.5.6.5 Leadership role.

Another important way to promote positive forms of masculinity proposed by participants was the active involvement of community leaders *"...if there was a leader figure for youth ... if young people come together and really do something. Not only in words but adding action to it. This must be approached and discussed..."* (FGD). This emphasised the need for community leaders, as both role models and as providing leadership to address issues that affect the youth.

In summary, the focus group discussions held with community members, religious leaders and service providers highlighted various criteria for identifying a 'real man', including being emotionally tough, and virile, among others. Participants indicated that women and men had specified roles within relationships and within society. Participants believed that these scripts for gender roles are acquired through contact with older males and females, both within their families and within the community. The results also highlighted that positive forms of masculinity were important for promoting more egalitarian relationships and the promotion of peace and safety. The notion of positive masculinity is therefore characterised by non-violence, gender equity, care, emotional responsiveness, resilience and positive fatherhood. The need for mentorship of young people and being able to overcome differences was foregrounded in this regard.

The results also illustrate that a great deal of emphasis is placed on a man's ability to provide for a household. This requires that they are financially stable, and that they dress and represent themselves in a particular way. Whilst such characteristics have been identified in the literature and in this study as 'positive masculinity traits', it can be argued that it is precisely the instinct of provider which renders positive forms of masculinity a double-edged sword that can easily

swing from the one side to the other, depending on socio-economic status, often beyond the control of the individual. This is precisely what Ratele (2008) alluded to when stating that masculinities within the South African context should be viewed within the context of marginalisation.

It can, therefore, be argued that positive (and negative) forms of masculinity occur on a continuum and it would be important to understand how individuals would continue to draw on the positive aspects of masculinities if the moment the continuum is disturbed; it in itself becomes the cause for an inclination to violence. For example, if one accepts that being a provider is a positive aspect of masculinity (see Kiselica & Englar-Carlson, 2010), and if external factors hamper a man from performing the expected social norm of provider, he may become emasculated and may attempt to reassert his power through violence (see Jefthas & Artz, 2007; Shefer, 2008). The question remains: 'What is it that keeps the glue intact when the external environment is disturbed and one feels inadequate and threatened by the dominant discourse of how a man should be, and revert to defence mechanisms to show one's value, strength and relevance? It is here where, I argue, and this study shows, that spiritual capacity and religious assets could play a key role through instilling the values that are necessary to temper a negative swing in the continuum. In concert with findings from other studies (Amos, 2010; Barker & Ricardo, 2005; Cochrane et al., 2015; Esplen, 2006; Lazarus et al., 2011), participants noted a number of characteristics linked to positive manifestations of masculinity, and forged a link between these values and spiritual capacity and religious assets in the promotion of peace and safety. It is argued that if the roles that are innately constructed socially within the male perceptions of gender roles are tempered with a clear spiritual-ethical value system (which are really universal values) linked to positive forms of masculinity (as discussed previously), then it could minimise the negative impact males somehow encounter when they face difficult socio-economic challenges within marginalised societies as South Africa.

6.6 Focus Group Discussion: Spiritual Capacity and Religious Assets

A key aim of the second set of FGDs was to explore participants' perceptions on religion, spirituality, and spiritual capacities and religious assets. Analysis of findings highlights the following key points, which are summarised under the following categories: general views on the role of religion; understanding religious assets; tangible religious assets, intangible religious assets, spiritual capacity, mobilising spiritual capacity and religious assets to promote positive forms of masculinity.

6.6.1 General views on the role of religion

Participants linked religion to the construction of character and the promotion of peace. *"Religion gives you character"* (FGD) and *"It's like a direction which leads you because when you do something you evaluate its acceptance against your beliefs"* (FGD). Religion was, therefore, seen as a guiding mechanism that provided the moral script for making choices. This is directly linked to creative freedom related to the notion of spiritual capacity (Cochrane et al., 2015). Our creative freedom is evident "in the fact that we [as humans] are able to understand phenomena before we act" (Cochrane et al., 2015, p. 18). Alluding to the value of religion in bringing about peace, another participant noted that *"religion brings peace and calmness"*.

6.6.2 Understanding religious assets

Although, various physical entities were described as religious assets, some saw religious assets as being something more abstract, holistic and all encompassing. The main meaning attributed to religious assets included reference to institutions, practices, and/or beliefs centred on 'God' or a higher being. Various references were also made to religious assets as being a set of morals and values learnt through established religious institutions, buildings and practices. Participants thus made reference to both tangible and intangible religious assets as discussed below.

6.6.2.1 Tangible religious assets.

Community members highlighted a number of tangible religious assets that were particularly related to the youth and activities for the youth linked directly to churches and other religious institutions. Whilst various physical entities were described as religious assets (churches, mosques, temples, parks, etc.), it came to light that any '*space*' could be converted into a religious asset when a faithful/spiritual and unified worship atmosphere was created: "...*God says where two and more gathered in His name ... you can go anywhere and pray ... the whole earth is an asset ... mountains ... the sea ... gardens ... you convert that space and you have an asset"*. Some members made reference to physical activities (particularly geared towards the youth) as religious assets and expressed the need for '*safe*' designated parks and sports areas/activities: "... *sports for youngsters so that they can come together and become one"*. In addition, a strong emphasis was placed on religious assets as being described as something that are not only received but shared within a group context such as "... *a youth group"*. Others suggested that human beings are themselves religious assets: "*A person who leads a religious*

life within the community is a religious asset". In this regard, another participant stated that "*We are assets if we stand for our community and make it right"*. A relational connection emerged, suggesting that older community members need to take the responsibility of being role models to the younger generation: *"... a religious asset is the way in which you raise your children, from generation to generation ... good manners, and good values"*.

6.6.2.2 Intangible religious assets.
The most important intangible religious assets that came out of the focus group discussions in the community included the following values, attitudes, principles and behaviours: respect, taking responsibility, a positive mindset, inner peace, love, trust, compassion, healing, forgiveness, moral behaviour, prayer and meditation, family care (including clear rules) and cohesion, peer and adult guidance, working and standing together, community connectedness and unity.

6.6.2.3 Community connectedness.
Linking unity and community connectedness to faith, one participant emphasised the value of working together as a community in stating: *"God will give us power, so that others far away will see that they also want to belong to that group. That's how we will grow"*. Community connectedness was seen as necessary for bringing about change in the community: "*... if we stand together anything can happen in this community"*. Another participant highlighted the value of community connectedness as being a means of fostering a sense of care and love among community members: *"We must stand together ... we must have love for our neighbour"*.

6.6.2.4 Values.
Various values were identified by participants. These include love, forgiveness, care, and respect. Many participants viewed love as a religious asset. Self-love was believed to be important, as participants noted that *"if you don't love yourself nobody will love you ..."* Highlighting the importance of love, another emphasised the need to reach others through love stating: *"To lift up with love, it is all about love, God's love not my love"*. Participants voiced the need to genuinely love others and regarded real or true love to be linked to peace within the community. Forgiveness was also believed to be a religious asset. Specifically, an awareness of God's forgiveness was believed to ease the process of forgiving others. One participant stated: *"[forgiveness] makes my spirit able to not put others down. because God forgives me*

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repeatedly". Participants expressed that a belief that circumstances in life are temporal was also believed to make it easier to forgive others.

A sense of respect and care for one another was also regarded as important. Participants noted: *"...we must stand together ... we must have love for our neighbour"; "if we look out for each other's children then it's an asset and if we care ... we learn in churches, mosques and other religious institutions to care about your neighbour."* Another participant emphasised the value of learning and practicing respect, emphasising that it *"keeps children away from ungodly things, learn respect for religions and respect for elderly".* Elaborating on respect, another participant emphasised that respect included *"respect for each other, for neighbours, for parents, for other adults, for children, [and] respect for other religions."*

6.6.2.5 Faith.

Holding a steadfast belief, especially a belief in a higher power, was regarded as a religious asset, as shown in the following quote: *"I think faith is a certain trust in the Lord even though that is invisible. Faith is something you believe in. It is your first priority, and it must come from your heart."* This quote indicates that faith in the unseen was believed to strengthen the spirit, and in so doing, served as a religious asset. It also foregrounds the value of trust. Participants additionally made reference to their belief in the power of God. God was a source of power to resolve problems, although this happens in His time: *"When you ask something of the Lord, you might not receive it immediately but you must remain excited. You will receive it ... God says: where two or more are gathered in my name if I take a problem to God that my Brothers cannot solve, God will solve it."* This emphasises the importance of collective prayer and the value of hope. It was also directly linked to communication, whether with God or with others. Communication was believed to be a means of nourishing the spirit as stated by one participant: *"We feed our spirit through communication and talking."*

6.6.2.6 Spirituality.

Spirituality was identified as *"something that drives you to do good."* A lack of spirituality was linked to violence. One participant indicated: *"Because people don't feed the spirit with good that's why there is so much crime."* Garbarino (2007) presents a similar argument stating that violence results from a spiritual void in the life of young people. He argues that young people often have a sense of "meaninglessness" where they are cut off from any understanding of life as having a higher purpose (Garbarino, 2007). Results from a study conducted by Tirri and

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Quinn (2010, p. 212) indicate that "spirituality – either with or without explicit religiosity – may provide a path to purpose". Spirituality was, further, identified as important for attaining peace. *"A spiritual person possesses peace – from the way the person speaks to you, you can hear he possesses peace; his mind is at rest with what he believes - e.g., like a Rastafarian wearing the colours (yellow, green, red)".* Longwood et al. (2004) contend that the abandonment of spirituality and the imprudent acceptance of dominant masculine standards distort men as complete human beings and generate much unhappiness in their lives.

6.6.2.7 Prayer as religious asset.

Prayer was believed to be a source of strength and security, leading to unity, hope, and healing when exercised: *"Prayer is the greatest thing we have and it's like a tool that we use".* Prayer was expressed as very important to spiritual growth and development: "*Prayer is the oxygen we breathe as believers ... I believe prayer is also an asset".* Cleanliness was connected to prayer. Participants viewed cleanliness as an indication of reverence (worship) to God. It was seen as a starting point to helping others: "*If you cannot keep your body clean then God's spirit will not be in your body".*

6.6.3 Spiritual capacity

The concept of *spiritual capacity* (discussed in Chapter 2 and 4), introduced in the SCRATCHMAPS Conceptual Position Paper (Cochrane et al., 2015), emerged from a debate and attempt to accommodate the different views on religion and spirituality in the research team and in the broader academic community; to engage with the different faith communities represented in the team and community, and to capture what appeared to be central capacities that link to theoretical understandings and the action goals of peace promotion. Many of the factors relating to spiritual capacity identified by participants in this study were related to the concepts of agency and empowerment (interestingly, these concepts are closely linked to the principles of CBPR as well).

6.6.3.1 Agency.

A key finding in terms of spiritual capacity was a strong emphasis by participants on the importance of developing, sustaining and enhancing their capacity to act in their own world. It was acknowledged that all individuals are imbued with this capacity *'...that capacity to make a difference ...even hardened criminals'* (FGD). Agency is viewed as the power to do or to act in the world in ways that alter it and ourselves. It

is what community members consider as the primary component in any attempt to cope with their context of interpersonal violence with its underlying personal and social factors. This includes taking responsibility for how, and to what ends, we use this capacity. One participant stated: *"How you live life, encouraging others, supporting each other, helping and assisting each other, having respect for each other – that is how you can show peace and respect for everyone"*(FGD). Agency is, thus, linked to the intrinsic *creative freedom* that allows us to act while placing before us the responsibility of how we act (Cochrane et al., 2015). This is crucial as violence, particularly structural violence, violates the individual's and collective's time, space, freedom of movement, drive, connections and identity (Bulhan, 1985).

6.6.3.2 Empowerment.

Similarly, participants linked the necessary orientation, behaviour and actions to notions of empowerment and courage, reinforcing the importance of developing their personal and communal capabilities for undertaking new actions. Empowerment, which is seen as including personal power (*in-powerment* or a sense of authority within oneself) and collective power, which includes working with others to take control of one's life – all of which helps individuals and groups to express and responsibly use their creative freedom. The following extracts emphasise the importance of taking action through working together: *"Stand together against wrong"* and *"The pastor and the community must come together"*.

For community members in-powerment meant reorienting one's self-perspective in the world from one of victimhood to one of responsibility, however limited, of changing mind-sets, and of taking a positive attitude of the world within which they live their daily lives (see Cochrane et al., 2015). The extracts below lend credence to the notion of in-powerment as a spiritual capacity: *"I must be the change; it has to start with me ... If the beauty lies inside [you] then ... give it to the young people ... Form unity and togetherness"*(FGD).

In summary, this study conceptualised spiritual capacity as the specific human capacity that animates action, compassion, and solidarity in the fullness of life (Cochrane et al., 2015; Lazarus et al., 2015). It describes the amazing and universal human capacity of "creative freedom" that enables human beings to add to the phenomena that which do not reside in them and thereby imagine something that does not exist and bring it into being (Cochrane et al., 2015). This capacity can be turned to destructive possibilities or to generative ones. It,

thus, also comprises within it the moral demand of how we *ought* to act or live and to what ends. One participant emphasised the importance of mindfulness stating that *"Meditation … to become silent and think about what you do …"* (FGD) was important for promoting peace and positive forms of masculinity. The various particular forms of spirituality that signify human experience express our mindfulness of this power, of the responsibility that comes with it, of the need for a coherent grasp of the whole that grounds it, and of the embodiment of practices and attitudes that help shape it (Cochrane et al., 2015; Lazarus et al., 2015).

Various factors relating to spiritual capacity and religious assets were clearly identified in this chapter for promoting positive forms of masculinity and safety and peace. Participants, firstly, emphasised the role that men should play in the promotion of positive forms of masculinity and safety and peace. They noted that men should live out their innate goodness by promoting positive forms of masculinity. Emphasising the importance of working with males, Longwood et al. (2004) highlight that negative forms of masculinities can be overcome by working with men in small groups to develop their spirituality and reflect on their lives. This suggests that group work is essential to engage with men around key issues surrounding masculinities. Participants emphasised the mobilisation of religious assets to develop spirituality and cited by way of example the use of mindfulness.

Several spiritual values (e.g. compassion, hope, respect, care, etc.) and practices were identified as important. Related to this, the promotion of spirituality was emphasised. Faith-based leadership was highlighted, including the key role that religious leaders can play in promoting peace through their leadership in communities. Interfaith mobilisation and community cohesion was also highlighted as important. Activities organised by faith-based organisations, for example youth programmes, were also identified as important assets, as they bring people together and help to promote belonging, agency and responsibility. Religious education was also seen as important to peace promotion through promoting non-violence and positive values and principles. The role of helpful faith-based rituals and practices, including prayer, mindfulness, meditation, and providing ceremonies and rituals that heal were considered to be peace promoting and enhancing positive forms of masculinity as espoused in the literature (Amos, 2010; Cervantes & Englar-Carlson, 2008; Religions for Peace, 2009).

The promotion of generative fatherhood was also emphasised as an important means of promoting positive forms of masculinity. Participants particularly highlighted the display of

emotions such as care, communication and compassion related to generative fatherhood. Others identified the importance of providing mentors and role models in order to provide supportive relationships to young people, thereby preventing violence and enhancing safety and peace. Education was also regarded as a key method for promoting positive forms of masculinity and safety and peace.

6.7 Conclusion

In this chapter, I recounted the story by presenting the various steps pursued in the research process. In order to provide context to the story, I first presented the study setting, which provided the context to the study. Next, I recounted the initial community engagement strategy employed in this study. Then, I narrated the establishment of the local structures within the community. This was followed by a description of the research preparation. This comprised phase one of the study. Then, phase two recounted the sequence and flow of the asset mapping process and the exploration of the key concepts of the study. The following chapter will focus on phase three which entails the intervention development and initial evaluation of the *Building Bridges* violence prevention intervention. This chapter will culminate in a reflexive discussion on the CBPR process and community engagement strategy employed in the development and initial evaluation of the intervention.

CHAPTER 7

FINDINGS AND DISCUSSION:

PLANNING AND DEVELOPMENT OF THE INTERVENTION

Stories take you from a familiar scene to somewhere new. They relate change over time; they deliver ideas and supporting arguments; they attempt to convince you, to advance your thinking. Stories frame facts and organize information to bring you, step by step, to a conclusion the storyteller intended you to reach all along. It doesn't have to be a particular conclusion; the outcome can be a new way of seeing problems and deciding how to act.

(Seth Grimes, 2006, *Information Week*)

7.1 Introduction

This chapter builds on the preceding chapter, which outlined the initial community engagement strategy pursued in this study. In this chapter, I tell the story of the development and preliminary evaluation of the *Building Bridges: Building People, Building Youth, Building Community* (hereinafter referred to as *Building Bridges*) violence prevention intervention that focuses on the mobilisation of spiritual capacity and religious assets to promote positive forms of masculinity and safety and peace guided by the values and principles of CBPR.

This chapter commences with a summary of the findings of the meta-synthesis of the literature (outlined in chapter 2) conducted to identify best practices in interpersonal violence prevention, focusing on the promotion of non-violent egalitarian forms of masculinity, safety and peace as well as community mobilisation strategies. This review served as a foundation for the collective and organic development of the *Building Bridges* intervention. Next, I relay the story of the various community engagement strategies utilised to develop the intervention, including an action planning workshop entitled *Community Voices for Violence Prevention Initiatives* (22 October 2012), a conference in Strand entitled *Symposium on Violence Prevention Initiatives* (23 October 2012), and two intervention planning workshops (29 October 2012 and 1 November 2012) where the research team collectively developed a basket of interventions based on best practices and local needs and suggestions for action. These activities are included in Phase 3 of the study (see Step 6 in Figure 7.1 below). The next section of this chapter presents

and discusses the findings of the initial evaluation of the *Building Bridges* intervention (see Step 7 in Figure 7.1 below).

PHASE THREE: *Nov 2012 – May 2014*
Development of Intervention and Intervention Manual

Step 6: Intervention Development

6.1 Literature Reviews & theoretical studies

6.1.1 Summary of Meta-synthesis

6.1.2 Summary of Masculinities, violence prevention and assets

6. 6.3 Collective and organic development of
      Masculinities intervention

6.3.1 Action Planning Workshop

6.3.2 Symposium on violence prevention

6.3.3 Community Intervention Planning Workshops

6.4 Development of the *Building Bridges: Building Youth, Building Community* intervention manual

Step 7: Manual Development & Evaluation

7.1 Evaluation of intervention through participatory methodologies

7.1.1 FGD

 7.1.2 Questionnaire

 7.1.3 Delphi Panel Review

 7.1.4 Community workshop

Figure 7.1. **Schematic organisation of the storyline: phase 3.**

Together, steps 6 and 7 thus comprise the final phase of this study, which is underpinned by the following two research objectives:

Research Objective 1: *To conduct an in-depth review of the literature on best practices in violence prevention and safety and peace promotion relating specifically to the mobilisation of spiritual capacity and religious assets to promote positive forms of masculinity.*

Research Objective 3: *To document and evaluate the planning and development of an appropriate intervention focusing on the promotion of positive forms of masculinity, drawing on best practices identified through the literature review and the collective wisdom of the local community.*

7.2 Phase 3: Step 6, Development of Intervention

The intervention development step comprised various activities, the first of which was a qualitative meta-synthesis (outlined in detail in Chapter 2) of best practices in violence prevention, followed by the collective and organic development of the *Building Bridges* intervention by extracting recommendations for preventing interpersonal violence.

7.2.1 Meta-synthesis: A summary of the review of existing interventions

The Medical Research Council (Craig et al., 2008) has outlined the steps that are necessary for developing and evaluating complex interventions, emphasising that the first step to embark on before developing new interventions is to identify existing knowledge about similar intervention programmes and methods that have been utilised to evaluate them. The scope of this review embraced programmes that addressed the following forms of interpersonal violence: sexual violence, gender-based violence, youth violence and violence in residential neighbourhoods, but excluded child abuse, elder abuse and institutional violence except school-based violence.

This study used a qualitative meta-synthesis technique; in particular an ecological sentence synthesis to integrate and interpret findings from various qualitative intervention studies in order to make an informed decision on what are the best practices in interpersonal violence prevention. As outlined previously, the aim was to draw on existing best practices and, given the community needs and suggested strategies identified in the various workshops, enable the community to make a more informed decision on strategies to pursue in order to prevent violence and promote safety and peace. In order to determine which interventions were effective with which persons under which conditions, we synthesised evidence focusing on the theoretical framework, the methods used, participants, context and outcomes (see Banning, n.d.).

In this review, I focused particularly on community outreach, mobilisation and empowerment approaches, mentoring programmes, fatherhood programmes, as well as social marketing and mass media approaches, all of which have been identified as key strategies for interpersonal violence prevention (see Butchart et al., 2004; Matzopoulos et al., 2010; Sethi et al., 2010; WHO, 2014). In addition, these strategies speak to this study's key foci.

Programmes reviewed spanned from mentoring on a relationship level to mass-media campaigns on a societal level. In general, all the programmes reviewed addressed one or more forms of interpersonal violence, including youth violence, gender-based violence, sexual violence and school-based violence. All the programmes had some qualitative evaluation, but these were limited to mostly one study each, and local programmes were not formally evaluated.

A glaring paucity in these programmes is a lack of 'visible' theory underlying the programmes, with five of the programmes reviewed, not reporting on the theory underlying the intervention. One programme was framed by the ecological systems theory and another combined a systems perspective with participatory learning and action and critical reflection; two programmes were underpinned by social change theory, one by the spectrum of change theory, one by experiential learning theory, and the last one combined behaviour change with participatory learning and action and critical reflection.

The most common approaches for preventing violence among young people aged 10 to 29 years focused on skills development, including anger management, conflict resolution, and social skills to resolve conflict as well as providing a supportive relationship through mentoring. Programmes that included older adults focused on mentoring relationships in order to build the capacity of older adults to provide supportive relationships to younger people, as well as fatherhood programmes.

Many (n=9) of the programmes reviewed combined various methods and strategies. Two of the local programmes that focused on mentoring included a 'wilderness' component, using a rites of passage approach, with USIKO focusing on at-risk or youth in conflict with the law as an integral part of the rehabilitation process, and HOM focusing on first-time fathers. Another mentoring programme, Big Brothers/Big Sisters, combined mentoring with alcohol and substance abuse education, and another, the Couples Health CoOp programme, combined substance use and HIV information with various relationship building skills and an employment initiative. The fatherhood programmes combined the exploration and development of values, skills development, gender reflections (including gender stereotypes), and interpersonal relationship building. Methods used included drama, role plays, educational workshops, community outreach and mobilisation, referrals, rites of passage wilderness journeys, one-on-one counselling, group education and community campaigns.

All except one programme reviewed included a gender component comprising critical reflections on social norms and values. To address gender-based and sexual violence, approaches generally targeted schools and college students, and focused on promoting gender equitable relationships, creating a climate that does not tolerate violence.

The majority of the programmes reviewed were South African programmes (n = 8) and the rest (n = 4) were US-based programmes, with one being implemented in South Africa (Big Brothers/Big Sisters). With regard to the mentoring programmes, two programmes focused on boys and men only (but have subsequently developed a female component) in low-income contexts, one focused on high school and college male and female students, and the other one focused on male and female youth in rural, suburban and urban areas. The fatherhood programmes were geared towards low-income context people of colour. Of the two social marketing, mass media and education programmes, one was geared towards men and women aged 16 to 65 years from both urban and rural areas, and the other targeted only men of all ages in urban and rural contexts. One of the two multi-level programmes focused on men 18-74 years old, and the other targeted couples. It is clear from the above that the context of these programmes generally targeted urban and rural populations, and the majority were geared toward males with some working with both males and females.

Although qualitative evaluations of the programmes reviewed were limited, the results were generally positive. Results from the qualitative evaluations of the mentoring programmes indicate a heightened awareness of gender-based violence, shifts in attitude towards gender-based violence, and changes in behaviour with regards to violence (Cissner, 2009; Ward, 2000, 2001). These results also showed the value of a mentoring relationship for young people, indicating such relationships provided a safe space for emotional vulnerability. The supportive mentoring relationship helped young boys to manage anger more constructively, and provided them with role models that embody less inhibiting, orthodox forms of masculinities (Spencer, 2007). The evaluations of the fatherhood programmes indicated that participants changed their attitudes towards work, were able to deal more positively with conflict, and improved their relationships with their children and the mother of their children (Anderson & Kohler, no date; Aronson et al., 2003).

Results from the evaluation of the social marketing, mass media and education campaigns reported positive attitudinal change in men towards violence (Barker et al., 2007). Men who participated in these programmes proved to be more resilient against negative challenges they faced, and many of organisations have arisen with an interest in mobilising and harnessing men in addressing gender equality and HIV/AIDS issues (Colvin & Peacock, 2009). Whilst qualitative studies on multi-level integrated approaches were limited, these programmes appeared to be effective. Results indicated that male partners began to demonstrate behaviours

and attitudes indicative of changes in gender norms. These included better knowledge/skills in gender issues, improved role in child care and gender division of labour, and better management of physical and emotional violence (Ezekiel et al., 2014). This suggests that multi-level approaches are effective in promoting positive forms of masculinity and addressing interpersonal violence.

Whilst a shortcoming of the reviewed programmes was an evaluation of a direct reduction in the perpetration of violence, the results indicate an increase in protective factors linked to the prevention of violence such as better conflict management, better interpersonal relationships, increased knowledge and awareness, more egalitarian relationships, and changes in gender norms, all of which mitigate the perpetration of violence.

The following characteristics or principles of a positive masculinity approach emerged from a broad scan of the literature (Barker & Ricardo, 2005; Esplen, 2006; Jewkes et al., 2015; Lazarus et al., 2011; The Women's Commission for Refugee Women and Children, 2005):

- Address men's particular needs and concerns.
- Reach men where they are and provide spaces where men can meet.
- Approach men with positive messages.
- Identify existing gender equitable behaviours among men and build upon these.
- Provide opportunities for reflection and transformation of iniquitous gender norms to help men realise that it is acceptable to refuse to conform to dominant forms of masculinity.
- Inspire men to reflect on their attitudes and behaviours relating to masculinity and how these reproduce or challenge violence.
- Encourage men and boys to understand the oppressive effects of gender inequality on women.
- Work with youth to navigate their path to identity and sexuality formation as well as respect.
- Strengthen men's sense of care, responsibility and positive engagement as fathers through the promotion of generative fatherhood.
- Support non-violent peer support systems that promote constructive views of masculinity.

- Help men understand the value of finding a balance between constructive and destructive risk-taking behaviour to accomplish positive goals.

- Promote spiritual values, including empathy, compassion and respect.

- Build men's reflective capacities, mindfulness and self-regulation.

- Provide men with emotional and spiritual support.

- Use a 'bottom-up' approach, e.g., mobilise men to plan and coordinate grassroots anti-violence or peace promotion campaigns.

The literature review in chapter two further highlighted the following important points relating to the mobilisation of spiritual capacity and religious assets to promote safety and peace, with a particular focus on the promotion of positive forms of masculinity (Amos, 2010; Barker, 2008; Garbarino, 2007; Crawford, 2003; Haen, 2011; Harpham et al., 2002; Hipple & Duff, 2010; Knizek, Kinyanda, Owens, & Hjelmeland, 2011; Longwood, 2006; Longwood et al., 2004; Nell, 2001; Peltzer, 1997; Poling, 1999; Seedat, 2006a; 2006b; Taliep et al., 2015; Vendley, 2005; Welland & Ribner, 2008):

- Include spirituality to enable boys and men to challenge conventional masculine gender roles and envision creative ways of being men.

- Encourage non-punitive, love-oriented religion that institutionalises spirituality to act as a buffer against violence victimisation and perpetration.

- Build young males' reflective capacities through meditation and mindfulness associated with spirituality, religion and self-regulation to help them become reflectively inquisitive of their thoughts, intentions and feelings regarding others, and more capable to regulate their impulses and emotions, thereby mitigating conflict and preventing violence.

- Engage and mobilise faith-based organisations and congregations to advocate for the development of positive forms of masculinity and peace and safety promotion.

- Mobilise religious leaders to promote and activate for peace and safety by facilitating dialogue across sectors (including interfaith collaboration), promoting positive norms and spiritual values, and providing ceremonies and rituals that heal and give meaning and hope.

- Link fatherhood to spirituality by encouraging the active involvement of fathers, both physically and emotionally, in the nurturing of their children by drawing on their spirituality.

- Use rituals for working with men and boys: cultural and religious rituals have symbolic value, foster community connectedness and cohesion, mark a psychological and spiritual turning point, and can be used to memorialise certain milestones such as a transition to manhood, or celebrate achievements.

As will become evident, this broad scan of the literature and meta-synthesis of intervention programmes provided a foundation for the development of the *Building Bridges* intervention. The next step in the process focused on active community participation in various community workshops.

7.3 Collective and Organic Development of the Intervention

Three community workshops and events were held in order to plan and develop the intervention. The first event was to elicit community members' suggestions on what to include in the intervention; the second was in the form of a symposium with invited guests to hear what local experts were doing to prevent violence, and the third event was a two-day workshop with a core group of community members to develop a 'basket' of interventions. Table 7.1 below disaggregates the participants for all three workshops and indicates that, altogether, 115 participants, with a roughly equal split between male (n = 59) and female (n = 56) participants, participated in identifying the most important components of the proposed intervention.

Table 7.1

Disaggregation of Participants for the Three Community Workshops

Gender	**Planning Event 1**: Community action planning workshop	**Planning Event 2**: Symposium – Local violence prevention initiatives	**Planning Event 3**: Developing a basket of interventions	**Total**
Male	24	25	10	59
Female	17	27	12	56
Total	41	52	22	115

7.3.1 Intervention planning event: Action planning workshop

The following table (Table 7.2) provides the key for identifying the data sources from where quotations were taken in the ensuing section of this chapter.

Table 7.2

Data Source Key

Data Source	Acronym
Community Action Planning Workshop Participant	PlanEv:1
Symposium	PlanEv:2
Developing a basket of interventions	PlanEv:3

An action planning workshop, which included both community members and service providers, was facilitated by the community research team and academic researchers from VIPRU on 7 June 2012 at the Methodist Church in Rusthof, a community bordering Erijaville. There were 41 participants (24 male and 17 female) – with an almost equal ratio between service providers and community members (with some additional academic and religious leader visitors included as well). The main objective of this workshop was to elicit suggestions for local action to promote community development and, more specifically, to promote safety and peace in the local community.

The aims of the workshop were as follows: (1) to provide an overview, from the literature, on best practice in violence prevention; (2) to share the relevant findings from the asset mapping workshops and FGDs; (3) to elicit from community members their ideas and opinions of what could be added to the actions identified in the asset mapping workshops and FGDs, and (4) to hear from the participants which interventions they felt should be included in the intervention basket.

7.3.1.1 Sharing findings and eliciting ideas.

After the welcome and introductions, an overview of the day's proceedings and agenda were provided by one research team member, and signed informed consent was obtained from participants by another community research team member. The research team then collectively presented the findings from the FGDs (outlined in Chapter 6). At this point in the workshop, the facilitator went through the steps in the process of Planning for Real®, which is a formal process that is used within a community asset mapping framework (Neighbourhood Initiatives Foundation [NIF], 2009). The aim of this exercise was to obtain suggestions for local action to promote safety and peace in the local community. Participants were then given an opportunity to add to the list of ideas identified in the FGDs. Thereafter, research team members presented the findings from the asset mapping workshops and again, participants' views were elicited

and added to the list of identified actions in the asset mapping workshops. Subsequently, participants were asked to write down the two actions they thought were the most important to them. The following list (Table 7.3) emerged from this activity.

Table 7.3

Suggestions for Local Action by Frequency

Local Action	Frequency
Development of open field (Soccer Field/Hall)	14
Youth development programmes	11
Establish a Committee for Erijaville	9
Family Counselling (Including men)	7
Life Skills	6
Advice Centre (Information)	3
Church outreach	3
Support/Develop Neighbourhood Watch	2
Create Employment	2
Mentoring Programmes	2
Develop Netball Court	1
Childcare (ECD) centre	1
Disaster Resilience (Relief)	1
Youth Structures	1
Committee to prevent school drop-out	1
More involvement of Social Development	1
Elder Care	1
Involvement of Ward Counsellor	1
Reintegration of Services	1
Interfaith Assembly	1
Containers	1
Trauma Counselling	1

As indicated in Table 7.3 above, participants identified the following actions as priority actions for community development: development of the soccer field; youth development; establishment of an Erijaville committee; formation of an advice centre (which, it was suggested, would flow from the establishment of a committee); family counselling (particularly for men); life skills education; an information centre; outreach programmes by churches; development and support of a neighbourhood watch; employment creation, and mentoring programmes.

The discussion with participants highlighted that youth directed activities were seen as a priority within the community, which is an important focus in the prevention of violence as outlined in the previous section and the literature review chapter. This includes the development of the field into a sports field, youth development programmes, life skills, family counselling, mentoring programmes, youth structures, dealing with school dropout, and counselling. Some participants suggested that evening chats with youth about drug abuse would be helpful as well. With regard to mentoring, participants also highlighted the need to reach out to *"the 'corner boys' [who] need guides"* which was seen as *"important for community-building and nation building"* (PlanEv:1).
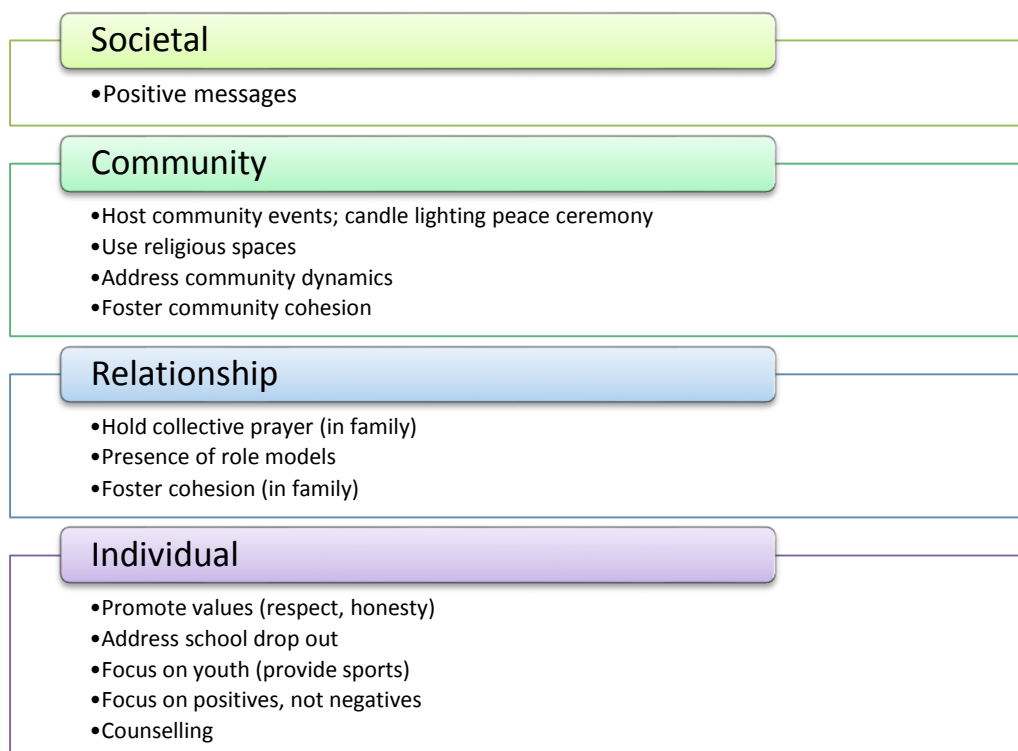
The facilitator asked about spiritual capacity and whether participants had any ideas of ways to promote this. One individual remarked that there was *"a need to uplift the moral standards and the living standards of the community"* (PlanEv:1). Another person mentioned that respect is very important in this regard. A participant argued that the churches should work against drugs, whilst a religious leader said that this was included in the "preaching". Another participant expressed that *"men want to improve but there is a lack of spiritual resources"* (PlanEv:1), while another participant said that *"we need to look at how to foster spiritual growth"* (PlanEv:1). A number of participants emphasised the importance of *"partners working together"* (PlanEv:1) including working alongside men and involving people from all faiths.

During the discussion that followed, the following two issues were raised: under-representation of certain stakeholders and under-utilisation of available resources. Some organisations, present at this workshop, noted that they had not been adequately represented in the community asset mapping process. In particular, a representative from the Department of Social Development highlighted that they were not clearly shown in the network of relationships or on the maps, yet they were an important resource involved in a number of activities in Erijaville. (This participant further noted that the Department of Social Development was working with men and boys as a priority focus, so they needed to work in partnership with others to reach communities and that this resource should be used in Erijaville. A participant from disaster management indicated that they were also not presented in the spidergram, and noted that they looked at resilience to disasters as well as homecare and that they could capacitate volunteers within the community. The participant from Rape Crisis, who was in the spidergram, mentioned that they offer counselling services, including trauma counselling and

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family counselling. In this discussion it was noted that men do not seem to use these services, possibly because counsellors are generally women, and men often see counselling as a sign of weakness. It was suggested that there was a need to involve men, and families, in counselling activities. These suggestions would be important to follow up on as part of broader community development.

As one of the workshop facilitators, I presented the results of the review on interventions that address interpersonal violence and I promoted positive forms of masculinity as outlined in section 7.2 above. Participants' views were then elicited on possible interventions that would be suitable to address interpersonal violence among young males in their community. Figure 7.2 below indicates what this group of participants regarded as the priorities to be included in the intervention focusing on the promotion of positive forms of masculinity and safety and peace by mobilising spiritual capacity and religious assets.

Societal
• Positive messages

Community
• Host community events; candle lighting peace ceremony
• Use religious spaces
• Address community dynamics
• Foster community cohesion

Relationship
• Hold collective prayer (in family)
• Presence of role models
• Foster cohesion (in family)

Individual
• Promote values (respect, honesty)
• Address school drop out
• Focus on youth (provide sports)
• Focus on positives, not negatives
• Counselling

Figure 7.2. **Community Ideas for intervention.**

As can be seen from Figure 7.2 above, many of the activities identified by the community were also highlighted in the literature (see chapter 2 and section 7.2 above). There was a particular focus on youth and the development of activities that centred on addressing interpersonal violence among youth. Participants highlighted the need for role models, a sentiment that was

echoed throughout all the previous workshops. The role of both tangible and intangible religious assets was brought to the fore as an important mechanism to be mobilised to promote non-violence, safety and peace among young people. In this regard, participants highlighted the importance of promoting spiritual values such as respect and honesty; using religious spaces for various activities geared towards peace promotion; holding a candle lighting vigil as a peace ceremony; and having collective prayers, particularly within the family, as a means to foster cohesion within the family. At a community level, participants identified community involvement through community-based events as important and highlighted community connectedness or cohesion as necessary for the promotion of peace and safety. Participants also emphasised the need for a positive approach and highlighted the importance of using positive messages.

7.3.2 Intervention planning event: Symposium on violence prevention

The next event, the symposium on violence prevention held on 23 October 2012, focused primarily on presenting best practice models and local strategies for addressing interpersonal violence, especially among young males. The symposium was attended by 52 participants (25 males and 27 females). The aims of the symposium were: (1) to hear from local religious leaders and experts what spirituality means to their faith tradition and what their understandings of spirituality offers to building peace and safety in the context of violence, (2) to hear about working with men from experts who work with masculinity and violence prevention, with an emphasis on their work and how they promote positive forms of masculinity, and (3) to generally draw from their experience and expertise.

The symposium started out with an interfaith panel discussion entitled, *"Spirituality and Religion: Friends or Enemies"*. The panel consisted of seven members (2 females and 5 males) from the following religious denominations: Hinduism, Rastafarianism, Islam, Khoi-san, and Christianity (which included a representative from the Methodist Church, the Evangelistic Church and the Charismatic Church, respectively). Participants were first asked to define spirituality according to their faith, and then they had to provide their views on ways that spirituality could build peace and safety in the context of violence.

7.3.2.1 Meaning of spirituality.

One member of the panel defined spirituality as *"the relationship you have with God ... [it] starts inside... need to have love in your heart, love is important"* (PlanEv:2). Another linked

spirituality to the connection between humans and God since both are in essence 'spirit'. He said: *"God is spirit and we are spirit, we need to reconnect"* (PlanEv:2). A third member spoke about the link between spirituality and the human soul stating that in essence *"we are soul … at one with God … God is in all of us … Soul is the cell of body of God, it's about love and unity. [Spirituality is to] rediscover that we are soul, discover God in everyone… to connect with God and everyone else"* (PlanEv:2). The link between the soul and spirituality was also made in the following quote: *"The human body contains the spirit or soul, so the body is just a vessel and spirituality is the state of the soul … it fluctuates because of your deeds. The more good deeds you do, the more your spirituality increase and the closer your connection with God and from this connection emanates peace"* (PlanEv:2). Another delegate emphasised that spirituality is evident through intangible religious values such as love, care and compassion and through our actions. She stated that spirituality is *"love … we must have love, care for our fellow human being, have intense concern (compassion) and love for [them]. You need to know about the needs of people… give to people"* (PlanEv:2). Spirituality was also linked to responsibility to care for the earth and one's family as indicated in the following quote: *"God gave the earth to man … God's temple … family, I must look after the family"* (PlanEv:2). Panellists' understanding of spirituality was thus seen as a kind of transcendent reality that takes us beyond where we are; it is connected to values such as love of God and love, compassion and care for others and the self; and our responsibility relating to people and the earth was also regarded as important.

7.3.2.2 Ways in which spirituality can build peace and safety in the context of violence.

One female member of the panel noted that it is important for human beings in an interfaith context to find commonalities and respect diversity in order to foster cohesion and harmony to be able to work together to promote peace and safety. She stated: *"we must respect everybody; find commonality to foster peace and safety. If we work together we will have peace"* (PlanEv:2). Other panellists supported the importance of working together: *"We must stand together and help them [the children]."* and *"We must be united, we mustn't be against [each] other… we must be together"* (PlanEv:2).

Values were again highlighted as an important spiritual capacity that can and should be mobilised to promote peace, safety and non-violence: *"We must care for and love each other"*; *"We must have respect … come together … love together … look after each other"*; *"Love plays an important role"* and *"Respect all even the man on the street, you don't know their*

pain" (PlanEv:2). Faith and hope was also identified as important: *"Faith ... we have lost hope, lost faith and action. We have also lost being humble. Through humbleness, we will be kind"* (PlanEv:2). Another member of the panel echoed the importance of faith linked to action. He stated that we must put *"faith into action. You believe and put it into action ... you need to walk in the fruit of the spirit"* (PlanEv:2).

One member of the panel emphasised that the essence of the soul is peace. Alluding to the importance of mindfulness in attaining peace, he stated: *"The soul does not know violence... find the soul... [through] meditation and prayer. Connect with the soul within. We have to learn to deal with our mind, emotions [to] bring peace inside, bring peace to the world"* (PlanEv:2). At the same time, he also stressed that not dealing with negative emotions leads to violence: *"feelings like anger, envy, hurt, jealousy creates violence ... So I must understand my mind and emotions and deal with them so that I am non-violent"* (PlanEv:2). This essentially highlights the need for the use of mindfulness as well as the development of conflict management and communication skills to promote non-violence and peace.

Importantly, the results tell a story of religious leaders' views on building peace, safety and non-violence. The findings highlighted the importance of values; unity, cohesion and working together across faith denominations by focusing on what everyone have in common. Findings also emphasised agency, faith, meditation and prayer as means to enhance spirituality and by extension safety and peace. All of these relate to the notion of spiritual capacity and religious assets, which have been identified in the literature as possible means for promoting positive forms of masculinity and safety and peace as outlined in Chapters 2, 4 and 6 (see Amos, 2010; Cochrane et al., 2015; Hipple & Duff, 2010; Religions for Peace, 2009; Taliep et al., 2015; Vendley, 2005).

The next presentation on masculinities and its link to violence was presented by Prof. Kopano Ratele from the Violence Injury Peace Research Unit, who reflected on the Marikana massacre that included the brutal killing of 34 miners by police. He emphasised that the majority of victims of violence in the Western Cape were young black or coloured males and cited that reasons for the high levels of violence amongst this cohort included group pressure, lack of money, joblessness, and lack of boundaries for young males as opposed to females of the same age group. Importantly, he emphasised that hegemonic masculinity makes it difficult for men. Reflections that emerged at the end of the presentation called attention to the importance of

fatherhood: *"the father is important"* (PlanEv:2). Participants also emphasised values and the practice of respect as key factors, not just for the family, but also for the community at large. Participants also underscored their role as role models, stating that that they *"can help single female parents"* (PlanEv:2).

The next presentation on masculinities and fatherhood was conducted by Lionel Arnolds, a representative from the Department of Social Development. Arnolds highlighted that fathers were often either invisible or absent. He noted that a large number of children (more than seven million) grew up without fathers. With regards to the negative impact of father absence (e.g., crime, violence, etc.), he noted that this impact could be exacerbated by broader contextual factors, as opposed to just father 'absence' per se. Arnolds emphasised the importance of the promotion of generative fatherhood as a key component of any intervention to address the intergenerational transmission of harmful stereotypes and power relations. In this regard, he noted that the promotion of responsible, devoted and involved fatherhood is a crucial *"component of any attempt to transform families and societies into new norms that better reflect gender equity, child rights and shared parenting responsibilities and enjoyment"* (PlanEv:2).

The third presentation, presented by myself, focused on an overview of the literature on best practice in violence prevention (as outlined in section 7.2 in this chapter). In the discussion that followed this presentation, community members emphasised the need for working with young people in their community: *"Young people … there is nothing for them. In the schools, there is no discipline"* (PlanEv:2). One participant emphasised that *"there is no one answer to violence … more than one thing we need to do. [We need to] focus on masculinity, but it's for the whole community to address [it]"* (PlanEv:2). Another suggested that we need to look at the mechanisms of change: *"What changes in the man? Attitudes influence behaviour, attitudes influence the way we look at things [and this] changes behaviour"* (PlanEv:2). Another suggested a *"masculinity programme working with men who are angry (violent) … instead of putting them in jail … reorienting their anger"* (PlanEv:2). Interfaith collaboration was suggested as an important means to address violence: *"The churches could work together … different faiths … work together, stand together as religious groups to make a change"* (PlanEv:2). Participants also emphasised role-modelling, stating that: *"I must live what I preach. I must show love especially to the children. I must reach out"* (PlanEv:2).

This was followed by presentations of local initiatives to prevent violence, in particular the Jamestown Usiko Youth Development Project by Prof. Tony Naidoo; The HOM Fatherhood Mentorship Programme presented by Richard Kloosman, and The Western Cape Men and Boys Network by Allister Lightburn (see Chapter 2 for a full overview of these programmes, and section 7.2 of this chapter for the meta-synthesis). The HOM Fatherhood programme, which is a mentoring programme with a fatherhood and rites of passage focus, was of particular importance to us, as HOM was one of the key community partners with whom we collaborated in the development of the *Building Bridges* intervention.

7.3.3 Intervention planning event: Developing a basket of interventions

The next step in the development of the *Building Bridges* intervention comprised a workshop spanning two days (1-2 November 2012) to develop a basket of interventions. Day one of the workshop included 22 participants (10 males and 12 females) comprising the community research team (n = 10), two academic researchers from VIPRU, three advisory committee members, five other community members and one HOM member. Day two comprised only the research team and two academic researchers.

The process entailed drawing from all the information collected up to that date (Asset Mapping Workshops, the FGDs, the Action Planning Workshop, and the symposium on local violence prevention initiatives). The planning steps of Planning for Real® (NIF, 2009), (see Appendix E) were used to guide the process. I drew together a list of all of the suggestions from the various data sets (see Figure 7.3 below) and presented it to the participants. Using a system-level and target population (youth and adults) frame, the 'basket of interventions' was then developed through collective decision-making.

Figure 7.3 outlines the components that the participants wanted the intervention to cover. This was very comprehensive, so we had to follow a process to narrowing it down, using the ecological framework as a guide. As can be seen from this table, eight areas of focus emerged: mentoring, fatherhood, gender transformation, religion, spirituality and values (combined as one area), a youth focus, a community focus, and skills development.

Before finalising the basket of interventions, each suggestion was checked against the CBPR principles (see Chapter 3) and other considerations. These included the following:

- The intervention had to be realistic (for this community, in this time-frame, with these resources);

- The intervention components had to reflect the values and principles of CBPR;

- The intervention components had to use principles learnt from best practices;

- The intervention components had to be guided by appropriate change theories;

- The intervention had to focus on promoting positive forms of masculinity; and

- The intervention had to mobilise spiritual capacity and religious assets to promote positive forms of masculinity.

After identifying the core components for the intervention, we used the steps in Planning for Real® (NIF, 2009) for each of the interventions on which we agreed. This entailed writing the action/intervention on a card; then on yellow post-its; and then all participants identified the steps that needed to be taken around each action or intervention. Thereafter, on green post-its, participants identified who would take charge of each action. A plan of action was then created for each of the interventions. Figure 7.4 below provides a visual depiction of the intervention development process.
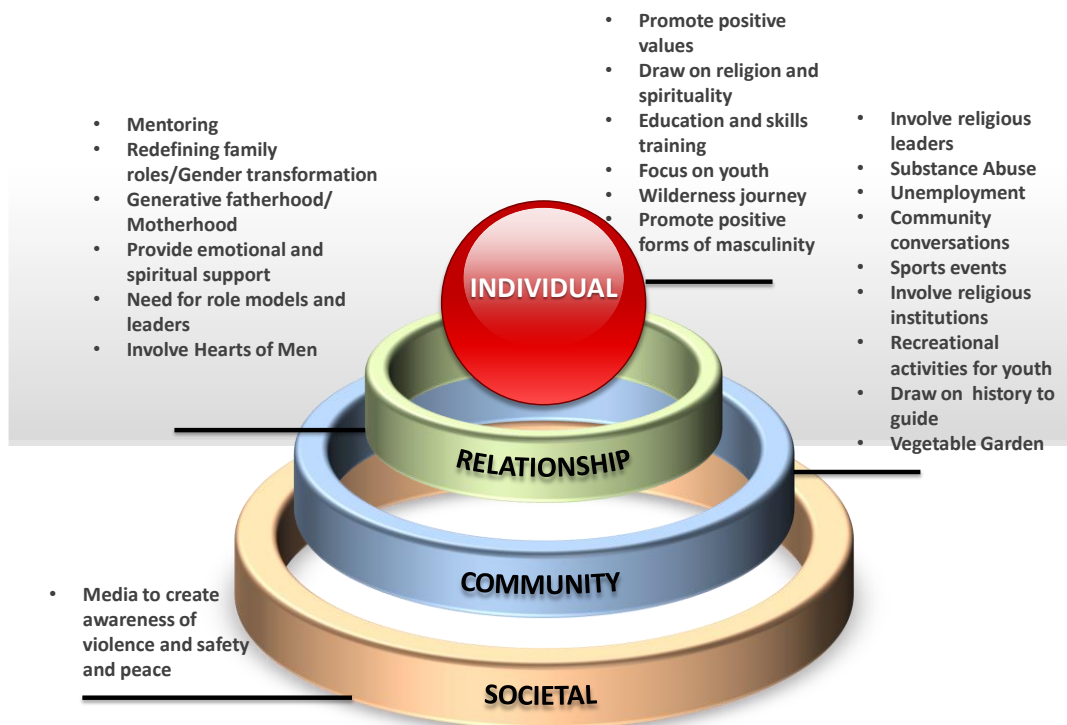

Figure 7.4. **Developing the basket of interventions**
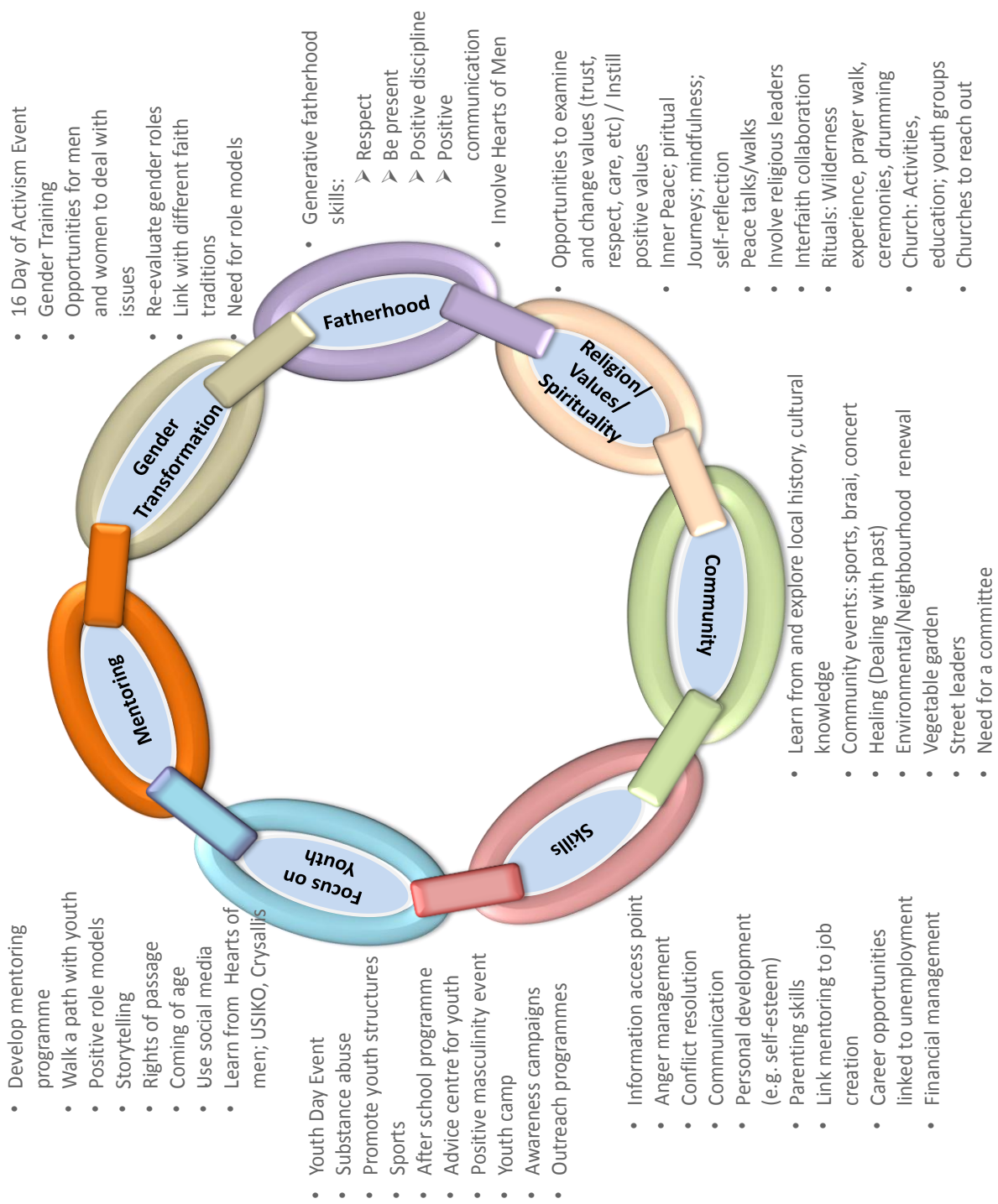
Figure 7.3. **Suggestions for action.**

Using the process discussed above, participants agreed upon the intervention components outlined in Figure 7.5 below.

Figure 7.5. **Proposed intervention foci at a systems level**

The core components emerging from this participatory process of identifying the intervention components (outlined in Figure 7.5 above) included the following at the individual level: promoting positive values; drawing on religion and spirituality; promoting non-violence through education and various skills training; providing a wilderness journey; including a focus on youth; and the promotion of positive forms of masculinity.

The following core values in Table 7.4 below (respect, compassion, hope, responsibility, trust, building relationships, mindfulness and agency) emerged as key components of spiritual capacity and religious assets that the participants felt should be included in the intervention.

Table 7.4

List of core values

List of core values			
1. Respect **a**. Dignity b. Reciprocity /mutuality c. Equality	**2. Compassion** a. Love b. Acceptance c. Empathy d. Care	**3. Hope** a. Anticipation of change b. Forward imagination c. Willingness to risk	**4. Responsibility** a. Leadership b. Role Modelling c. Action-taking
6. Trust **a**. Attestation (pledge to do or be something) b. Dependability c. Healing d. Forgiveness	**7. Relationships** a. Connections/ Connectedness b. Belonging c. Cohesion d. Communication	**5. Mindfulness** a. Reflexivity b. Prayer c. Meditation	**8. Agency** a. Creative action/initiative b. In/Empowerment c. Positive mindset d. Courage e. Choice

At the relationship level, participants suggested that mentoring was crucial, but that this should include components of gender transformation, including gender role clarification, generative fatherhood and, importantly, participants felt that women and femininity needed to be included in the intervention. This meant that our initial focus on males only had to be changed in response to the community's needs and wishes. Another relationship level component was the creation of emotional and spiritual support structures for youth specifically. Participants also felt that it was important to include HOM in the programme. HOM had been involved in the planning right from the start and agreed that their manual, which was still in an unpublished format, could be incorporated into the *Building Bridges* manual.

Community-level components included involving religious leaders and religious institutions, running a substance abuse and unemployment campaign, and drawing on the community's history (using experiential learning strategies). Other community level suggestions included providing sports activities for youth and developing a vegetable garden. Two of the participants who attended the community asset mapping workshops actually started a rugby team and a netball team, respectively. At a societal level, participants felt that using the local media and regular awareness campaigns were important, such as youth day events and peace marches.

After some deliberations the team decided to narrow the focus of the intervention by focusing primarily on a mentoring programme, incorporating the core components aimed at addressing violence and promoting positive forms of masculinity and peace and safety. The idea was that, through capacity building, adults in the community would acquire the necessary knowledge,

insights, attitudes and skills to be mentors, role models and leaders for young people in the community, and that young people in turn would be provided with a supportive and caring relationship and basic capacity-building skills such as communication and conflict management skills.

7.4 The *Building Bridges* Intervention

The overarching aim of the *Building Bridges* intervention was to mobilise spiritual capacity and religious assets to promote safety and peace, with a particular focus on promoting generative or positive forms of masculinity, and to strengthen the role of women to work alongside men as agents of change. The multi-theoretical framework (see Chapter 4 for details on these perspectives) that guided the development of the intervention included (1) a critical approach which looks at engaging notions of masculinity and femininity and its implications, and (2) an ecological approach which looks at violence prevention from a multi-level systemic lens. The theories of change (see Chapter 4 for details of these perspectives) that underpinned the intervention included: (1) principles of critical theory; (2) principles of ecological systems theories ; (3) Knowledge Attitude Behaviour theory; (4) values in relation to change education models (Kirschenbaum's Comprehensive Values Education), and (5) experiential learning theory.
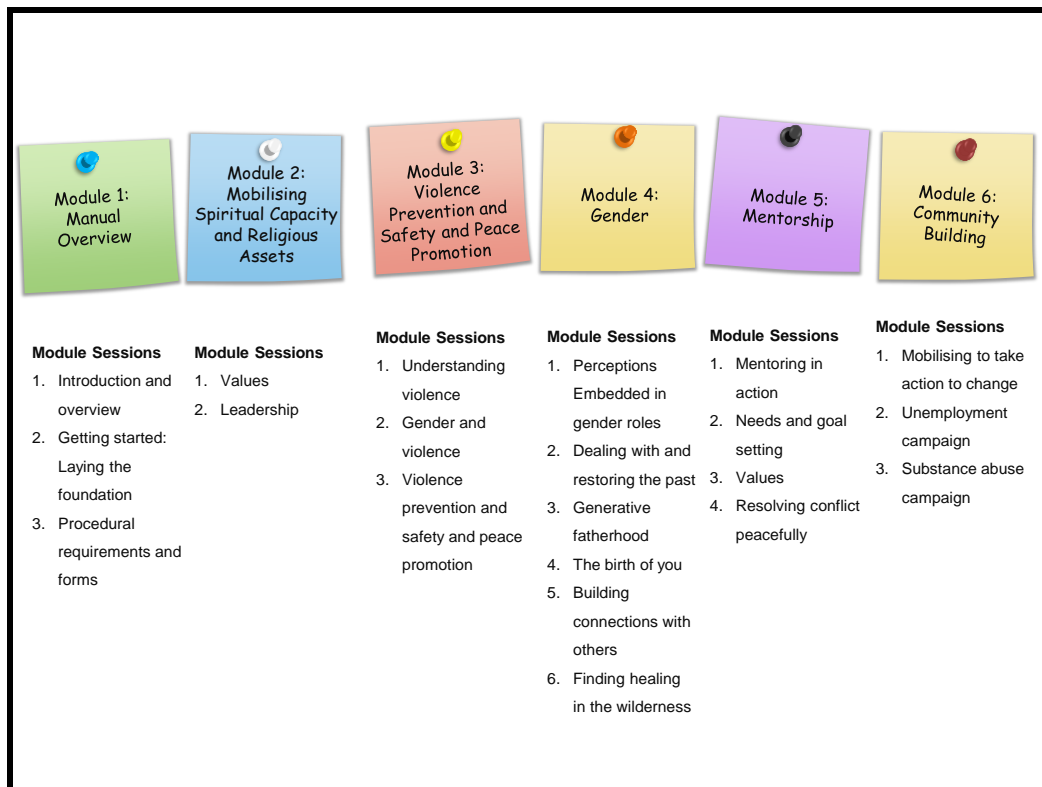
The *Building Bridges* intervention aims at strengthening individuals, families and communities through mentoring and capacity building, where the younger generation learn from the elders through positive socialisation processes. The aim is to create strong connections by matching young people (mentees) with adults (mentors) in order to promote the development of caring supportive relationships. The *Building Bridges* intervention is a gender transformative intervention that endeavours to promote gender equitable relationships by applying transformational processes to create agency and responsible citizenship.

More specifically, the aims of the *Building Bridges* intervention are:
1. To promote non-violence, peace and safety by mobilising spiritual capacities and religious assets;
2. To mobilise males and females to work together to transform overall community health;
3. To transform the dominant forms of masculinity that are destructive to men, women and the community as a whole;
4. To promote generative masculinities;

5. To transform understandings of positive community values;

6. To change harmful beliefs and practices that lead to violence through knowledge and skills development;

7. To provide mentors with the skills to mentor young males and females;

8. To provide mentees with the skills to counsel peers (this aim has subsequently been removed after the process evaluation conducted on the intervention implementation);

9. To provide mentors and mentees with the skills to devise community campaigns addressing unemployment and substance abuse.

The intervention consists of six modules incorporating 22 sessions, as indicated in Figure 7.6 below. Module 1 comprises three sessions.

Figure 7.6. **Components of the *Building Bridges* intervention.**

Session 1 provides an overview of the research project, as well as the objectives, methodology and theories of change that informs the intervention. Session 2 outlines who the manual is for, the structure of the manual, how to use the manual and setting up the learning environment. Session 3 concerns the procedural requirements that outline the steps to follow for the mentor

recruitment and screening procedure as well as the relevant documentation (such as consent forms).

Module two comprises two sessions. Session 1, called 'values' explores the values (identified through the research), provides mentors with basic knowledge and understanding about these values, including exploring the values the participants hold or aspire to hold. Session 2 explores what leadership is, and focuses on developing a range of leadership skills.

The third module, called 'Violence, and Safety and Peace Promotion', has three sessions. Session 1 covers basic knowledge of violence and explores the experiences of men and women as victims and perpetrators of violence. Session 2 provides information on understanding the gendered nature of violence. Session 3 explores various ways of promoting safety, peace and non-violence.

Module 4 stimulates thinking around important events that have shaped participants' perceptions, attitudes and behaviours. Session 1 allows participants to explore and personalise the experience of gender stereotypes and expectations, and creates awareness around personal perceptions around masculinities and femininities. Session 2 provides a reflective space for participants to deal with and learn from their past by resolving issues that hold them back. In Session 3, generative fatherhood and motherhood is explored. Session 4 enables participants to reflect on and have a sense of who they are, and to provide them with the skills to change their lives in a positive direction. Session 5 focuses on relationship building and the skills to build effective relations with others. The final session in this module, called 'Finding Healing in the Wilderness', is completed over a weekend at an outdoor location in the wilderness. The aim of this session is to facilitate a connection to nature in order to find a sense of connectedness, meaning and purpose. Through various learning modalities, including rituals, this process focuses on developing participants' 'sense of spirituality', building their reflective capacity through mindfulness and awareness creation, providing a calm space where each participant can discover their perspective in life, and exploring who they are and where they are going. Module 1 to 4 covered the mentor training sessions.

Module 5 called 'Mentorship', covers the mentee training sessions. Session 1 encompasses the qualities and skills required to enable mentors to provide youth (mentees) with a supportive relationship. The next three sessions cover various topics including setting goals, exploring

values, risk-taking, violence and how to resolve conflict peacefully. It also explores gender and covers basic communication skills. These sessions are facilitated by the mentors who completed Modules 1 to 4.

The final module in the manual is aimed at empowering mentors and mentees to develop community campaigns, with a specific focus on unemployment and substance abuse (identified by the community as the key risk factors for violence). The sessions provide a step-by-step process for community members to identify, plan, develop and implement campaigns, and also provide contact details of relevant stakeholders they may consult in the process.

Experiential learning methodology is employed throughout the various sessions of the manual. The activities are interactive, so participants learn by drawing on their own experiences (e.g., through role-playing or problem-solving); by sharing or reflecting (e.g., talking about experiences, sharing reactions and observations); through processing and analysing experiences and applying what they have learnt to a similar or different experience (see Kolb & Kolb, 2010; Northern Illinois University, n.d.).

7.5 Evaluating the *Building Bridges* Intervention Manual

Various strategies were pursued to evaluate the *Building Bridges* intervention manual. These included (1) a questionnaire with the community research team members to determine their views on the extent to which the planning and development of the intervention reflected the CBPR principles, the extent to which the planning and development of the intervention covered overall intervention criteria, and how well the intervention manual was developed; (2) a focus group discussion with the local community researchers, where participants were asked to reflect on the development of the intervention and the manual, specifically focusing on the CBPR principles followed in the development of the intervention and the manual; (3) a community workshop with community members and service providers, where the community research team presented the intervention manual, its objectives and activities and received feedback from the community; and (4) a Delphi expert panel review that comprised experts (n = 9) in the field of masculinity, violence and safety and peace, spiritual capacity and religious assets, and local community expertise. Details of these instruments are outlined in the methodology chapter. The following table (Table 7.5) provides the key for identifying the qualitative data sources from where quotations were taken in the ensuing sections of this chapter.

Table 7.5

Data Source Key

Data Source	Acronym
Focus Group Discussion with Research Team	RT FGD
Delphi Panel Review	Delphi P
Community/ Service Provider Manual Feedback	ComServ

In order to assess whether the *Building Bridges* intervention met the previously defined intervention criteria (as outlined in the Analysis Framework 2 in Chapter 5), we triangulated the four sets of data. The evaluation centred on the congruence between the focus of the intervention and the needs the programme has to address, the design and aims and objectives of the programme, the definition of the target population, the expected outcomes, and the means by which the programme intends to attain those outcomes (see Rossi et al., 1999; 2004).

The findings are presented under the following criteria: (1) Intervention congruence with community needs; (2) alignment of the programme components with aims and objectives; (3) the conceptual basis of the intervention; (4) whether the intervention is evidence-based; (5) the target population; (6) the planning of the intervention, and (7) the manual content and structure.

7.5.1 Intervention congruence with community needs

In order to assess intervention congruence, we looked at the extent to which the project aims were consistent with the local priorities or needs of the target population, and whether the activities were congruent with the stated aims and objectives of the intervention. When asked whether the aims and objectives of the intervention were consistent with the needs of the community, all participants replied in the affirmative. One of the research team members stated, *"Yes, it's about the needs"* (RT FGD). Referring particularly to the training of mentors and mentees another stated:

> *Yes, I think so… I think the group of mentors and mentees can make a difference. I think that the goal was so that these people can work with another group, which means that if we reach this group with the intervention then we would reach the goal of the study.* (RT FGD)

Concerning how the aims and objectives were devised, one FGD participant noted that *"We just put it together"*. All except one participant agreed that they were part of devising the aims and objectives of the intervention. The one who disagreed stated that *"it was the*

academic people who compose the five aims and objectives; it didn't come from the community. It was only the values that came out of the community with the workshops we did, but not the aims and objectives" (RT FGD). However, it appears that this participant confused the five broader SCRATCHMAPS aims that were presented to the community initially by the academic researchers and endorsed by those present, as the intervention itself has nine aims as outlined previously. Another FGD participant stated that *"there was an outcry for help and the help is here".* A third participant corroborated this view, indicating: *"What happened in the workshops is that those aspects are what the people longed for and it fell in line with the aims and the objectives".* Elaborating further, another stated that *"it's about the needs"* and added:

> *The outcry was present and help came from the research team. Other people just came with the thing... This is why we talked about a process. So if it didn't come from the community, if they didn't say that there are certain aspects for e.g. unsafe spaces then we wouldn't have known about it. There is always a root to a case* (RT FGD).

This highlights that the aims and objectives of the *Building Bridges* intervention emerged from the needs of the community, and were devised through an intensive participatory community engagement process, as discussed previously.

7.5.2 Alignment of programme components with aims and objectives

FGD participants were asked whether they thought the different activities spoke to the aims and objectives that were in the manual and whether these were clear. They agreed that the aims and objectives were clear and the activities were congruent with the aims and objectives, although some of them sounded a bit unsure. One participant stated: *"Yes, because at the workshops that we had with the community it looked like they have found it interesting, so that means it is very clear and it would work"* (RT FGD). One of those who were hesitant replied: *"I haven't seen the entire manual [i.e. as a whole], but what we have done so far, I would say yes, [there is congruence between the activities and the aims and objectives]"* (RT FGD).
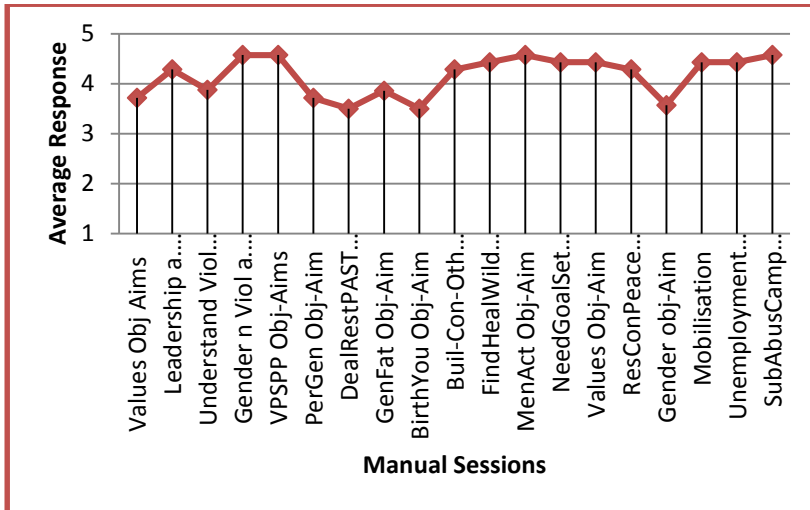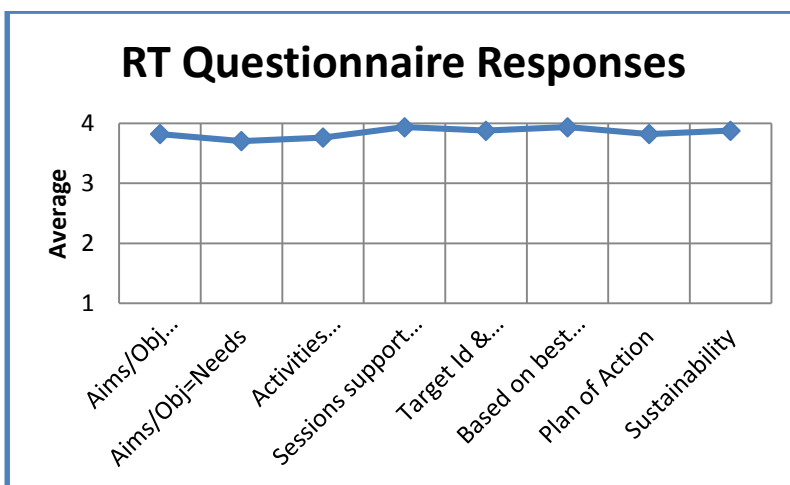
Figure 7.7. **Alignment of module aims and objectives (Delphi panel).**

On average, the Delphi panelists agreed that the aims were aligned with the objectives of all the modules, with the exception of three sessions (see Figure 7.7 above). Panelists felt that the aims and objectives of the following sessions: "Dealing with and restoring the past", "The birth of you" and "Gender", were 'somewhat aligned'.

The results of the questionnaire in Figure 7.8 below indicate that on average participants strongly agreed that the aims and objectives of the intervention are aligned; the aims and objectives are congruent with the community needs, and the activities address the aims and objectives.

Figure 7.8. **Alignment of module aims and objectives (questionnaire).**

7.5.3 Conceptual basis of the intervention

In order to evaluate the conceptual basis of the *Building Bridges* intervention, we assessed the linkages between the different parts of the programme (see Rossi et al., 1999; US Department of Health and Human Services, 2011). Participants' opinions were explored on the links between all the parts of the intervention and whether these had been made clear to them. When asked what their expected outcomes of the intervention were, participants emphasised building role models, changing people's thinking, improving interpersonal relationships, fostering values, establishing support groups and providing young people with a supportive relationship (mentoring) to walk a path with them. This can be seen in the following extracts from the focus group discussion with the community research team members (RT FGD):

> *We want to build role models in the community with the intervention. We want to make a difference in the thoughts of the people.* (RT FGD)

> *[Expected outcomes include] improvement in scholastic behaviour and tertiary education;, improvement in personal relationships; respect for older people, even nurturing; better caring for children; more compassion, more respect, and positive activities, for example, for me one of the outcomes could be a chess club.* (RT FGD)

> *A lot of us get involved with the wrong things, then we break down. If the intervention can make a difference for those people then its good, even though you could use 12 people as mentors and only 1 of them decide to make a changes, it doesn't matter how small the environment is, he can make the changes.* (RT FGD)

When participants were asked whether the activities in the manual would produce these outcomes, participants agreed that the activities of the intervention would produce the expected outcomes. They all noted that they could particularly relate to some of the stories in the activities since they wrote them and it reflects their reality. One participant mentioned the following:

> *The scenarios that are being used in the manual is* [sic] *stories that we wrote of the people that lives* [sic] *inside the community. So, the mentors and mentees that [are] going to be on the program [are] people that can relate, because the scenarios is* [sic] *the reality of what happens in the community. I think that this is amazing.* (RT FGD)

Another participant expressed that the values component will especially produce the expected outcomes and stated the following:

> *Yes…especially if you talk about the activities on values. This activity needs a person to reflect on themselves. This activity or chapter stands out to me because it is where you go back and look at yourself and ask yourself questions such as, 'Do I really live on these values; can I make a difference with these values'?* (RT FGD)

The above quote demonstrates the use of critical reflexivity as a training modality used in the manual. A different participant envisaged learning and gaining knowledge that he could transfer to others as an outcome of the intervention:

> *I don't want to miss out on this, we are starting with the very important part and I want to be there. I think this is what encourages us. It is not about the money, it is about making a difference. I want to see change; I want to learn. It is necessary for me to get information and to spread the information. I hope and trust that they will experience the same.* (RT FGD)

Speaking about the wilderness component of the intervention, a participant noted the following:

> *I think a getaway weekend is a good idea because there will be space for them on their own, instead of just seeing the circumstances and the environment where they currently reside. This is exactly how I found myself. I decided to go mountain climbing.* (RT FGD)

7.5.4 Programme designed on best practice

When exploring whether other literature and best practices were drawn on to develop the intervention, responses to the questionnaire (see Figure 7.8 above) indicate that all the participants agreed that the intervention was based on evidence of best practices. The research team members who participated in the FGD unanimously agreed that this was the case. The literature review and meta-synthesis results outlined in Chapter 6 and section 7.2 of this chapter have shown that this intervention is based on best practices in violence prevention.

FGD participants noted the following: *"Usiko that worked with us. Then there was Lionel Arnolds that is also busy with this type of thing. He is doing his PhD on positive masculinities, so all of these people were involved"; "The best resource we could find was Hearts of Men"* and *"I think so. I also think it's why the colloquium was held. Then there was the Delphi Panel"* (RT FGD). These quotes and the data in the previous sections indicate that the literature as well as existing strategies served as a foundation for developing the *Building Bridges* intervention.

7.5.5 Description of target population

Specifying the target population is critical when designing the content and structure of the programme (Rossi et al., 1999). With regards to the description of the target population of the *Building Bridges* intervention, the results of the questionnaire indicate that participants strongly agreed that the target population was specified (see Figure 7.8 above). FGD participants highlighted that the target population was discussed with the community. One RT FGD participant noted the following: *"Yes, that is also something [i.e. the recipients of the intervention] that was brought up that people of the surrounding areas was not going to be involved and that during this period of time, it would strictly be used for those who live in the community"* (RT FGD). Thus, the community decided to confine the intervention to Erijaville only. Another participant highlighted that there were exclusion criteria: *"Yes, I think that there are some things that could exclude a person. For example, if someone had a drug addiction, when a child is too young ... [or] people who had prior sexual cases against them"* (RT FGD). In the community/service provider workshop, the target population of the intervention was finalised. It was agreed that *"mentees could be 13 to 19 years of age and mentors 20 years and older ... to be paired age appropriately"* (CommServ). However, during the discussion that ensued at the community workshop, participants suggested that we should consider 12 year olds to be mentees as well.

Since the intervention initially had only a masculinities focus, the manual content was geared towards training male adults in the community as mentors and young boys 14 years and older as mentees. However, community members felt that the intervention needed to have a femininity focus as well. Agreeing with the inclusion of a femininity focus, participants in the community/service provider workshop provided final input on the intervention manual. One participant stated the following: *"The intervention is important, including women are [sic] important because women are regarded as non-entities: only men are seen as leaders, women are second class citizens"* (CommServ). Furthermore, other community members suggested that we also invite *"the advisory committee members and community leaders when we do the leadership training"* (CommServ).

7.5.6 Planning (Logistics) of the intervention

In terms of the planning and logistics for the implementation of the intervention, the results of the questionnaire indicate that participants agreed that the logistics for the intervention implementation were completed (see Figure 7.8 above). Participants in the FGD concurred,

and highlighted various tasks that they would have to fulfil during the implementation of the intervention. One participant indicated the following: *"Yes the practical side is that all of us had a part, for example, people were responsible for food".* Other FGD participants emphasised their involvement, stating:

> *Yes, there we decide who is going to do the workshop, who is going to do the talking, who is going to do certain things like the sound, the board, the security, who is going to take the photos, all of that kind of things [sic].* (RT FGD)

> *Then we also know who is going to be part of the mentor programme, who are [sic] going to do the evaluations, who must be the observer, so I think we are sorted, we just have to apply this practically tomorrow.* (RT FGD)

In the community/service provider workshop, participants suggested that the training should occur at the local Rusthof primary school or one of the local churches. Some participants suggested that *"Training should be done 4 hours every second week for a period of six months"* (CommServ). Participants also suggested that those who complete the training should be given *"honorarium certificates"* and that *"disabled people should be allowed to apply to be mentors or mentees"* (CommServ).

A year planner was drawn up (Appendix L) indicating the date and time of workshops, the facilitators responsible for implementing sessions, as well as detailed agendas for each training session were also drawn up (see Appendix M).

Figure 7.9 below represents the community views emerging from the survey questionnaire on the orientation section of the manual, which focuses on the relevant ethical considerations and documentation, provides an overview of the manual discusses of the underlying theories, and describes how the manual works. (Scoring of the research team survey was on a scale of 1 to 4 ranging from *strongly agree* [4], *agree* [3], and *don't know* [0] to *do not agree* [2] and *strongly disagree* [1]).
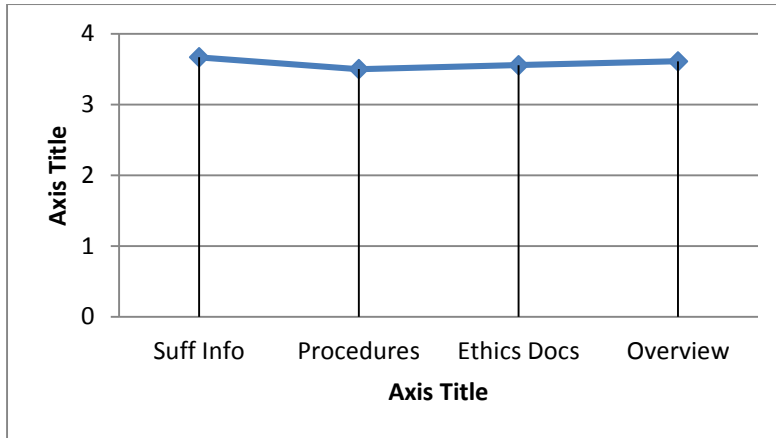
Figure 7.9. **Community views on manual overview session (questionnaire).**

Most community members strongly agreed that the overview session of the manual was presented in an easily accessible way, contained sufficient information on how the intervention works, and explained the necessary procedural requirements needed to implement the intervention. Most participants agreed that the manual contained the necessary documents needed to abide by ethics and provided a clear overview of the intervention. On average, the Delphi panellists (see Figure 7.10 below) strongly agreed that the manual provided sufficient information and was accessible. (Scoring of the Delphi panel review was on a scale of 1 to 5 ranging from *strongly agree* [5], *agree* [4], and *don't know* [3] to *do not agree* [2] and *strongly disagree* [1]).
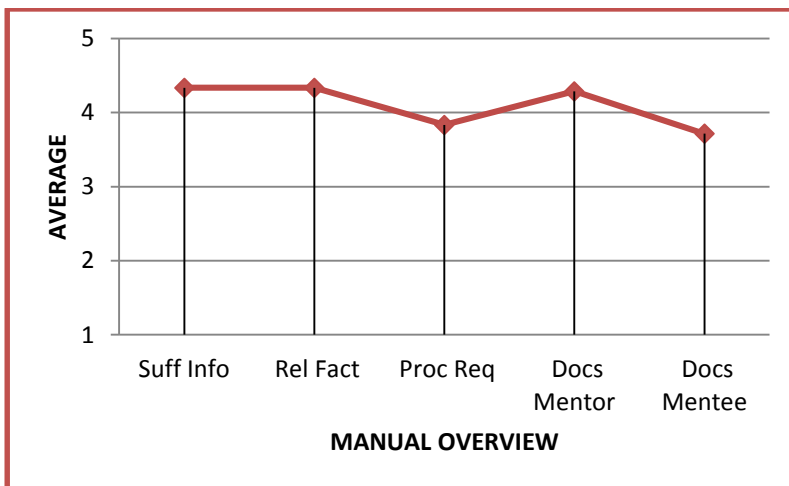
Figure 7.10. **Delphi panelist views on manual overview session.**

They agreed that the manual explained the necessary procedural requirements needed for implementation, and had the necessary documents to abide by ethics standards. However, some Delphi panellists felt that this section still lacked certain documents and suggested that we

"consider including mentee reference, application and consent forms in the appendices" (Delphi P). This was subsequently added to the manual.

7.5.7. The manual structure and content

In order to evaluate the overall structure of the manual and develop consensus on the *Building Bridges* intervention components, we obtained participants views and perceptions on the following: (1) overall structure of manual, (2) accessibility (suitability and language), (3) content (sufficient coverage of core areas), (4) suggestions for improvement, and (5) sustainability.

7.5.7.1 Overall structure of the manual.

When asked about the manual structure, RT FGD participants noted the following: *"it is logical"* and *"I think everything is right. I just think that adjustments could still be made"* (RT FGD). When asked whether the instructions in the manual were clear and accessible, participants replied in the affirmative and one noted: *"It's understandable and you could learn from it"* (RT FGD).

Regarding suggestions to improve the manual, one FGD RT participant had the following to say: *"At this moment I don't have any suggestions, but as the intervention and program will move on, I feel that change and adjustments could be made"* (RT FGD). Another stated: *"I think we already made changes. If in future changes should be made, it would be"* (RT FGD). A third participant stated: *"I think what is important is the fact that we already improve[d] the manual from Hearts of Men and it's clear"* (RT FGD). They also agreed that the pictures used in the manual were appropriate, but felt that more pictures of children should be in the manual. The following excerpts demonstrate this: *"Participants agreed that the titles were suitable to the content"; "Everything is acceptable"; "I think that these pictures are fitting of the community and it sends a clear message out and tells a story"; "The community can relate and this makes the manual personal"; "The children should also be in it"* (RT FGD). Someone suggested using more local pictures as this he said *"would help people feel like it belongs to them. It would give them a sense of ownership"* (RT FGD).

RT FGD participants were asked whether they thought that there is enough content on each of the following areas: spiritual capacity and religious assets, violence prevention and safety and

peace promotion, the promotion of positive forms of masculinity and community mobilization in the manual. The FGD participants all answered in the affirmative.

The final question posed to the FGD participants was whether they had any other comments about the manual. One participant responded, *"All that I can say is that the time that we will be spending with this intervention should make all the negatives be cast aside and make people more honourable and respectful"* (RT FGD). Another participant highlighted the team spirit that prevailed among the group of research team members, which in itself is a key outcome of this whole process of developing the intervention: *"We here have become a family. If nothing comes out of this, at least I would feel like I didn't waste my time"* (RT FGD).

All Delphi panellists agreed that overall, the manual was well-structured, but some mentioned room for improvement. Comments by Delphi panellists regarding the overall structure of the manual included: *"[It is] very well done. I think it works very well"; "Really well structured for the purposes of the project"; "The structure is good"* and *"Good experiential learning method used throughout"* (Delphi P). Other panellists emphasised that the manual *"needs more consistency regarding target group section of the session"*. Another panellist stated the following: *"Overall the structure is coherent and systematic. There is a transition though from Module 5 to Module 6 that needs some explanatory note for the mentors and mentees"* (Delphi P).

One reviewer expressed his awe for the extent of work that has gone into developing this manual and how commendable it is, but expressed concern about the content:

> *There is a lot of content and useful information. It may be overwhelming to the facilitator, mentor and mentee to absorb, remember and implement effectively. It may appear to be too lengthy, and may require condensing… Once training is implemented, it will provide a better perspective on length, content and structure – part of process evaluation.* (Delphi P)

Two panellists felt that that the wilderness session needed particular attention. One indicated: *"The 'Finding Healing in the Wilderness' activity (Session 6) should be moved as the beginning activity for module 5 (Mentorship) [which the panellist thought was] better suited there as a transition from learning/training to action"* (Delphi P). This participant felt that *"the*

'wilderness' activity should be rewritten" (Delphi P) as the session components needed to be explained in more detail.

7.5.7.2 Appropriateness of language and length of sessions.

As indicated in Figure 7.11 below, Delphi panellists generally agreed that the time allocation was not enough for the activities. Some sessions were considered too lengthy, and it was suggested that it could be split over more than one session or reduced to fit the time allocated.
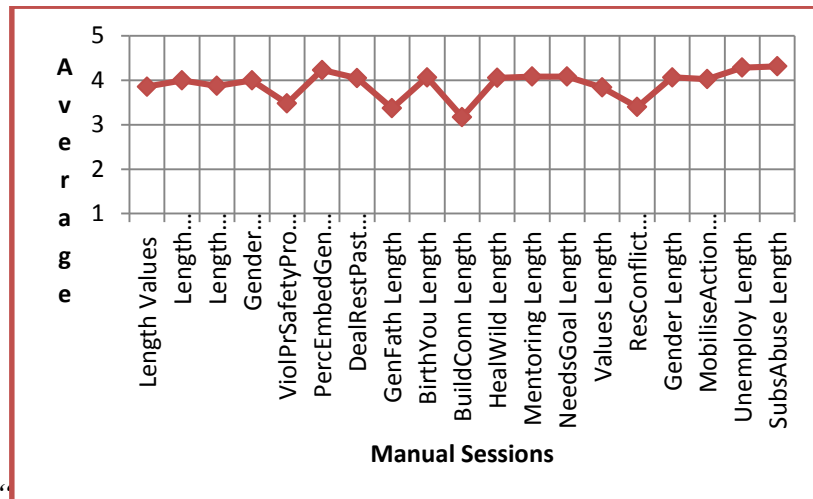

Figure 7.11. **Delphi panellists views on appropriateness of length of sessions.**

The following quotes highlight panellists' reservations regarding the time allocation of the various sessions in the manual: *On the whole, there is more than enough content, [but] time allocations are too little in most instances"; "Too little time allocation for activities"* and *"Needs more time to implement"* (Delphi P).

Regarding the accessibility of the language used in the manual, one of the Delphi panellists stated the following: *"[The] language seems accessible to us as reviewers, [but I am] unsure how mentors/mentees will respond. This will probably surface during training if it's an issue"* (Delphi P).

In terms of the manual's language, community research team members in the FGD felt that the manual was understandable to the research team, but that this might not be the case for the broader community. Some suggested that the manual should be translated into Afrikaans if copies were going to be given to the community, and others suggested that it was sufficient to translate the handouts into Afrikaans, as indicated in the following quotes: *"Yes, I think it's*

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understandable, but some people explain these words that we don't understand. It also depends on the areas where this would be implemented"; "The research team might understand some of the wording, but not the community"; "Definitions should be given and the manual should also be done in Afrikaans"; "If they are not going to get the manual then it doesn't have to be in Afrikaans..."; "The manual needs to be translated to Afrikaans if we are talking about sustainability also, or even if we give it to people who are Afrikaans" and *"I want to learn English. I feel that not everything needs to be translated. Some things need to be in English. If I am going to learn English I need to learn English. If I am going to learn Afrikaans, I need to learn Afrikaans. We must become bi-lingual"* (RT FGD).

7.5.7.3 Manual content.

On average, panellists agreed that all of the sessions of the manual adequately covered all the core areas of focus (See Figure 7.12 below). Two of the panellists had the following to say about the content: "*Good use of activities and methods to bring message across"* and *"Manual has sufficient content on key areas"* (Delphi P).
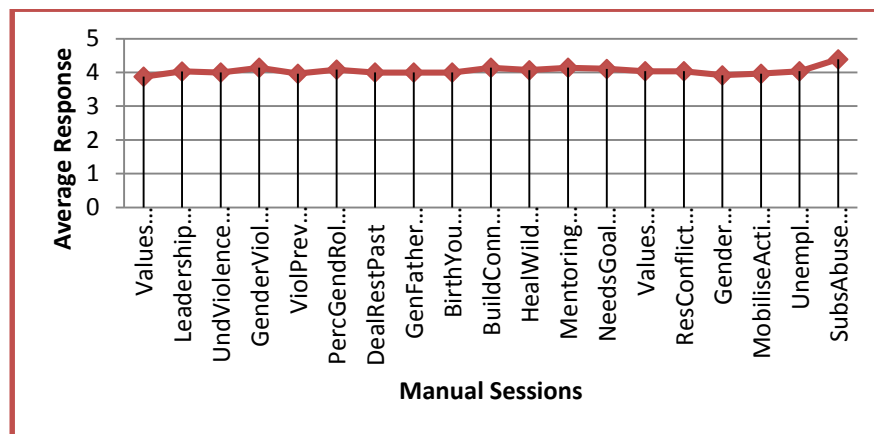

Figure 7.12. **Delphi panellists' views on content coverage**

Delphi panelists were asked to comment on whether the manual covered all of the core areas of the study, and they agreed that: *"The manual has activities that mobilise spiritual capacity and religious assets"; "The manual contains information on gender and violence and promote non-violent peaceful masculinities"; "The manual provides knowledge on violence and safety and peace promotion";* and *"The manual covers all of these skills (need assessment, setting goals, conflict resolution, leadership, mentoring, peer counselling) to promote safety and peace"* (Delphi P).

Whilst panelists were generally happy with the content in the various sessions, they expressed some reservations on certain sessions. One member noted that the manual *"needs a gender balance check since there are both male and female mentors and hence gender balance important"* (Delphi P). Another panelist noted that *"some exercises need more thought"* (Delphi P) for example one participant suggested that the *"Generative Fatherhood"* (Delphi P) session needed to be re-thought and restructured to include women. Another suggested that we *"Link values clearly to Spiritual Capacities and Religious Assets"* (Delphi P). The next quote from a different panelist elaborates on this suggestion: *"Although Spiritual Capacities and Religious Assets are integrated in the content and activities, and is also one of the project's three aims, [need to ensure that it is] unpacked significantly enough to achieve this aim"* (Delphi P).
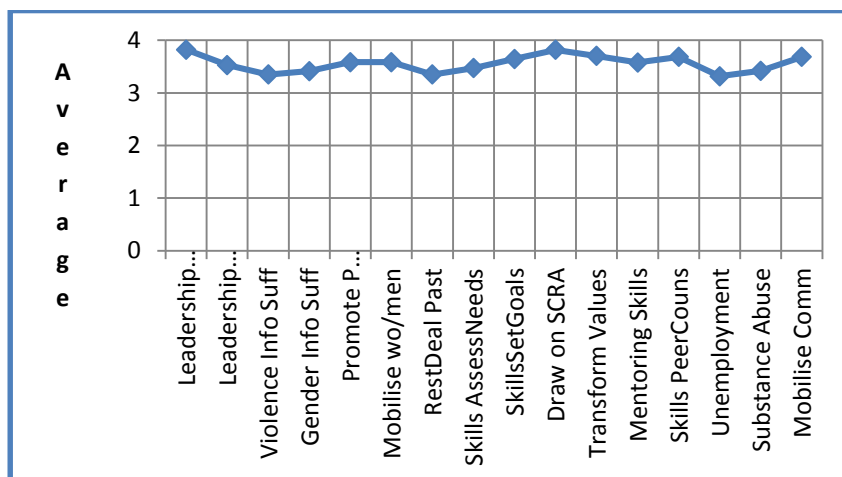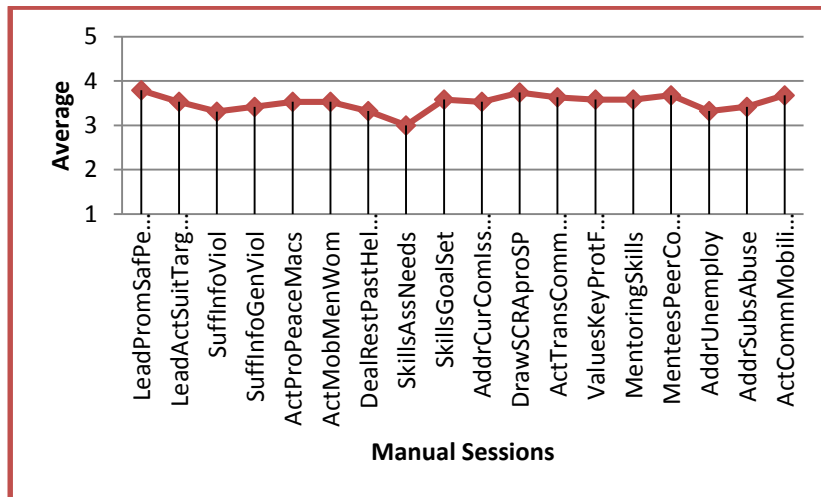

Figure 7.13. **Community members views on manual sessions.**

Figure 7.13 above presents the questionnaire results. From this figure, it is clear that the majority of the questionnaire respondents agreed that the manual covers various activities including leadership, values transformation, campaign development, mentoring, and knowledge and skills development. Regarding the various sessions in the manual, community members and service providers were very happy with the content, especially the values and leadership sections, and suggested that community leaders be invited to attend the leadership session during implementation.

Figure 7.14 presents the finding from the Delphi panellists. On average (see Figure 7.14 below) the majority of the Delphi panellists agreed that the leadership session was suitable for the

participants and it promoted peace and safety; the majority of those present at the community/service provider workshop agreed that the manual contains sufficient information on violence to increase participants' knowledge, and they agreed that the manual promotes non-violent peaceful masculinities. As can be seen from Figure 7.13 below, panellists further agreed that the manual contained various skills training sessions, including assessing needs, with a strong agreement on the focus on goal setting, mentoring and basic counselling skills.

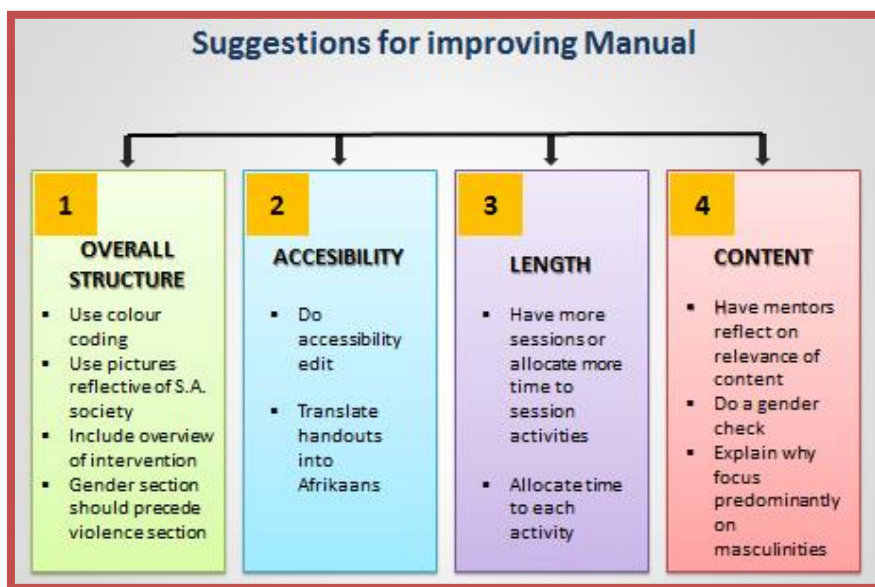*Figure 7.14.* **Delphi panellists views on manual sessions.**

There was a strong agreement that the manual mobilises men and women to work together to transform community health; that it has activities that assist participants to deal with unresolved past issues; it addresses current community issues; it draws on spiritual capacity and religious assets to promote safety and peace and it has activities that transform understandings of community values. Participants further agreed that the manual mobilises community members to take action in order to address unemployment and substance abuse.

7.5.8 Suggestions for improvement

The Delphi panellists made various suggestions pertaining to improving the manual in terms of overall structure, accessibility, length and content (see Figure 7.15 below). The panellists suggested using colour coding to separate the various modules in the final manual in order to make it more user-friendly. They also advised that the pictures currently used in the manual were not local, and advised them that the pictures used in the manual should be more reflective of South African society. Other suggestions pertaining to the overall structure were to include

an overview of the manual in the beginning, and to place the gender section before the violence module in the manual.

Regarding accessibility, participants were concerned that there was still a lot of academic jargon, especially in the theoretical sections in the manual, and suggested that we do an accessibility check for English as second-language speakers. They also suggested that we simplify the instructions and make them clearer so that they are more user-friendly. They further suggested translating the handouts into Afrikaans, the community's predominant language.

Figure 7.15. **Delphi panel suggestions for improving intervention manual.**

The panellists expressed concern that certain sessions were quite long and insufficient time had been allocated to some sessions, whilst others had no time allocated to them. They thus suggested that we either shorten some of the sessions or allocate more time to certain sessions and stipulate the time needed per session upfront.

In terms of content, the participants were concerned about the gender balance in the manual. Initially, the proposed intervention was going to focus on masculinities only and not femininities, but many community members felt that the intervention should include both women and men, and it was therefore deemed necessary to ensure that we maintain a gender balance throughout the manual and explain why there is a predominant focus on masculinities.

Other general comments included stating the following upfront: *"men and women should 'split' into different groups for certain exercises"* and *"including an overview of the intervention at the beginning"* and *"Throughout the manual identify when core values are being dealt with and link with spiritual capacity and religious assets"* (Delphi P).

7.5.9 Sustainability

Participants were asked in the RT FGD how sustainability was looked at in the intervention and whether action plans were drawn up for sustainability. The responses from participants were somewhat mixed. Although some participants felt that sustainability had been addressed to a certain extent, the majority felt that not enough had been done to ensure the project's sustainability. One participant mentioned that the capacity to write letters had been enhanced and others mentioned that writing proposals was important. A third FGD research team member remarked: *"It's not just about letter writing ... We want to sustain the project afterwards. I think they should train the people on this [i.e. writing proposals]"* (RT FGD). Another added: *"This means a lot to us, they should tell us about funding bodies, how many people are involved and how they work"* (RT FGD). Other participants responded: *"They already explained that stuff to us"* (RT FGD). Alluding to the importance of networking and drawing on existing resources for sustainability, one participant stated:

> *Yes ... so we already learned. I agree with [Name], but I just want to go back to the providers and the relationship that's important. The providers want to have a relationship with us and some of them stated that we could use them. We must just use them. If we need them, we must just let them know. This tells me that there is already something going on.* (RT FGD)

Regarding a detailed plan for sustainability, participants had the following to say: *"No, we still need to discuss that. We were supposed to have done that a long time ago"* and *"We just believe that [the intervention project] must work on [its] own and that is not clear yet"*. They, therefore, felt that detailed planning has not been done for sustainability at this juncture. It should be noted, however, that all of the empowerment processes that the research team had been exposed to have been part of working towards the sustainability of the project, and detailed planning regarding sustainability only started towards the end of 2014 and 2015; this planning has been dedicated entirely to sustainability processes.

7.5.10 Finalisation of manual

Various improvements were made to the manual based on the shortcomings identified and the suggestions made by the participants in this evaluation, as outlined above, as well as the results from a process evaluation of the implementation of the intervention (which fall outside the scope of this PhD thesis).

Apart from the broad suggestions regarding structure, some of the major amendments made before implementation included the following: incorporating femininities alongside masculinities and including women as recipients of the intervention; clarifying instructions so that the reader could understand clearly how to implement activities within sessions, and making the manual more accessible for community members in terms of language. Whilst the manual was not been translated into Afrikaans, during the implementation phase, all handouts were translated into Afrikaans and the intervention was facilitated largely in Afrikaans with the assistance of Afrikaans PowerPoint presentations for the sessions.

Every effort was also made to decrease the size of the manual, but it is still quite lengthy. It was decided to keep all the different modules as modules, could be used separately as interventions as well.

7.6 Conclusion

This chapter presented the results of the development and preliminary evaluation of the *Building Bridges* violence prevention intervention, which focused on the mobilisation of spiritual capacity and religious assets to promote positive forms of masculinity and safety and peace, guided by the principles of CBPR and the values of community engagement. This chapter commenced with a summary of the results of the meta-synthesis of the literature, conducted to identify best practices in interpersonal violence prevention, focusing on the promotion of non-violent egalitarian forms of masculinity, safety and peace as well as community mobilisation strategies. The chapter then provided a summary of suggestions for best practices in promoting positive forms of masculinity and mobilising spiritual capacity and religious assets. This was followed by the results of the various community engagement strategies utilised to develop the intervention. The findings of the initial evaluation of the intervention were then presented. The next chapter focuses on my reflections on the CBPR and the community engagement framework pursued in this study.

FINDINGS AND DISCUSSION: REFLEXIVE DISCUSSION ON CBPR PROCESS

Never regard study as a duty, but as the enviable opportunity to learn to know the liberating influence of beauty in the realm of the spirit for your own personal joy and to the profit of the community to which your later work belongs."

(Albert Einstein, 2015, *Albert Einstein: In his own words*)

8.1 Introduction

The previous chapter outlined the development and initial evaluation of the *Building Bridges* violence prevention intervention. One of the study's key aims was to foreground and evaluate the CBPR process and community engagement strategy pursued in the planning and development of the aforementioned intervention. Israel et al. (1998) emphasise the need for more in-depth evaluations of the context and process of community-based research to enhance understanding of the methodology, its strengths and its weaknesses. In this chapter, I recount the application of the CBPR principles and the enactment of community engagement values in the research process. This chapter addresses the following research objective:

Research Objective 4: *To reflect on the CBPR community engagement process in the development and evaluation of the violence prevention intervention that focuses on the promotion of positive forms of masculinity and safety and peace by mobilising spiritual capacity and religious assets.*

Israel and colleagues (1998) suggest that the efficacy of a CBPR study can be assessed by operationalising and using the key principles, as outlined in chapter 5 in the analysis framework, as criteria for examining the degree to which these dimensions were adhered to in a given project. The CBPR principles used to assess the process of the planning, development and evaluation of the *Building Bridges* intervention pertain to the following: Erijaville as a community, research relevance and responsiveness, community participation, the research process, partnership as a framework, co-learning and co-creation of knowledge, an asset-based, strengths approach, promoting local action, community empowerment and ownership, and community strengthening and sustainable development.

This reflective discussion will point out fundamental characteristics of each of these principles, and then reflect on how they have been enacted within the broader SCRATCHMAPS project, emphasising both the strengths and challenges experienced. Whilst my own participation in the project will guide this discussion, the process evaluation data obtained from the research will inform these insights. The data sets for this discussion as well as the key are outlined in Table 8.1 below.

Table 8.1

Data Source Key

Data Source	Key
Academic Researcher Diary	**AR Diary**
Principal Investigator Diary	**PI Diary**
Community Research Team Diary	**RT Diary**
Research Team Minutes	**RT Minutes**
First Core Group Meeting Minutes	**CG Minutes**
Advisory Committee Minutes	**AC Minutes**
Research Team Focus Group Discussion	**RT FGD**
Community Asset Mapping Workshops	**CAMW**
Service Provider Workshop	**SPW**

8.2 Erijaville as Community

'Community' is a nebulous term and has been defined differently in different contexts and different fields (see for example Kretzmann & McNight, 1993; Lazarus et al., in press; O'Donoghue, 2009). Within the framework of CBPR, community is defined as a *unit of identity.* Units of identity imply membership in, for example, a social network, a family, or a geographic place and are socially constructed dimensions of identity (Steuart, 1993). In this study, as with many other studies (see Chaskin et al., 2001; Netting et al., 2008; Wallerstein et al., 2005), community was defined as a geographic locality with natural borders, a known history with socio-economic and demographic patterns; a shared identity resulting from a shared history; and a group of people tied together through a sense of cohesion.

Key sub-themes that emerged around defining community in this study centred on geographic location, historical dynamics, community cohesion or connectedness, and who is involved.

8.2.1 Community as a geographic entity

Within the project, community was primarily conceptualised geographically, with clearly defined boundaries constituting a focus for the research and community development. In a FGD with the community research team, we explored how Erijaville was defined during the development of the intervention. One participant stated that it was "*An area or place with different needs*" (RT FGD). In the community asset mapping workshops, when participants were asked to identify the boundaries of their community, the majority agreed that "*Erijaville is situated between Rusthof and Gustrow. It stretches from 5th Street to 9th Street and Rusthof Street to Forbes Street*" (CAMW). A definition of community, however, extends beyond geography; it depends a great deal on the perceptions of community members regarding what makes up "the community" (Minkler et al., 2012). Service providers, who often did not reside in the geographic borders of the community, were often invited to participate in the research and action activities. This indicates that such individuals who provided service were regarded as part of a unit of identity, therefore part of the community. In this regard, as a unit of identity, community denotes an identification and emotional connection with other members, shared symbol systems, common values and norms, common interests, and a dedication to fulfilling mutual needs (Steuart, 1993). Thus, in this case, the research team members shared a common interest with service providers, as both worked towards improving the community.

8.2.2 Community linked through historical dynamics

Community members and service providers perceived this community as an entity that has strong historical connections. Participants indicated in the service provider asset mapping workshop that members of the community were connected by their shared history under the apartheid dispensation. Participants identified Erijaville as a community born out of the oldest squatter camp in the area (32 years) known as 'Blikkiesdorp' (Tin town), where homes were constructed with corrugated iron. Reflecting on such historical traces (which were also noted in the Advisory Committee minutes), I reflected in my diary as follows:

> *Participants referred to Erijaville and the historical significance of Blikkiesdorp (the previous name for Erijaville) as the oldest squatter camp ... and [how] Erijaville can once again become a platform for development [through the SCRATCHMAPS project].* (AR Diary 13/8/11; also noted in AC Minutes 13/8/2011)

Rumination by one of the young male research team members in his diary on his experience in the service provider asset mapping workshop indicates the following:

On this day it was very touching because during the timeline exercise, the whole history of the former Blikkiesdorp, now known as Erijaville, came out. People were telling historical stories about Erijaville that was [sic] moving. I was heartbroken to hear what the people of Erijaville went through in Apartheid. With this historical past, it was moving in the workshop. (RT Diary 12/5/2012)

8.2.3 Community connectedness

Participants often defined their community as a place linked by cohesion and connectedness, as can be seen in the following quotes: *"[A place] where people lived and stood together … Here in the community you can feel it's a community. They [the residents] are always there for each other regardless of the issues they have. They support each other"* (FGD 14/6/14) and "*A community drawn together (FGD 14/6/14)*" and "*People are tight … Here they tackle the issues*" (FGD 14/6/14).

The link to community and connectedness was also traced back to the past of Erijaville. Participants in the service provider asset mapping workshop reminisced about the 'good old days' (which were often far from 'good' considering the depraved condition within which they lived): the days in Blikkiesdorp. Community members referred back to their history when the people were not only connected by a common experience under apartheid, but also by the closeness of the community members. It was a time when they had "*family days in the old Blikkiesdorp*" (SPW). Another participant noted the following:

[In the workshop] at the Suider Strand library … people spoke about the historical background of how 'Blikkiesdorp' became Erijaville … people explained where Erijaville came from and what happened and also what should be taken into consideration when making decisions about the intervention. I think [Name] (a member of the Advisory Committee) truly captured this because he used to live in 'Blikkiesdorp' (but does not live in Erijaville) ... This workshop made it possible for the service providers to relate to people who live in Erijaville and also to the past of the place. (FGD 14/6/14*)*

The above quote demonstrates that individuals who had a connection to the past of Erijaville were regarded as part of the community by still being involved in the community processes.

Whilst the municipality within which Erijaville is situated does not recognise Erijaville as a demarcated community (it is seen as part of the broader area Rusthof by the municipality), it is

evident that the community is a self-defined, socially constructed entity drawn together by a sense of connectedness rooted in historical dynamics (the previous Blikkiesdorp). This is evident in the fact that the people have chosen the name 'Erijaville' for themselves, and are proud of the name. One of the Community Advisory Committee members said the following:

> *Even though the area was officially named 'Erijaville' and it is known to the people as such, the name 'Erijaville' does not appear on municipal maps of the area but is integrated into the broader area known as Rusthof.* (AC Minutes 13/8/2011)

On numerous occasions, one of the key community leaders, a local bishop and a member of our research team, often brought to our attention that the area was named after him; a statement which was corroborated by other community members. This historical connectedness made the defined geographical boundaries identified by the community members as permeable as some of the participants from outside the community are still connected to the community because they used to live in Blikkiesdorp. For example, one of our Advisory Committee members who used to live in Blikkiesdorp now resides outside Erijaville, but is still concerned about the community and remains actively involved in the project.

8.2.4 Who is involved?

Based on Seifer and Gust's (2010) proposition that defining community hinges on key questions relating to who is involved, the project ensured that key community decision-makers were at the table, including local community members and leaders, key service providers who had a stake in the issue being addressed and who were also key resource persons. The involvement of key community representatives is evident in the two community structures that were established at the inception of the project, namely, the Advisory Committee that comprises key stakeholders who provide services in the community and local community leaders, as well as the research team who were all from the local community.

A key challenge to note at this juncture was the conflict that emerged from historical and current community dynamics. Conflict management had been built into the project right from the start. However, it became necessary, on more than one occasion, for us to obtain an outside facilitator to resolve the conflict within the broader community. We decided to keep the broader community conflict apart from the project itself, but the conflict tended to insidiously emerge at different stages during the research process.

Engaging with both historical and current community dynamics is important to facilitate healing from historical trauma, and bring about safety and peace (see for example Trotter, 2002). Dealing with a community's history of oppression requires understanding and healing and may be used for the purposes of personal as well as political empowerment (Lazarus, Duran, et al., 2012). Another key challenge we faced was getting the broader community on board. The Advisory Committee minutes reflect that it was common for the community to be lethargic in attending and being part of programmes, but once they see that it is working, they want to be on board. The following excerpt from one of the meetings sheds light on this challenge:

> *A question about the community's sentiment regarding the project was raised. It was felt that the community, as with everything else, is very lethargic in terms of getting involved. Also, the community may have reservations about who is involved in the project due to the role that the drug lords play within the community. However, it was stated that these sentiments will dissipate once they realise that the project is there to help the community at large. The feeling was that we need to move forward with the project and that as the project develops, the community will become enthused and take ownership.* (AC Minutes 9/9/11)

From the above quote, it appears that the community first wanted to see who was involved in the project before they came forward, which alludes to the underlying dynamics present in the community. Broader community involvement was thus a key ongoing challenge that required careful planning and strategising throughout the project's lifespan. Every effort was made to ensure wide community representation at the various workshops and community events conducted and hosted by the project research team through the distribution of pamphlets, personal invitations, placing posters at strategic points in the community as well as letters hand-delivered by the research team.

8.3 Research Relevance and Responsiveness

In line with one of the main principles of the CBPR approach, namely, ensuring research relevance and responsiveness (Israel et al., 2005), the project took into account that for an intervention/prevention strategy to be effective, it must address the concerns of the community of interest. As mentioned earlier, the community profile, drawn up prior to conducting the research, was later strengthened by the findings from the Violence Survey (see chapter 6) indicating that violence was indeed one of the key challenges within the community. The need to address unemployment was amplified in that the majority of perpetrators of violence were

unemployed. Even though both these data collection methodologies indicated that violence was a social problem faced by the community, we had to ensure that the community regarded violence as a priority to be foregrounded over other social challenges or needs.

CBPR ensures that the research topic either originates from or reflects an important concern of the local community (Israel et al., 2005). Many projects, however, would not come about without the initiative of somebody from outside the community (Reason, 1994). In order to determine whether the study of violence and the promotion of safety and peace as well as positive forms of masculinity were a priority for the targeted community, the academic researchers on the team initiated this dialogue process. As outside researchers, our role was to facilitate the dialogue among community members in order to reach consensus on the study's exact target (see Balcazar et al., 2002). This process started with a meeting with a core group of community leaders before the project's commencement. In addition, the community's needs were overtly expressed throughout the project's lifespan. This included acceptance of the focus by the first group meeting with 10 core community members in 2011, the second broad community stakeholder consultation in 2011 (where the aims and objectives of the project were checked with 30 local community stakeholders), as well as during the time of developing, evaluating, and implementing the intervention (which falls outside the purview of this study and was pursued as part of the broader project from 2012 to 2014).

A broad proposal was presented at the first community stakeholders' meeting, and thereafter presented and debated repeatedly (over a period of six months) within the Advisory Committee, and later within the research team. The following extract from the minutes of the first core group meeting explicates this process.

> *We posed the question: 'Is the issue of male interpersonal violence a relevant issue to investigate in your community?' All community members confirmed that violence among young males is a relevant issue that needs to be addressed within the community. One community leader said: "There is a need to intervene in this regard. This is an important study as living in such an environment makes one used to it – the research will serve as a mirror to reflect reality – you can't do anything unless you know what actually happens".* (CG Minutes 13/5/2011)

In her diary reflection, one of the research team members noted the following in this regard:

It was really a great honour to be at this meeting because this is something that I have waited for for a long time, that there would be people that will come here and help us to let Erijaville live again and heal Erijaville. This was the first meeting that occurred and took place at the Rusthof Primary School in June 2011. It was firstly an introduction and we were made aware of the SCRATCHMAPS project. (RT Diary 10/6/11)

In a focus group discussion with the research team members in 2014, when asked whether the intervention reflected the needs of the local community, all participants answered in the affirmative. One member noted that "*SCRATCHMAPS collected data to see what the needs of the community was before the intervention started*" and stated that he thought that "*the amount of people they gathered to collect the data was good and so was the participation of the community*" (FGD 14/6/14). Another research team member agreed and stated: "*I would say most definitely [the research is relevant and responsive to the needs of the community]. Our research showed it*" (FGD 14/6/14). One participant remarked that the intervention was based on the gaps within the community and, hence, addressed a relevant need. He stated:

I would say that the intervention is based on the problems and the emptiness that was present ... Then we also have to look at leaders which came out of the research which is also important, the committee that also played a role in this. (FGD 14/6/14)

The project was thus accepted within the local community, as it met the felt needs of the community, mostly because of its focus on community development, and promoting positive forms of masculinity more specifically. In this regard, one young male participant stated:

The approach of this study to violence is very interesting and I feel privileged to be part of such a research that can bring about change in Erijaville as well as the broader community. (AR Diary 13/5/2011)

A key challenge in establishing research relevance is that community and researcher priorities might differ (Balcazar et al., 2002). As communities and researchers are not always on the same level in terms of readiness for change, researchers should therefore be flexible and ensure that they align their own aims and objectives with community agendas and priorities.

In this study, continuous facilitation and discussion to reach an agreement on the project focus was acutely evident in the action planning workshop, where the 41 participants strongly articulated their opinions on priority needs and actions for their community. Whilst a number of the needs were directly linked to the focus of the research project, the greater part of the priorities identified were connected to general community building. This created tension and challenge within the project, and every effort was made to ensure that, irrespective of the particular focus of the research project, the priorities identified by the community were also addressed in some way, for example unemployment and substance abuse. In this regard, I agree with Gcabo (2007) who suggests that it is important to take into account that in low-income contexts, where resources are scarce, there may be many diverse competing needs, so it would be essential to ascertain which needs to prioritise.

Numerous opportunities were provided to ensure that we (the outside researchers who initiated the research) attentively listened to community considerations of what their actual felt concerns or needs were (see Minkler, 2005). The intervention that emerged from this participatory, collaborative process therefore broadened its original scope to incorporate the additional needs identified by the community. Nation et al. (2011, p. 94) point out that it is essential to "build a research agenda that reflects the collective interests of our partnership and is perceived as relevant by the community". In the case of this study, the intervention focus was first on masculinities only, but community members felt that it was necessary to address femininities alongside masculinities in order to bring about changes in gender roles and behaviours.

8.4 Community Participation

The principal of participation is central to the CBPR approach (Minkler & Wallerstein, 2003). Participation can range from basic consultation to active participation throughout the research project. Community participation entails direct involvement of community members in decisions around the research topic, the methods pursued, interpretation and application of results as well as the distribution of findings (Minkler & Wallerstein, 2003). A commitment to optimal participation directed the CBPR approach in the project, where engagement was pursued through a partnership approach that strove to promote the optimal participation and collaboration of key stakeholders and community members (see Chapter 3).

To stay true to the CBPR principle of community participation, two community structures were set up to ensure optimal participation. The Advisory Committee was the project's management

committee, and therefore the body to which academic and community researchers were accountable. They were consulted on all aspects of the research process and engagement strategies, as well as decisions and challenges encountered by the research team throughout the project's lifespan. The community research team was centrally involved in all aspects of the research process through active participation in the development of measurement instruments, piloting, data collection, data analysis, presentation of findings, writing of reports and journal articles, preparations for meetings, workshops, and academic colloquia. Members of the research team presented the research on various forums, including community workshops, academic conferences and colloquia. One of the academic researchers, reflecting in her diary entry after one such event, wrote:

> *The experience of the actual colloquium was novel in that, unlike the usual academic conference, the 'researched' were equally partnered with researchers. The programme drew together academics from the USA, Zimbabwe and South Africa, together with the community research team, all sharing their insights on the core concepts around which the [SCRATCHMAPS] project centres.* (AR Diary 27–29/8/2013)

The research team also, on their own initiative, planned and hosted numerous community events such as the Youth Day Campaign, Peace Day March, Women's Day celebration etc. In addition, members of the team attended various courses such as the Moompie training for child abuse prevention, conflict management skills, NPO capacity building, and project management. Research team members were also allocated various project management responsibilities in order to facilitate the handover, full control and sustainability of the project.

All processes followed by both academic and community members were captured in meeting notes or minutes, which were regularly distributed among Advisory Committee and research team members. Meetings were chaired and guided in an optimally participative way, with the research and community leaders all being experienced in group dynamics and facilitation. Participation was enhanced by the enthusiasm expressed by the academic leaders and members of the Advisory Committee and research team, and interactive workshop-style exercises were often used to facilitate participation. Group facilitation, and workshop and project management skills were shared through the two project structures. Participation was also facilitated by the fact that members of the two structures knew one another.

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As suggested by Wallerstein and Duran (2008), greater participation was achieved when the research team and the Advisory Committee members became centrally involved in the various research activities throughout all the phases of this study. Key stakeholders providing services to the community (from inside or outside of the geographical boundaries) were also invited to participate in the process. Many of them, for example, the two chairpersons of the Advisory Committee, one a member of the Department of Correctional Services and the other a member of Hearts of Men, played key roles from the study's inception. In this regard, the Hearts of Men organisation became a key stakeholder, partner and co-author of the *Building Bridges* intervention.

Every effort was made to ensure that all members of the local community were invited to participate in the research and action interventions. Strategies such as pamphlets, posters, letters, emails, telephone calls, social media, door-to-door invitations and even going so far as to physically fetch community members to participate in the process were employed. When asked whether the project promoted optimal participation in the development of the intervention, participants in the RT FGD had the following to say:

> *We had workshops in May. So the people did have part and they could raise their opinions about the manual. Then we also had the "Delphi Panel" who could also state their opinion and bring changes where they saw mistakes. So they were involved in the intervention. Just the fact that they helped with the manual, and yes I think the workshops we did inside the community with the different religious leaders, service providers and also the community showed this.* (RT FGD 14/6/14)

> *The advisory meetings, attendance of workshops where they gave feedback… The way they participated in it, one of the great things of interest was people from overseas came to visit the project. Also the way of buy-in, for example the Methodist church, Hearts of Men, the primary schools, the public library. They always gave their premises or facilities that we could use for activities. The Erijaville community with their field, that favour and showing their full participation for the project, that is positive.* (RT FGD 14/6/14)

Regarding challenges to participation, Springett and Wallerstein (2008) call attention to three particular hitches. Firstly, researchers frequently lack the necessary skills needed to conduct research within a CBPR framework. Secondly, the broader the reach of a project, the more challenging it is to ensure a democratic process. Thirdly, it is challenging to control the 'coming and going' of individuals in the project.

The core academic researchers (including the principal investigator and the community co-ordinator) have experience in working within a CBPR framework and could, therefore, provide guidance to the novice CBPR researchers (myself and other master's degree intern students) throughout the study's lifespan. With regard to the second point highlighted by Springett and Wallerstein (2008), the project's reach was kept within the confines of the boundaries identified by the community, thus creating helpful boundaries to focus and manage the study. With regard to controlling the 'coming and going' of people, structures were put in place for ongoing optimal participation, primarily through the Advisory Committee and the research team. We decided at the start of the project to keep an 'open door – open chair' policy to allow anyone from the community and service providers to come on board the project at any time during the different phases of the research. Whilst we had little control over the coming and going of the Advisory Committee members, we had a regular group of 10 to 15 members who attended the monthly Advisory Committee meetings. The same group of community researchers remained with the project throughout the project's lifespan. This could be ascribed to the fact that they were paid a stipend for the work that they were doing, but also because of the various skills they gained through participation in the project (e.g. instrument development, data collection, data analysis, presentation skills, conflict resolution skills, facilitation skills, mentoring skills, computer skills, etc.).

Another key challenge to participation was involving members of the broader community in the research process and intervention planning strategies. A community research team member reflected on the difficulty of getting community members to come to the asset mapping workshops (and for that matter any other event or workshop held in the community): "*It's still difficult to get people to attend even though the previous group was very enthusiastic after our last (i.e. the first)) [community] asset mapping [workshop]*" (RT Diary 12/5/2012). Reflecting on the lengths to which the research team went in order to ensure a good community representation at the workshops, one member of the research team noted the following:

> *In the evening the research team went out to rouse up [i.e. gather] an audience (participants) for tomorrow's workshop. It rains intermittently. At a corner house/shack [Male CRT member] is harassed by an angry girl, an old school mate ... She's sitting around a 'galley blik' (oil drum fire) with a group of young twenty something Rastafarians (or at least dreadlocked guys, since it's contentious who is a real rasta). [Name] and me tried to convince them to come to tomorrow's event [the community asset mapping workshop]*. (RT Diary 11/5/ 2012)

A key question regarding participation centres on 'who is involved' in the research. Some participants noted in the community asset mapping workshops that "*there are a number of Somali shop owners in their community and we should also involve them, they should be part of the community, and they should help the community*" (CAMW). On this point, one of the community research team members replied that they were invited to the workshops, but we should try to more intentionally involve them. This was an issue that was followed up and we did manage to involve them in further workshops, particularly the focus group discussions that followed. This encouraged the Somalians to interact with community members on a different level and, later, they often provided us will cooldrinks for our meetings.

8.5 The Research Process

CBPR promotes participation by actively involving community members, or the people whose lives are affected by the issue being studied in all the phases of the research process (Israel et al., 1998; Minkler, 2000). This includes the following: identifying the issue of concern to communities; developing assessment tools; collecting, analysing and interpreting data; determining how data can be used to inform actions to improve community well-being (including addressing social challenges); creating the research designs; designing, implementing and evaluating interventions; and disseminating findings (Higgins & Metzler, 2001, p. 490). Ideally, this entails equal input and participation by all relevant stakeholders, from the conceptualisation of the relationship and any particular research project through to data collection, data analysis, interpretation, project implementation and programme quality improvement (Blevins et al.2008).

The research project ensured community participation through all the steps in the research process; from the first contact with gatekeepers to the initial core team meeting; the first stakeholder meeting; establishing the community structures; the initial training to developing and evaluating instruments; piloting the data collection instruments; collecting and analysing data; writing up and presenting research findings and publications; decision-making on intervention components; developing the intervention; evaluating the intervention, and sustainability. It is clear therefore that community partners were actively involved in every step of the research process. This is highlighted in the following diary reflections by some of the research team members:

We conducted Focus Group Interviews training, how to conduct piloting [of data collection instruments], and finances. (RT Diary 24/2/2012)

We learnt how to conduct the violence survey, we did focus group discussions. We did a personal development plan and I learnt how to set up the PowerPoint projector. (RT Diary 9/3/2012)

I learnt about conflict management. (RT Diary 12/3/2012)

I am active; the research team is active. [Name] and [Name] [the academic researchers] don't just tell us what to do. They ask whether we are available. (RT Diary 20/4/2012)

Today we did the analysis [the Asset Mapping Workshop data], me and [name]. We did the mapping of the community workshops. (RT Diary 8/6/2012)

Analysis continue[s] ... So, it means that it is work, gaining knowledge, get[ting] smarter and find[ing] the findings of the community needs. (RT Diary 8/6/2012)

This was the beginning of our FGD workshop and I was quite confident because I knew we had put in the sufficient work in to make everything go right. We hanged the posters, send the invitations to everyone. (RT Diary 6/9/2012)

Reflecting on one of the many capacitation exercises, one of the academic researchers noted:

Each team member was given the chance to capture a single survey [during the data capturing skills development session]. To see the anxiety give way to pride and confidence was genuinely indescribable. (AR Diary 12/7/2013).

8.6 Partnership as a Framework

The project was guided by a partnership approach. CBPR comprises a collaborative partnership in which all parties participate as equals and share control over all phases of the research process (Israel et al., 1998). As indicated previously, two community structures (the research team and Advisory Committee) ensure that a democratic partnership approach and joint responsibility in decision-making processes guided the work in the project throughout all the steps of the research process.

Key stakeholders in the project were viewed as equal partners, and through the Advisory Committee we brought together a diverse range of expertise, including various skills and academic and local knowledge. Members were from various sectors, including the Department of Correctional Services, local NPOs and NGOs, the police, religious leaders, and the health sector. The partnership fostered with HOM, alluded to earlier, to develop this *Building Bridges* intervention also speaks to the CBPR principle. Partnerships were also fostered with other

service providers such as a representative from the Department of Social Development who particularly assisted during the intervention implementation phase and someone from Rape Crisis, who offered her services to assist community members with counselling. This is in agreement with a "democratic and co-learning approach to research" where partners collaborate to design a project that supports community change and benefits community members (Higgins & Metzler, 2001, p. 490).

Working within a CBPR approach highlights a number of power issues, including challenges relating to knowledge and power, resources and power, participation and power, community dynamics, as well as research methodology challenges (Lazarus, Duran et al., 2012; Lazarus, Taliep et al., 2012). Challenges relating to power differentials were addressed directly in the study through the establishment of the two local community structures, i.e., the Advisory Committee and the research team, and through regular reflections (academic members from VIPRU/IRHAP) in the academic institution. One of the specific ways in which the challenge of power differentials relating to resources was addressed within these structures was through the use of an 'open budget'. As the principal investigator noted in her diary: "*I was aware that it was important that we share the [SCRATCHMAPS] budget with the advisory and research team as such transparency is important when trying to equalise power relations and build a partnership*" (PI Diary 12/3/12). Another means of addressing power imbalances in this study was to make all key with the community, which is evident in the depth of engagement pursued to develop the *Building Bridges* intervention.

A partnership approach alerts researchers to take heed of the intrinsic inequalities existing between researchers and community partners, and underscores the necessity of addressing these imbalances by fostering trusting and reciprocally respectful relationships embedded in an empowering process underlining information sharing, consultation, communication and shared decision-making (Minkler et al., 2012). The partnership approach adopted in the study reflects a particular approach to power relations, specifically as it pertains to academy-community relationships. Building a partnership needs to be built on 'respect' (Patterson, Cromby, Brown, Gross, & Locke, 2011), and requires a constant focus on one's location within power relations (Nation et al., 2011; Seedat, 2012; Springett & Wallerstein, 2008). When asked whether the project was built on a partnership framework, one of the community research team members alluded to the importance of respect in establishing a partnership:

I think it all comes down to respect. For example SCRATCHMAPS always maintained the respect of its organisation. For example, I think the excitement that [Name] had when she and [Name's] wife was doing that after-school activities [sic]. [Name], as a member of the research team, she knows her role as part of the research team and the person in the community that started something. Rusthof School where the first meeting took place, apparently that helped to establish a partnership, by asking them for a venue and the fact that their allowing it makes them feel like they are a part of this research. (RT FGD – 14/6/14)

Another research team member also referred to the importance of respect in the establishment of a partnership: "*I think that with this project we get certificates behind our names. Our contributions are respected*" (RT FGD – 14/6/14).

Importantly, this assumption of equality is not an abjuration of power dynamics, which tends to destabilise the power relations. Academic partners need to be particularly vigilant due to the inclination of all involved to defer to individuals with academic knowledge and access to more material resources (Marais, Naidoo, Donson, & Nortje, 2007). These hidden power issues were evident in the project's academic-community engagement process and was continuously acknowledged and addressed through reflexivity strategies.

The researcher in this study acknowledged the presence of these power dynamics and used the process of critical reflexivity to mitigate these challenges. This process necessitates the unpacking and deconstruction processes underlined by critical theorists as well as community psychologists (Ahmed & Pretorius-Heuchert, 2001; Hamber et al., 2001; Seedat, 2012). Critical reflexivity was facilitated primarily through regular reflections in research team meetings (held once a week on average), and regular completion of diaries by both academic and community research team members. These diary reflections often included a specific focus on power relations within the group. The following examples from the Research Team diary entries demonstrate this point:

A certain person in this group [i.e. the research team] wants the power over everything and everyone. (RT Diary 20/4/12)

[Name] was unhappy about some of the research team's performance [regarding obtaining participants] for the FGDs. I believe that some of the research team members stays in the community and know their people. [Name] was offended by [Name's] remark. He only sees the community from the outside [as he lives on the boarder of Erijaville] and still needs to learn the people's day-to-day living. (RT Diary 7/9/12)

[Name] made a comment about how some members did not want to approach the people but, [Name] made them feel they know why they didn't approach the people ... I think [Name who made the comment] should have made a plan earlier in the week to find people and not at the last minute. (RT Diary 7/9/12)

The use of critical reflexivity through diary entries and the check-in process of the weekly research team meetings and the monthly Advisory Committee meetings provided a space for the team to reflect. It also proved to be an invaluable means to enable community members to feel free to express and address their concerns and any pressing issues that they encountered.

8.7 Co-learning and Co-creation of Knowledge

A primary feature of CBPR is the value ascribed to the role of non-academic researchers in the knowledge creation process (Israel et al., 1998). CBPR is a co-learning process where local people and outside researchers equally exchange knowledge, skills and capacity, create new understandings and work together to develop action plans (Brantmeier, 2005; Israel et al., 1998; Minkler et al., 2012). Characteristics of a co-learning relationship are the following: (1) all knowledge is valued, (2) reciprocal value of knowledge sharers, (3) care for each other as people and co-learners, (4) trust, and (5) learning from one another (Brantmeier, 2005, unpaginated).

A partnership of equals requires a move away from an approach that sees capacity building as 'training' by academic experts, and community members as the consumers (Lazarus et al., 2014). Instead, the assumption is that we learn together as we bring different strengths, talents, skills and knowledge to the goals of the project (Railton CAP Research Team, 2011). This requires an attitudinal shift that functions out of a sincere respect for all partners as equals. In this regard, one of the research team members in the study noted the following: "*The academic people don't just come here and gives us stuff. We work hand in hand and that is important. Nobody is better than the other*" (RT FGD 14/6/14). The academic researchers thus valued the input from the community. Another member added: "*Personally I have learned a lot. I was given the opportunity to be part of an international project. I took the knowledge and placed it on something. I can educate other people. So the project gave me more knowledge*" (RT FGD 14/6/14). Co-learning was linked to a relationship of trust by one participant who indicated that essentially, the information and knowledge that they provide to the academic researchers served as a means of keeping the academic researchers employed:

Big words, small words. In this research I learned something which I had struggle with all these years. I use to think that the academic people knew everything. In the past I had a lot of problems [with] ... academic people [who] came and said that they wouldn't betray the people ... but they did ... But in this project I learned that I am being asked something and they walk a path with you. What the academic people is saying to us is if we don't bring something to them ... If we don't give information to them of stuff that happens in Erijaville, then they don't have work. (RT FGD 14/6/14)

This participant was essentially saying that the academic researchers and the community have a symbiotic relationship, as they both need to learn from each other in order to advance. Reflecting on how both academic researchers and the community research team members learned from one another in this project, the principal investigator noted in her diary reflection that "*SCRATCHMAPS is learning, we are all learning*" (PI Diary 13/5/12). The following excerpt from one of the research team member's diary illustrates to what extent co-learning was valued and respected in this project:

It was interesting to hear what my fellow colleagues thought about masculinity. You could hear how we varied in our understanding and I believe it is this that makes us unique. I must say, I do believe that we had received the information we were looking for. I loved working with the older group as co-facilitator. It amazes me what older people talk about how open they are on certain subjects. (RT Diary 6/9/12)

The same point holds true for processes pertaining to knowledge construction. In order to prevent academic dominance, a critical approach to community engagement compels researchers to recognise and engage with different knowledge systems (Lazarus, 2006,2011; Seedat, 2012). This includes deep and active listening (Bettez, 2011), which is vital to tackling unequal power relations within the research project and decolonising knowledge. These challenges were addressed in the project through critical reflexivity, discussed above, which includes continuous examination of attitudes towards oneself and others, as well as one's knowledge base. This process is evident in the following diary entry of one of the academic researchers:

I asked the team to reflect on their experience and consider what they have learnt, and could have done differently, given their involvement in SCRATCHMAPS and all the current initiatives ... Aside from posing this question to the team, I remain[ed] mindful of not creating an environment where we as the non-community members are positioned as experts in any way. (AR Diary 28/6/13)

At an operational level, co-learning was also facilitated through the identification of strengths or personal assets of all the research team and advisory members, and drawing on those strengths to address the different educational needs of the research team. This learning happened at both a formal and informal level, with all members of the team playing a role. One of the research team members reflected in her diary entry on this: "*We learnt how to conduct the violence survey, we did focus group discussions. We did a personal development plan and I learnt how to set up the PowerPoint projector*" (RT Diary 9/3/2012). As can be seen from this quote, the academic members played a more central role in research skills training. However, whenever possible we drew on the strengths of individuals within the team to empower other members. For example, one of the research team members who was computer literate (more so than some of the academic researchers) conducted basic computer skills training and PowerPoint skills training with the rest of the team.

Co-learning was also facilitated at a broader level through a belief in the local wisdom, which was enacted by drawing their views on all key aspects of the project, including conceptual work, and deciding on the most suitable intervention components.

Co-construction of knowledge within the project was particularly pursued through the deliberate engagement in participatory practices, and the development of grounded theories. In particular, the exploration and development of the key concepts in this study, and their relationship to one another, was pursued within a grounded theory framework, primarily through the community asset mapping and action planning workshops and the focus group discussions held with community members and service providers. In addition, this was pursued through colloquia, symposia and workshops which brought together academic and community experts. One of the Advisory chairpersons who participated in a recent colloquium noted that the generation of knowledge was dependent on both academic and community knowledge, saying that "*the one cannot be without the other*". He was referring to the colloquium proceedings, which included both academics and community members in debates around the conceptual framework for the project.

8.8 An Asset-based, Strengths Approach

Community asset mapping has been described as a process of recording the tangible and intangible resources and assets of a community, encapsulated within a positive vision of the

community as a unit of identity or place with strengths that need to be enhanced (Kramer et al., 2012).

Community asset mapping was deemed to be a key strategy of the project in its approach to community engagement. This approach enabled us to focus on human capabilities and assets; made community assets visible for the community; promoted leadership engagement; and ensured that local people drove the research and had ownership of the knowledge produced and action pursued.

One of the research team members declared that he thought "*the asset mapping that was part of the research that we did to determine assets that exist in the community was of great importance because through this people realised how rich the community actually was*" (FGD 14/6/14). A ground-breaking characteristic of the use of this method in the project was the specific focus on identifying (and mobilising) spiritual capacity and religious assets, which could be harnessed to promote positive forms of masculinity for the purposes of creating community safety and peace. A research team member highlighted that the asset mapping processes followed in this studied made them more aware of existing religious assets in the community:

> *What actually fascinated me most is the fact that after we did the research we found out that here is plus-minus 15 churches [surrounding] Erijaville. This makes me think that there is so many assets within the community and this could really make a difference in the community.* (FGD 14/6/14)

The asset mapping process enabled us to get a broad representation of community members and stakeholders involved in the project. As indicated previously, three community asset mapping workshops were held during 2012 with a total of 74 community members (including youth, adults, elders and religious leaders from diverse faiths as well as both males and females). An asset mapping workshop was also held with 18 service providers, representing 15 different organisations that provide services to the local community, and an action-planning workshop including 20 community members and 21 service providers was also conducted. Reflecting on the strengths-based approach used in the development of the Building Bridges intervention, one of the research team members emphasised that it was precisely the asset mapping process that enabled them to ask questions and become aware of important assets such

as HOM; that member eventually partnered with SCRATCHMAPS to develop the *Building Bridges* intervention:

> *I think what is most important is the outcry of questions. Which assets is there that can contribute to the development of Erijaville. This is when one of the members of Hearts of Men was there and he actually named it. And it was through this that we found our intervention, because if it didn't come out at that point in time the intervention would never have happened.* (FGD 14/6/14)

The formal evaluation completed for all these workshops revealed a predominantly positive response. Many participants expressed how informative and useful these workshops were, as it enabled them to see their community in a more positive light, and empowered them to plan action grounded in their own evaluation of needs and strengths or assets in the community. The following extracts from the evaluations of some of the participants highlight these points: "*I am now more aware of the strengths and the assets in my community*"; "*The greatest visible asset was that many people are prepared to work together*"; "*Identifying strengths helps build cohesion. It also builds community*"; "*I have learnt [from participating in the workshop] not to give up hope*"; "*I now know my community better*"; and *"[The workshop made me aware] that we can change things and we can reap the fruits from these changes"* (CAMW). Thus, knowledge became democratised in this study through the process of participation, so that it was intellectually and physically accessible, as well as locally relevant to participants (see Leung et al., 2004). These quotes further demonstrate that participation in knowledge creation was liberating and empowering because it made community members aware of their own agency and capacity to mobilise and bring about change. This awareness of agency was further increased and strengthened by the positive asset-based approach pursued in the knowledge creation process.

One of the key challenges emerging from the development and use of the asset mapping tool relates to the complexities of trying to focus on more specific assets (spiritual capacity and religious assets), and engaging in discussions on generative masculinities. The asset mapping workshop design did not allow for a lot of time to delve deeply into conceptual issues. The need to pursue more in-depth research on these conceptual challenges was noted, and followed up with focus group discussions.

A constant tension emerged between including community members as part of the research and facilitation team – and requiring them to abstain from participating (e.g., influencing the findings) during the asset mapping workshop activities. Because of their passion and concern for their community, they may have found it difficult to not become involved. Whilst this was not regarded as a challenge in this project, this should be taken into account for future similar work. Researchers should make community research team members aware of how such actions can bias the findings. For example, when each participant had to identify spaces in the community that made them feel safe, we had to remind particular community research team members to abstain from giving the answers to the participants as this would then not have been a true reflection of the participant's reality.

Significant attention needs to be paid to creating trust and a safe space to hold these workshops. This was achieved in this project due to the engagement with community members through the research team, because of the long-term engagement that had preceded this, and because of the CBPR approach adopted. An indicator that this 'worked' was the often differing views of and lively debate between participants, and the admission and participation of the drug-peddler in the one workshop!

8.9 Promoting Local Action

One of the key strengths of CBPR is that the dedication to action is inextricably linked to the research process. CBPR acknowledges the dynamic relationship between theory and practice (praxis), and is committed to both action and the research goals. At the same time, CBPR is also aware that this involves a long-term process, with an obligation to community ownership and sustainability (see Lazarus, Taliep et al., 2012).

The project's commitment to the goal of promoting local action is evident in the strong community input and involvement throughout the research process. In particular, its deliberate focus on strengths as opposed to deficits mobilised community agency so that community members not only identified their own capacity to engender and foster change, but they also acted on this realisation. The following excerpt from the research team minutes corroborates this statement:

> *[Name] said that he was already applying of [sic] the skills that he has acquired within SCRATCHMAPS within his church and is now conducting a programme with the youth*

to try and draw them into the neighbourhood watch. He said that the researchers are not responsible for the entire community, but their work must support the community. (RT minutes 7/8/2012)

[Young male research team member] suggested that we can as a short-term goal do something during the 16 days of activism. [Name] and [name] said that the most important thing for them as a short term goal is the establishment of a committee. (RT minutes 7/8/2012)

As alluded to in the above quote, numerous public events and awareness campaigns (e.g. a Peace March and an awareness campaign during the 16 Days of Activism for violence against women and children) were developed and executed completely by the research team since 2012 up until now.

A clear example of fostering local action through the production of knowledge is the exploration of the community assets and ideas for change generated in the Asset Mapping workshops and the Action Planning workshop, which was geared specifically to plan action based on community members' own assessment of needs and strengths in the community. The initial idea was to focus the intervention only on violence, but the community decided in the Action Planning workshop that broader community development was important to them, including looking at substance abuse and unemployment, both identified as risk factors for violence (see Chapter 2).

CBPR integrates knowledge and action by constructing a broad knowledge-base on health and well-being that serves as a springboard to action through the integration of that knowledge with community, as well as social change efforts in order to address community concerns (Israel et al., 1998). Numerous examples of local action emerged as a result of the CBPR and community engagement strategies pursued in this study. The following quotes from the focus group discussion conducted with the research team confirm this: "*The rugby and the netball team*"; "*People ask for advice and we give it to them*"; "*The [vegetable] garden*"; "*[Name] wanted things to be done; she took initiative and started a soup kitchen*"; "*Some people started to sweep the streets*"; "*The municipality employed people*" and "*I am involved in helping and assisting people and organisations within the community*"(RT FGD 14/6/14). It is clear from the above that the use of CBPR as an approach to research is by and of itself an intervention, as it serves as a means to inspire people to see their own agency, which propels them to action.

Using a participatory action-reflection process, CBPR thus combines and attains equipoise between research and action so that all parties benefit equally from the process.

Through active participation, information was amassed and it both stimulated and guided action, and new learnings surfaced as community members reflected on actions taken. One of the community research team members reflected in her diary as follows:

> *I got 42 men to participate in a programme by Hearts of Men. They came together in the hall in Broadlands Park. The programme deals with men and preparing them for a healthy future. Many of them are drug addicts and I chose them because I want them to bring a change in their lives. My prayer is that we, as parents must mobilise for our children and that we must be role models to them because God gave them to us as a gift and we must care for them and look after them. I gave the names to HOM and I am so proud of them because they apparently did attend the workshop and some of them thanked me for thinking about them* (RT Diary 17/3/12).

Local action was thus promoted through raising people's awareness about themselves and their surroundings, which in turn inspired and motivated them to devise plans and actions in order to help themselves (see Ngunjiri, 1998).

However, a key challenge that we faced during the research process was to deal with the contestation in the research team and Advisory Committee about the lack of 'action' on our part in addressing the challenges they faced. They thought that we were too research focused, and they were worried about the lack of action until they understood the action research imperative. The also saw the immediate positive outcomes within the community that emerged as a result of participation in the asset mapping processes.

8.10 Community Empowerment and Ownership

Empowerment is a group-based developmental, participatory process by means of which marginalised persons and groups attain better control over their lives and their environment and acquire valued resources (Maton, 2008) and skills so that community members who feel disempowered realise their own potential and become aware of their own agency and ability to reduce disempowerment and marginalisation.

The following excerpts from two of the research team members' diaries indicate how empowerment was enabled within the project:

I have gained a lot of knowledge by SCRATCHMAPS. Today we did our Action Planning for August. I also learnt that everyone wants to do their best and want [sic] to learn more. I love working with all of them. SCRATCHMAPS also gave me confidence. (RT Diary 15/6/12)

We made an arrangement and came to Hearts of Men to meet with the world's top psychologists [who attended the International Congress of Psychology conference in Cape Town] ... as we walked in our pictures were displayed on the PowerPoint and [name] told everybody that we were resilient people and she didn't notice that we walked ... I felt so good. (RT Diary 7/8/12)

Participants' active involvement in the production of knowledge and personal development and empowerment enabled them to reorient their self-perspective from being victims of their imbalanced, painful reality discernible by violence and insecurity, to one of responsibility and capability, realising that they are endowed with the intrinsic power to act. This enabled them to look at their environment with renewed lenses and take ownership of their own lives and their community. For example, one of the research team members enrolled at Boland College to complete her ECD training, another completed her teaching degree, and another obtained employment at Stellenbosch University as a research assistant, and a fourth research team member enrolled to complete a degree in theology. The following excerpt from the focus group discussion with the community research team illustrates this point.

I think the evidence of empowerment is for e.g. [Participant 8] applying for ECD. That is a direct thing. She did training; she was part of this process and on her own, nobody assisted her from this side. She wanted to do ECD. She got the information and registered. That is a symbol of empowerment, because now she is a powerful part of the community. The same with [Participant 1]. For me empowerment is a person like [Participant 3] that said "you know in the past I would take my 'knopkierrie' and sort things out, but now I am able to control myself". For me that is a sign of empowerment. You don't have to take that person or put measures in place to keep him from doing something. He is doing it himself. For me that is power. A person like [Participant 6] for e.g. that [said] you know ... my life [has] gone this way. I [made] a turn for the good and this is how my life will be going forward. Nobody had to tell her to do it. She did it for herself. (RT FGD 14/6/14)

They were thus able to become aware of their own power, their own agency to emancipate themselves from the shackles of victimhood. Empowerment is, therefore, directly linked to participation (see Kanji & Greenwood, 2001). It is clear from the above that through optimal participation and capacitation, this project employed an empowerment approach that helped community members see their own abilities and potential to help themselves and bring about change at all levels, including the personal, interpersonal, community and societal levels.

Even though the project was initiated by the Violence, Injury, and Peace Research Unit (VIPRU), it was accepted by the community stakeholders. To foster collective ownership, the project encouraged the Advisory Committee and research team members to constantly play an active role in setting agendas and sharing leadership in the project. Their active participation is clear in the following diary reflection of one RT member:

> *We did planning for the community asset mapping and also the FGD's. This was very tiring. In fact, I never realised all the processes that's involved in planning. It takes a lot of time, effort and hard work. So, now I know to appreciate it when I am a participant in a workshop or part of FGDs.* (RT Diary 6/9/12)

By actively involving community members in the Asset Mapping and Action Planning workshops as well as understanding and exploring their ideas of the key constructs and how and what they need and would like to change, the project developed a sense of ownership among community members by valuing their opinions and suggestions.

One of the key challenges faced in fostering ownership of the project was to involve the broader community. One of the research team members felt that ownership of the project was 50/50 at this particular juncture and explained as follows: "*The reason why I said 50/50 is because ownership was taken by us who represents the community, but ownership will truly be taken when the whole community becomes more involved*"(FGD 14/6/14). Another research team member stated that the broader "*community hasn't taken ownership of the SCRATCHMAPS project yet, but that is what we call passing the battle and using the skills to do it [i.e. getting them involved]*" (FGD − 14/6/14). A third member disagreed and indicated that efforts were made to involve the broader community and only those who want to be involved will come:

> *People want to be part of the project. They want to know what is going on. Although it isn't a lot of people, some still come. E.g. [Name], the Advisory Committee, people are*

interested, but others will just wonder. Like Participant 2 said sometimes you invite the people, then they don't come. If we talk about empowerment for me as religious leader I became ripe; the project touched me in that way. It made me so ripe that I preach certain aspects of this in my church in terms of community participation and leadership in church. They must be part of the project in the community it doesn't matter where they are … If I look at the spider gram it is to have a relationship and also to build relationships, not just here but also in places such as PE, Bridgetown, West-coast. The programme and the intervention that I represent here will rise up and the community will gain from this and they will show interest. (RT FGD 14/6/14)

The above extracts highlighted the constant challenge of fostering ownership of the project itself within the broader community, a challenge that has been addressed through the sustainability processes followed during this year (2015) where the research team and community members are empowered to take ownership of the intervention through the establishment of a non-profit organisation (NPO).

8.11 Community Strengthening and Sustainable Development

A final imperative for any CBPR project is to ensure a commitment to community strengthening and sustainability (Israel et al., 2006; Minkler et al., 2012). The following six principles have been identified as being key to sustainability: (1) maintain and, if possible improve residents' quality of life (or liveability), including for example, on the one hand improving education, health care, housing, income, employment, legal rights and on the other hand avoiding exposure to crime, and other risks; (2) enhance local economic vitality; (3) promote social and intergenerational equity; (4) maintain and improve, if possible, the quality of the environment; (5) include disaster resilience and alleviation into its decisions and actions; and (6) use a consensus-building, participatory process in decision-making (Monday, 2002).

One of the key strategies employed by the project to promote community strengthening and sustainability was through capacity building. The active engagement of participants in all the steps of the research process and the continuous empowerment opportunities provided to the research team thus facilitated the process towards the project's sustainability. The project also provided employment for ten under/unemployed community members, and it used the services of local providers for weekly catering. One of the research team members, for example, found additional part-time employment as a research assistant in a project run by Stellenbosch University.

Through the asset mapping workshops, members of the community were particularly motivated to start 'doing' (taking action) within their community. As mentioned earlier, some of the participants who attended the Asset Mapping workshops started a community garden; one elderly man started a rugby club with the youth, and they collected funds within the community to purchase jerseys for the team; a netball club has also been established. Numerous efforts have been pursued to enhance the quality of the environment, particularly through recycling, the local vegetable garden, and the special day events to raise awareness about various social challenges.

The intervention that was developed in this process (the *Building Bridges* mentoring programme) also had an intergenerational focus. Thus, it is envisaged that through participating in the intervention programme, a critical mass of adults and older adults will be trained to become leaders and role models in order to provide a supportive mentoring relationship to young people in the community and walk a path with them. At the same time, both adults (mentors) and young people (mentees) will benefit from the various intervention sessions through the development of skills and knowledge acquisition, amongst others.

Participatory processes are vital to community sustainability, so we tried to engage all of the stakeholders in the outcome of the decisions being contemplated. Through the Asset Mapping workshops, the FGDs, and the various awareness campaigns, community members were able to identify concerns and issues, promote the wide generation of ideas for dealing with those concerns, and find a way to reach agreement on solutions. This resulted in the production and dissemination of important, relevant information through various mediums (e.g., community reports, newspaper articles, presentations, community leaflets, etc.). This fostered a sense of community, produced ideas that may not have been considered otherwise, and engendered a sense of ownership on the part of the community for the final decision, i.e., the intervention and its focus (see Monday, 2002).

While some of the needs were directly linked to the project's focus, most of the priorities identified linked to general community building. As alluded to above, the participatory methodology framework followed in this study led to numerous community building efforts, but certain community priorities created a tension and challenge within the project. We thus had to ensure that, irrespective of the particular focus of the research project, the priorities identified by the community were also addressed in some way.

A good example of such a challenge was the establishment of a community committee that emerged as a major challenge to the project, as the community wanted us to spearhead this process and address the challenges surrounding the establishment of the committee. We decided to keep the community committee processes separate from the project itself. The following quotes demonstrate the role that the project played in this process:

> *It is important that community representatives go back into the community and establish a community committee, as the neighbourhood watch is currently functioning as an interim committee in the community, but it is not a recognised committee. The launch of SCRATCHMAPS could be used as a spur to rebuild community structures.* (AC Minutes 13/8/11)

> *Another positive point, for me, was the recognition that this project can assist in the local community to rebuild its own community structures. This was evident in the request by one of the main community leaders (whose name led to the development of the name 'Erijaville'), that they (the local leaders) use the SCRATCHMAPS initiative to re-structure a legitimate community structure for Erijaville. This has been lacking in the recent history of the area.* (PI Diary: 13/8/11)

Even though numerous efforts were pursued by the community members themselves to re-establish a community committee, various challenges continuously emerged. One of the major challenges was the historical conflict that prevailed among community leaders. We subsequently facilitated a process and provided funding for an external person from the Centre for Mediation and Arbitration at the University of Cape Town to resolve the conflict. A community committee was then established in 2014 for an interim period of six months and it was decided that, thereafter, a new committee would be elected. This, however, did not materialise. It should be noted that the very objectives for setting up the committee in the first place were pursued by the community research team in an attempt to address the needs highlighted.

In conclusion, conversations on sustainability occurred right from the start of the project and throughout, as noted by one of the research team members: "*We did the sustainability thoughts*" (RT Diary 8/8/12). Sustainability of the project was also concretely pursued through handing over the *Building Bridges* mentoring intervention. Notwithstanding the above, one of the research team members, although agreeing that sustainability was taken into account in the development of the intervention, still felt that not enough was done to ensure the project's sustainability. He stated:

Yes, but on the other hand, I think that enough wasn't done so that we could go forward with the project. For example we wasn't [sic] taught how to write letters to service providers on how to apply for bursaries and stuff like that, because there wasn't any money. If UNISA didn't give money, what could we do? So, I think that the research team needs help if they want to go forward with the project. (FGD – 14/6/2014)

However, it should be noted that the key focus for 2015 was on sustainability through the establishment of a non-profit organisation (the research team has already drawn up a constitution and has chosen prospective board members) and the further development and implementation of the *Building Bridges* intervention by the research team and other local community leaders.

8.12 Conclusion

In this chapter, I recounted the application of the CBPR principles and enactment of community engagement values in the research process. Using the key principles, as outlined in Chapter 5 in the analysis framework, I evaluated the degree to which these dimensions were adhered to in the process of planning, developing and evaluating the *Building Bridges* intervention that focuses on the promotion of positive forms of masculinity and safety and peace by mobilising spiritual capacity and religious assets. Through critical reflection, I particularly highlighted the various challenges that we encountered during the different stages of the research process, and the ways in which we attempted to address those challenges.

The next and final chapter provides a brief summary of this study's key findings, and its potential contribution to the field of violence prevention. The chapter highlights the use of CBPR methodology as a framework for guiding the development of innovative intervention strategies, underscores its importance and implications, reflexively engages with some of the study's limitations and challenges, including locating myself within the study, and explores possibilities for future research.

CHAPTER 9
CONCLUSIONS AND IMPLICATIONS

9.1 Introduction

Along with contributory risks and the resulting health burden, the current high levels of male homicide, victimisation and the perpetration of violence by men indicate that violence is a gendered phenomenon. The lack of effective strategies to address the onset and effects of exposure to violence foregrounds the need for innovative strategies to address this problem in South Africa. However, the biggest challenge in reducing the burden of violence lies in prevention, as major gaps remain concerning effective strategies for decreasing interpersonal violence in South Africa and abroad (Seedat et al., 2009). What is needed is the development of violence prevention initiatives that fit the local context where local issues pertaining to masculinity and engagement can be identified, understood and addressed. Furthermore, notwithstanding the role of religion in violence, spiritual capacity and religious assets constitute unexplored resources that could be drawn on and mobilised to combat violence and promote peace and safety. This research is an important innovation in the area of violence prevention, and safety and peace promotion as the development of interventions promoting positive forms of masculinity are considered to be an important protective factor in relation to violence prevention.

Within this context, this doctoral study's primary research objective was to evaluate the processes and steps used to plan, design and develop a community-based violence prevention intervention that mobilised spiritual capacity and religious assets to promote positive forms of masculinity, and peace and safety. This doctoral research was part of a broader study entitled, 'Spiritual Capacity and Religious Assets for Transforming Community Health by Mobilising Males for Peace and Safety' (SCRATCHMAPS), which aimed to identify and mobilise spiritual capacity and religious assets, in particular communities in South Africa and the USA, in order to address interpersonal violence.

This study was framed by a critical public health lens, and was guided by a CBPR orientation and community engagement strategy throughout every step of the development of the intervention and manual, and initial evaluation process. The overall research design was a participatory process evaluation. With the emphasis of this study being on process evaluation, the design enabled us to evaluate the processes and steps used in this study in order to assess

both the planning and the content appropriateness of the intervention for the intended participants. Methods used for this process evaluation included community asset mapping, surveys, focus group discussions, research-based workshops, diary reflections, a photo-documentary, meeting minutes, process notes and participatory observations. The analysis of the multiple sets of data was conducted appropriately, relevant to the particular data collection methods pursued and the demands of both qualitative and quantitative methods of analyses. This included thematic content and framework analysis, frequencies and descriptive statistics.

Taking into consideration the aforementioned, this chapter provides a summary of the key findings of this study and its potential contribution to the field of violence prevention. This is followed by recommendations and a reflexive engagement with some of the study's limitations, including locating myself reflexively in the study. The chapter concludes with an exploration of possibilities for future research, and my concluding thoughts.

9.2 Key Research Findings

In reflecting on this study's key findings, I have decided to provide a brief discussion on the following primary areas: (1) the initial groundwork in developing the *Building Bridges* intervention; (2) the underlying theory that guided the development of the intervention, i.e., a critical public health framework; (3) the use of CBPR methodology as a framework guiding the development of the intervention; (4) the value of spiritual capacity and religious assets as a resource for violence prevention; (5) the importance of focusing on the promotion of positive forms of masculinity, and (6) the *Building Bridges* intervention.

9.2.1 The initial groundwork

In an attempt to gain a deeper understanding of interpersonal violence, violence prevention in general, and interpersonal violence in particular, this study started out by examining literature on violence. This exploration of the literature brought to light that interpersonal violence is a grave public health concern, and that masculinities were particularly implicated in the perpetration of violence as noted by many (Jewkes et al., 2015; Krug et al., 2002; Rosenberg et al., 2006). The promotion of positive forms of masculinity was also identified as a key protective factor for violence prevention (see, e.g., Lazarus et al., 2011; Seedat et al., 2009). Various principles of a positive masculinity approach have been identified in this study. These include the following: addressing men's particular needs and concerns; reaching men where they are and providing spaces where men can meet; approaching men with positive messages;

identifying existing gender equitable behaviours among men and building upon these; providing opportunities for reflection and transforming iniquitous gender norms to help men realise that it is acceptable to refuse to conform to dominant forms of masculinity; inspiring men to reflect on their attitudes and behaviours relating to masculinity and how these reproduce or challenge violence; encouraging men and boys to understand the oppressive effects of gender inequality on women; working with youth to navigate their path to identity and sexuality formation as well as respect; strengthening men's sense of care, responsibility and positive engagement as fathers through the promotion of generative fatherhood; supporting non-violent peer support systems that promote constructive views of masculinity; helping men understand the value of finding a balance between constructive and destructive risk-taking behaviour to accomplish positive goals; promoting spiritual values, including empathy, compassion and respect; building men's reflective capacities, mindfulness and self-regulation; providing men with emotional and spiritual support; and using a 'bottom-up' approach, for example by mobilising men to plan and coordinate grassroots anti-violence or peace promotion campaigns.

One of the pertinent findings emerging from this study was the importance of ensuring that sufficient and quality groundwork was conducted before embarking on a research project in a specific community. In this study, this process entailed in-depth literature reviews as a first step in the development of interventions through a methodical documentation of existing intervention programmes, as suggested by others (see Craig et al., 2013; Rosenberg et al., 2006). This systematic documentation comprised a qualitative meta-synthesis of existing programmes focusing on the prevention of interpersonal violence with a specific focus on the promotion of positive forms of masculinity. This meta-synthesis identified 12 programmes that showed promising results. In general, all of the programmes reviewed addressed one or more forms of interpersonal violence, including youth violence, gender-based violence, sexual violence and school-based violence. Of the programmes reviewed, the most common approaches for preventing violence among young people aged 10 to 29 years focused on skills development and providing a supportive relationship through mentoring. Programmes reviewed generally combined a number of different strategies (e.g., mentoring with skills development or fatherhood) and comprised critical reflections on gender and social norms and values. In terms of context, these programmes targeted both urban and rural populations, and the majority were geared toward males, with some working with both males and females. Although qualitative evaluations of the programmes reviewed were limited, the results were often positive. Mentoring programmes, in particular, proved to be efficacious in raising

awareness of violence, changing attitudes and violent behaviour, providing a safe space for emotional vulnerability and the constructive management of anger, and, through role-modelling, promoted more positive forms of masculinity (see Cissner, 2009; Spencer, 2007; Ward, 2000; 2001). In terms of promoting positive forms of masculinity, fatherhood programmes proved to be efficacious in the promotion of generative fatherhood and better conflict management and relationships between partners and men and their children (see Anderson & Kohler, n.d.; Aronsen et al., 2003). These findings proved important for this study, as they provided the foundation for establishing the *Building Bridges* intervention programme through best practices. This review also provided evidence that combining a mentoring programme with other strategies at various levels of the system was efficacious.

The second step in the preparation phase was to gain as much background information as possible on the community of interest. This groundwork not only provided relevant information on the community, but importantly served as a means to ascertain the community's needs. This study used numerous strategies to ensure that sufficient background information was obtained on the community in order to ensure research relevance. Strategies included community profiling; initial consultations with gatekeepers; consultation with a core group of community members; a transect walk; an initial community-stakeholder meeting, and community asset mapping workshops. These initial community engagement strategies were used to get to know the people, identify the challenges and establish the initial relevance of the focus area of this study – violence prevention (which was further explored and established throughout the CBPR research process).

9.2.2 The underlying theory

This study was framed by a critical public health framework. This approach synthesised an ecological and critical perspective in order to engage key issues such as masculinities and femininities and how these are implicated in the perpetration of victimisation, as well as the prevention of violence. This perspective viewed violence and victimisation as complex phenomena with the individual (i.e., victim or perpetrator) embedded within multifaceted layers that interact to produce violence and victimisation.

Guided by an integrative critical public health approach to violence, as suggested by Lazarus et al. (2009), we took into account the size of the problem through a violence surveillance

system that indicated that interpersonal violence was a grave challenge to the community. It also brought to light the predisposing risks that contributed to the high levels of violence in the community. This framework further ensured that the *Building Bridges* intervention was based on evidence of what works in the literature as espoused by Sethi et al. (2010).

Combining a systemic and a critical lens enabled us to address violence at various levels of the system by combining different strategies into one programme. At an individual level, the intervention incorporates the promotion of positive values, draws on religion and spirituality, and facilitates a rite of passage wilderness journey for personal development purposes. The programme, further, promotes positive forms of masculinity through interactive role play and critical engagement of gender and issues of power, and provides education and skills training, including conflict management, communication and goal setting. At a relationship level, the programme provides supportive relationships to youth through mentoring; engages critically in issues surrounding risk-taking behaviour, youth and violence; engages in redefining gender roles through critical engagement; promotes generative fatherhood/motherhood; and capacitates community leaders and others as role models through leadership skills training. At a community level, the intervention involves religious and other community leaders and community members in local campaigns focusing particularly on substance abuse and unemployment, providing skills and information on how to develop and run campaigns. At a broader societal level, the intervention aims to create awareness of violence and violence prevention through awareness raising and partnerships with various sectors. Thus, this study has been able to demonstrate the value, importance and usefulness of utilising an integrative critical public health approach to develop a violence prevention intervention within a community context.

This study acknowledged the need to use a critical lens, as the dynamics and complexity of relationship issues such as power and gender can only be assessed, engaged and addressed through critical engagement. The use of this lens enabled us to contribute to existing understandings of concepts that have been investigated in this study, particularly *masculinities*, and new concepts that emerged, in particular *spiritual capacity*. Through this lens, this study explored the community's understandings of key concepts, i.e., masculinity, spiritual capacity and religious assets. This exploration enabled us to identify existing conceptions of masculinities and how these impact on violence, issues of power and the subjugation of others.

At the same time, the critical lens also identified existing positive aspects of masculinities that were present in the community and how these could be mobilised to prevent violence. This exploration further enhanced our understanding of the notion of spiritual capacity and the value of mobilising spiritual capacity and religious assets for the promotion of positive forms of masculinity.

9.2.3 Focusing on masculinities

This study's findings have shown that various negative notions of masculinity exist alongside positive forms of masculinity in the community. Firstly, the findings corroborate findings by others (Canham, 2009; Messerschmidt, 1993; Morrell, 1998; Everitt-Penhale & Ratele, 2015), highlighting that masculinities are socially constructed and can change over time. Secondly, findings indicate that men resort to violence in order to establish their position of power, to demonstrate power, and to express their manhood in instances where they are unable to live up to the hegemonic ideal or where they feel emasculated. In marginalised communities where unemployment is high, this appeared to be more pronounced, as unemployed men were depicted as worthless, weak and not good enough. These findings resonate strongly with findings and deductions by others (Bird et al., 2007; Connell & Messerchmidt, 2005; Lazarus et al., 2011; 2009; Ratele, 2010; Seedat et al., Vetten & Ratele, 2013; Wyrod, 2008). Linked to the notion of alexithymia discussed by Haen (2011), we also found that affective traits associated with negative notions of masculinity included restricted emotions or being emotionally tough, and a lack of care and concern. Other negative masculinity traits identified included male virility, lack of engagement as fathers, as well as male superiority and the resultant subjugation of others.

Participants in this study expressed a range of positive forms of masculinity that run counter to the dominant hegemonic script. The list of positive masculinity qualities include promoting positive moral values such as respect, compassion, peace, honesty, being responsive and approachable, being a protector, being a positive role model, egalitarian relationships, mentoring by providing a supportive relationship to young people, and working with men as partners to promote generative masculinities. The promotion of generative fatherhood (and motherhood) was also emphasised as an important means of promoting positive forms of masculinity. Participants particularly highlighted the display of emotions such as care, communication and compassion related to generative fatherhood as important positive masculinity traits.

The role of fathers and other male role models in the promotion of positive forms of masculinity was also emphasised as important to providing youth with supportive relationships, thereby preventing violence and enhancing safety and peace. Researchers have highlighted the role of connectedness to family and important others, for example mentors and religious leaders, as protective factors against violent behaviour (Haen, 2011). In this regard, participants also highlighted the importance of providing a space or having 'peace circles' where young people (mentees) and older males (mentors) could discuss issues around masculinity, spirituality and religion, and envision new ways of being male as proposed by Longwood et al. (2004).

Another important finding that emerged around gender roles was that these roles are shifting within marginalised contexts, albeit minimally. Whilst societal scripts dictate that the man must be the breadwinner, reality in South Africa presents another picture with high levels of unemployment and a lack of skills. It emerged that some men in the community were stay-at-home fathers who assumed parenting responsibilities. The need to redefine work and family roles was emphasised by participants in this study. South African experts (Ratele, Shefer, Bowman, & Duncan, 2008) have alluded to the need for unpacking and engaging the meanings of manhood, masculinities, femininities and gender, as well as the co-construction of these notions and gender roles in order to make transformation possible. This study acceded to this call by firstly exploring the community's conceptions of these issues and collectively planning, developing and evaluating (which falls outside the scope of this study) the intervention implementation process and outcomes.

Employment emerged as a double-edged sword in this study. The results illustrated that a great deal of emphasis was placed on a man's ability to provide for his household, as well as the commodification of the man's employment status that depicts his 'manhood status'. Whilst the worker-provider role has been identified in the literature and in this study as a positive 'masculinity trait', I argue that it is precisely the instinct of provider that renders this and other positive forms of masculinity as a double-edged sword that can easily swing from one side to the other, depending on socio-economic status, often beyond the individual's control. Masculinities within the South African context should therefore be viewed within the context of marginalisation, as proposed by Ratele (2008).

It can therefore be argued that positive (and negative) forms of masculinity occur on a continuum. On the one hand, the 'provider-breadwinner' notion can be a positive trait as long as such roles are not challenged or threatened. However, when the man is unable to fulfil this role, it can have serious psychological consequences. As postulated by others (UN, 2011), he may experience a lack of self-worth and feel deficient and emasculated. As a result, he may attempt to reassert his worth by reasserting his power through the subjugation of vulnerable others. The man is thus in constant search of a 'balanced masculinities' to prevent the continuum from tilting to the negative side (K. Ratele, personal communication, November 3, 2015). It is thus important for us to understand how one would continue to draw on the positive aspects of masculinities because, the moment the continuum is disturbed, this in itself becomes the cause of an inclination to violence. The question remains: 'What is it that keeps the glue intact when the external environment is disturbed and one feels inadequate and threatened by the dominant discourse of how a man should be, and revert to defence mechanisms to show one's value, strength and relevance?' It is here that I argue, and this study shows, that spiritual capacity and religious assets can play a key role by instilling the values that are necessary to temper a negative swing on the continuum.

9.2.4 Spiritual capacity and religious assets as a resource for violence prevention

Various factors relating to spiritual capacity and religious assets were clearly identified in this study for promoting positive forms of masculinity and safety and peace, including the key role that religious leaders can play in promoting peace through their leadership in communities. The findings further highlighted the importance of unity, cohesion and working together across faith denominations by focusing on what everyone has in common. The findings emphasise the power of personal agency linked to empowerment and in-powerment, faith, meditation and prayer as means to enhance spirituality and, by extension, safety and peace. All of these relate to the notion of spiritual capacity and religious assets, which have been identified in the literature as possible means for promoting positive forms of masculinity, safety and peace.

Participants in this study linked religion to the construction of character and the promotion of peace in that it served as a mechanism of control in making healthy choices. In this regard, values (respect, care, compassion, hope, responsibility, trust, building relationships, mindfulness and agency) emerged from the findings as key components of spiritual capacity and religious assets that the community felt should be included in the intervention. These findings resonate with the suggestions made by various experts in the field of peace studies

who have highlighted the important role of values in promoting harmony and social justice, and emphasised various values as peacebuilding capacities such as compassion, empathy, trust, fairness, respect for others, an inclination towards prosocial behaviour, and the inclusion of others (Britto et al., 2014; Christie et al., 2014; Lazarus, Taliep, Cochrane, Simmons, & Seedat, 2015; Leckman, Panter-Brick, & Salah, 2014). In this regard, education, including religious education, was seen as important to peace promotion through promoting positive values and principles.

Activities organised by faith-based organisations, for example youth programmes, were identified as important assets, as they bring people together and help to promote belonging, agency and responsibility. The helpful faith-based rituals and practices, including prayer, mindfulness and meditation, that these organisations espouse, were considered to be peace promoting. Participants emphasised the mobilisation of religious assets to develop spirituality and cited by way of example undergoing rites of passage (i.e. wilderness experience), the use of mindfulness, and reading scriptures. This is congruent with findings by other researchers (Clowes et al., 2010; Greeff & Loubser, 2008; Lazarus et al., 2011; Longwood et al., 2004) who suggest the development of boys' and men's spirituality as a means to challenge and reflect on the dominant masculine norms and ideals; and providing the space for young men, in particular, to undergo rites of passage.

Participants noted a number of characteristics linked to positive manifestations of masculinity, and forged a link between these values and spiritual capacity and religious assets in the promotion of peace and safety. It is argued that, if the roles that are innately constructed socially within the male perceptions of gender roles and are tempered with a clear spiritual-ethical value system (which are really universal values) linked to positive forms of masculinity (as discussed previously), then this could minimise the negative influences males somehow encounter when they face difficult socio-economic challenges within marginalised societies as South Africa.

9.2.5 Community-based participatory research

This study confirmed the utility of using CBPR as a strategy for community engagement in the development of interventions. A key aspect that requires attention in community-based research is the interplay between researcher-derived and researcher-driven agendas and that of community needs and agendas. Importantly, communities may have many needs and organisations or universities may have a particular focus which requires careful negotiation to

ensure community endorsement of a shared agenda. The use of a CBPR approach ensured that the research agenda was aligned with the community's needs and brought the pertinent social challenges that the community felt were most important to the fore. The results of this study confirm that the use of CBPR ensured research relevance and enhanced the chances of the success of the intervention, as it encouraged and drew on the active participation of the community. This ultimately laid the foundation for fostering sustainability and ownership. As indicated in the results chapters, violence prevention, as a focus area, was continually presented to the community throughout every step of the research process in order to ensure that the research agenda was aligned with community needs.

The CBPR method enabled us to be flexible with regards to the key focus, as the community continuously emphasised that even though violence is a key challenge for them (which was confirmed by the violence surveillance conducted), there were other pertinent needs that community participants wanted this intervention study to address. Based on these suggestions and requests, the intervention included a focus on substance abuse, unemployment and femininities alongside masculinities. These requests, although emerging from the community, have since been affirmed by research as important aspects in addressing violence from a critical multi-level public health framework.

Importantly, the use of CBPR served as a guiding framework to continuously engage the community throughout the research process. It ensured a collaborative partnership with the community that was enhanced through the establishment of two community structures: a community research team and an Advisory Committee. This study provided an opportunity for continuous capacitation of the community research team, with various research and personal development skills, as well as the academic researchers, thereby aligning with the empowerment principle of CBPR.

The principle of empowerment is fundamental in this kind of research, particularly for the purposes of sustaining the project through the transfer of skills and the capacitation of community members so that they are able to exercise control of the programme on their own once the project is terminated.

As opposed to a deficit approach, which tends to place blame and aggravate community members' feeling of helplessness in attending to the social challenges that they face, this study adopted a positive standpoint and emphasised the importance of focusing on assets. This proved to be a key enabling factor in this research study, as community members became aware of the assets that were available to them, including themselves as assets. This study confirms that the use of CBPR in and of itself can be regarded as an intervention or a change strategy. In this study, the asset mapping processes followed, and continuous engagement of community members in every facet of the research process enabled community members to see their own capacity and themselves as change agents. The asset mapping strategy mobilised citizens and led to various community-led activities. Broader community development thus occurred as an outcome of the CBPR and asset mapping processes used in this study.

These CBPR principles were especially relevant and invaluable in this study, which occurred in a low-income marginalised community where the legacy of apartheid is glaringly visible in the daily lives of the community members and in the physical location itself. The liberatory and emancipatory capacity of the principles of empowerment and a positive asset-based approach cannot be overemphasised. It gave people hope and it enabled them to become aware that 'they could be the change that they want to see'. It made them aware that they had the power to transform their community. As a multi-faith community, the asset-based approach enabled them to recognise that they were endowed with spiritual capacity and had access to numerous religious and other assets of which they were previously oblivious (or hadn't realised the potential thereof) that could be mobilised to bring about change, foster peace and safety, and promote positive forms of masculinity.

It was envisaged and did actually materialise when the intervention was implemented (see Van Geselleen et al., 2015) that through participation in the mentoring programme, a critical mass of leaders would be capacitated. The adults and community leaders would become assets as role models and mentors to young people and provide them with a supportive relationship by mentoring young people.

Despite these strengths, we faced numerous challenges in adopting a CBPR approach. Importantly, CBPR researchers will often find that the roles that they play in the community often surpass that of academic researcher and outsider; they become involved with the community as people, as colleagues and as friends. While this can sometimes be taxing, it is

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important to the CBPR process that community members feel valued, and often this requires academics to step outside their comfort zone and assist according to their means. For example, when one of our community members lost a son, we provided support; and when a young boy in the community committed suicide on the day we had planned our first community meeting, we extended our condolences to the family and attended the funeral. While it is important to provide this kind of care and support, it is also important to set boundaries, as researchers themselves are also human and community members need to respect such boundaries.

As it emerged from this study, power-relations in particular played a key role in the production of challenges. This study entered the community well aware of long-standing conflict emerging from historical challenges and the lack of community leadership structures. Certain individuals that played a key role in this conflict were also members of our research team and Advisory Committee. It is thus important for CBPR researchers to be skilled in effective communication and conflict resolution strategies. Within the research team and Advisory Committee, there were powerful individuals who constantly attempted to exert control within the group. In this regard, researchers should accommodate and provide for a balancing out of power relations; always being vigilant about how to balance such power relations to avert the potential for dominant voices to drown out the participation of the rest of the members of the group. If individuals feel marginalised or side-lined within the group, then their commitment will be eroded. In order to retain the commitment of all members of the group, it was important for us to monitor and facilitate positive power relations within the group. There are ways and means of assuring that this does not happen, and communication and conflict management skills are key to mitigating the challenges linked to power faced by researchers using CBPR. In this project, we exposed the group to conflict management skills and focused on the need for the development of conflict management skills within the group and through that empowered the group generally, but also began to regulate power relations within the group to avert potential conflict and concomitantly retain the commitment of members to the project.

The findings highlighted the importance of mitigating the various challenges that researchers encounter when conducting CBPR. The values of trust and ongoing effective communication address some expected and some unanticipated challenges that arise during the research process; these cannot be overemphasised. A key factor in this study was that the community members' contributions and knowledge were valued through active participation. It has been critical for the ongoing progress and continuity of the project itself that the community

successfully take ownership of the project, and anything that will threaten this important element would be a threat to the project itself (see Lazarus, Taliep et al., 2012).

9.2.6 The *Building Bridges* intervention

We, as many others in the field of violence, have identified the need for developing community-based programmes that fit the local context (see Hurst, 2012; Krug et al., 2002). This entailed the use of participatory strategies where local community leaders, service providers and community members were consulted; where local cultural issues pertaining to masculinities and the mobilisation of spiritual capacity and religious assets were identified, understood and utilised in designing the *Building Bridges* intervention to help change violent behaviour. Using various participatory methodologies (outlined in Chapters 5, 6, and 7), we developed a basket of interventions.

The core components emerging from the CBPR process used to identify the intervention components applied various strategies at the different levels of the system. At an individual level, these include values, drawing on religion and spirituality, education and various skills training, and a wilderness journey. At a relationship level, the intervention includes mentoring and critical reflections on gender, gender role clarification, generative fatherhood and motherhood. Community-level components included involving religious leaders and religious institutions, running a substance abuse and unemployment campaign. At a societal level, the intervention includes using the local media and regular awareness campaigns.

The initial Delphi Panel and community evaluations of the intervention enabled us to make various changes to the manual. Findings from this initial evaluation were predominantly positive, and suggestions were made for improving the manual. Key changes included structural changes, language, time, and including women.

9.3 Recommendations

First, based on the findings from this research, it is recommended that researchers who wish to address community challenges, particularly within marginalised communities where resources are limited, use a CBPR framework to guide them in the research process. This will ensure that they address issues that are relevant to the community.

Second, numerous authors have argued for the promotion of positive forms of masculinity as an important strategy in the prevention and mitigation of violence, but these have remained just recommendations. Few interventions have been developed with a specific focus on promoting positive forms of masculinity for safety and peace. Taking into consideration the huge burden of violence and the great paucity of effective interventions to address this challenge, the need to assess the effectiveness of existing strategies and the development of interventions cannot be overemphasised. It is thus crucial that strategies that work and that appear to be effective be tested more rigorously and implemented on a wider scale.

Third, a large sector of South African society is religious, and this study has shown that spiritual capacity and religious assets are invaluable resources to mobilise in order to promote safety and peace and positive forms of masculinity, as has been indicated by others as well. In marginalised communities where resources are scarce, this asset is particularly valuable as a resource for mobilisation and the mitigation of various social challenges including violence.

Fourth, it is clear from the above findings that this study has furthered understanding on the promotion of positive forms of masculinity and violence prevention, but these findings are limited to one community. It is therefore recommended that explorations of masculinities, assets and violence prevention be explored in other South African communities to further our understanding of how such assets work or may work to prevent violence.

9.4 Limitations of the Study

This study had a number of limitations. Firstly, a key limitation of using the case study method included data overload, as there were various sources of data for analysis; it was difficult to represent the complexity of the planning, development and initial evaluation of the *Building Bridges* intervention in writing, and I had to use the data selectively. This is the reason why I could not include the process and outcomes evaluation, as it would have been too much for this PhD study. These limitations are in conformity with those identified by Hodkinson and Hodkinson (2001).

Secondly, conducting CBPR is 'messy' and a key challenge was to manage this messiness. This barrier was managed through the development of various skills including conflict management and communication skills, personal development and continuous guidance by experienced CBPR researchers, as well as flexibility as suggested by others (Lazarus, Duran et

al., 2012; Kanji & Greenwood, 2001; Nation et al., 2011). This limitation was overcome through a hands-on approach where capacitation for effective community engagement as well as learning communication and conflict management skills in order to mitigate community conflict was directly linked to the project.

Thirdly, adopting both the case study method and a CBPR approach is time-consuming, demanding and costly. However, time and due process are important for the development of democratic partnerships, and so too is funding as espoused by Blevins et al. (2008) and Springett and Wallerstein (2008). In this project, time was incorporated in the research protocols and funding grants. This is in agreement with the suggestion by Kanji and Greenwood (2001), who advise that the time and costs required for participation should be clearly documented in project proposals since they have implications for donors who indicate their support for utilisation. Time is also important for community participation in devising a well-developed community-based intervention that involves many consultations, data collection strategies and action planning.

Another limitation of this study is that it is predominantly qualitative and based on my subjective interpretation of participants' views and opinions expressed in the various data sets. However, I used member checking to ensure that I presented the community accurately by having two of the research team members independently read through the results and discussion chapters to check and verify the accuracy with which I represented them and their ideas.

Furthermore, from a traditional perspective, the findings of case studies are not generalisable. However, it can be argued that since the case study is a qualitative method, generalisability is not a main concern as our aim was not to generalise results from a particular sample to the broader population, but instead to endeavour to demonstrate the transferability of the findings.

A key methodological challenge emerges because CBPR is evaluated against the gold standard of conventional research. CBPR raises difficulties relating to obtaining scientific 'control' for research purposes. In this type of community-based research, members cannot be randomly assigned; research can often not be replicated, findings are not generalisable; external events do generate bias (see Farquhar & Wing, 2008: Nation et al., 2011; Stoecker, 2005). It should be noted that whilst the limitations highlighted above are often regarded as shortcomings of CBPR, they are also strengths of this kind of community-based studies.

A number of strategies were used to address validity challenges in this study. We overcame these challenges by choosing a design that allowed for depth and flexibility, and that ensured rigour in data collection. Validity was further enhanced by equalising research tensions (for example, the control of phenomena); devising rigorous tools and methods; using local and culturally applicable methods and instruments including community involvement in the development phases of instruments and methods; utilising multiple methods; developing a range of validity measures to warrant rigour and quality; and including members of the community in the analysis and interpretation of data where suitable (see Lazarus Duran et al., 2012; Lazarus, Taliep et al., 2012).

9.5 Suggestions for further research

Since the current study was conducted within a particular low-income South African community, it would be important to implement the intervention with a different community and do a comparative analysis between the two communities. Alternatively, a comparative analysis could be done with a similar community that did not receive the intervention initially but at a later stage.

In this study, the Critical Public Health Framework provided a meta-framework for combining a critical lens with a systems perspective to understand violence and devise strategies to address violence. Future research would do well to use this framework in the prevention of other forms of violence within South Africa, as it can provide a sense of the multiple determinants and protective factors of violence at various levels of the ecological system and critically reflect on issues of marginalisation, subjugation, historical trauma, and structural determinants of violence.

As mentioned previously, this research focused on the development phase of this intervention, and a process and outcomes evaluation has been conducted as separate studies. The intervention implementation process was evaluated throughout the period of implementation of the intervention by four community research team members and one academic researcher from VIPRU. The outcomes evaluation was conducted immediately after implementation by an external evaluator. In this regard, it would also be important to do a follow-up impact evaluation to assess the effectiveness of the intervention and to track changes over time.

9.6 Conclusion

Violence in South Africa is not only inextricably linked to various structural determinants, but it is also gendered. The high levels of interpersonal violence, particularly among young males from marginalised communities, requires innovative, community-based, multi-level strategies in order to mitigate the multiple causes and resultant outcomes arising from this public health burden. In order to understand this complexity and devise appropriate strategies to address interpersonal violence, this doctoral study used a Critical Public Health Framework that intentionally brought together a multi-level, systemic approach with a critical examination of the power dynamics that intersect across the various ecological levels. I believe that one cannot isolate individuals from the various systems within which they are embedded, from the structural conditions within they are surrounded, from the social interaction within which they exist – all of these together interact to generate violence. This study confirms the utility and efficacy of this framework for developing an intervention that addresses such complexity.

This study further breaks new ground by addressing a gap in violence research, namely, the development and initial evaluation of an intervention that addresses interpersonal violence by mobilising spiritual capacity and religious assets to promote positive forms of masculinity, safety and peace. The results further demonstrated that a strength or asset-based, gender-sensitive approach, with men working alongside women, is conducive to promoting positive forms of masculinity to create safety and peace.

Despite the role of religion in the perpetration of violence (often referred to as the negative side of religion), in low-income communities where resources are scarce, spiritual capacity and religious assets are particularly valuable but under-utilised resources that can be mobilised to address various social challenges.

This study further added to the CBPR corpus of knowledge by providing evidence that using this approach ensures optimal participation by community members, fosters empowerment and ownership, and importantly, ensures that interventions are aligned with community needs to name but a few. Using a CBPR framework, including an assets-based approach, has been proven to lead to social transformation through empowerment and creating awareness of personal agency, which mobilised community members to take action.

Finally, the promotion of positive forms of masculinity is embedded in the belief that men are not innately violent, that masculinities are socially constructed and co-constructed by men and women, that gender roles are not 'carved in stone' but are and can be negotiated, and that men can and do change their behaviour. A positive masculinity approach holds much promise for changing negative constructions of masculinity, implicated in the perpetration and victimisation of interpersonal violence.

> *" ... it was my Master who taught me not only how very little I knew but also that any wisdom to which I might aspire could consist only in realising more fully the infinity of my ignorance"* **(Schilpp, 1974, p 3)**

REFERENCES

African Religious Health Assets Programme. (2006). *Appreciating assets: The contribution of religion to universal access in Africa. Report for the World Health Organization.* Cape Town: ARHAP. Retrieved from http://www.arhap.uct.ac.za/downloads/masang_execsumm.pdf.

Agency for Co-operation and Research in Development (ACORD). (2007). *Implementing Stepping Stones: A Practical and Strategic Guide for Implementers, Planners and Policy Makers.* ACORD Publication. Retrieved from http://www.steppingstonesfeedback.org/index.php/page/Resources/gb

Agostinho, S. (2005). Naturalistic inquiry in e-learning research. *International Journal of Qualitative Methods, 4*(1), 1-13.

Ahmed, S. M., Beck, B., Maurana, C. A., & Newton, G. (2004). Overcoming barriers to effective community-based participatory research in US medical Schools. *Education for Health, 17*(2), 141-151. doi: 10.1080/13576280410001710969

Ahmed, R., & Pretorius-Heuchert, J. W. (2001). Notions of social change in community psychology: Issues and challenges. In M. Seedat, N. Duncan & S. Lazarus (Eds.), *Community psychology: Theory, method and practice* (pp. 67 – 85). Cape Town: Oxford University Press.

Ahmed, R., Seedat, M., Van Niekerk, A., & Bulbulia, S. (2004). Towards discerning community resiliency: An exploratory investigation. *South African Journal of Psychology, 34*(3), 386-408.

Allen, A. R. (2011). Feminist perspectives on power. Stanford encyclopedia of philosophy. Retrieved from http://plato.stanford.edu/entries/feminist-power/

Altbeker, A. (2007). *A country at war with itself: South Africa's crisis of crime.* Jeppestown: Jonathan Ball Publishers.

Altbeker, A. (2008). *Adding insult to injury: How exclusion and inequality drive South Africa's problem of violence.* Johannesburg: Centre for the study of Violence and Reconciliation.

Alvesson, M., & Sköldberg, K. (2009). *Reflexive methodology: New vistas for qualitative research* (2nd ed.). London: Sage Publications.

American Psychological Association. (2011). *Definition of Terms: Sex, Gender, Gender Identity, Sexual Orientation Excerpt from: The Guidelines for Psychological Practice with Lesbian, Gay, and Bisexual Clients, adopted by the APA Council of*

Representatives, February 18-20, 2011. Retrieved from
https://www.apa.org/pi/lgbt/resources/sexuality-definitions.pdf

Amos, T. (2010). *Literature review on mobilizing assets to promote safety and peace.*
Tygerberg: Medical Research Council-UNISA. Unpublished manuscript.

Anderberg, D., Rainer, H., Wadsworth, J., & Wilson, T. (2013). Unemployment and
Domestic Violence: *Theory and Evidence IZA* (Discussion Paper No. 7515). Bonn:
The Institute for the Study of Labor (IZA).

Anderson, A. (2004). *Theory of change as a tool for strategic planning: A report on early
experiences.* The Aspen Institute Roundtable on Community Change. Retrieved from
www.theoryofchange.org/pdf/tocII_final4.pdf · PDF file

Anderson, A. (2005). An introduction to theory of change. *The Evaluation Exchange, XI*(2).
Retrieved from http://www.hfrp.org/evaluation/the-evaluation-exchange/issue-
archive/evaluation-methodology/an-introduction-to-theory-of-change

Anderson, J. C., Campbell, J. C., & Farley, J. E. (2013). Interventions to address HIV and
intimate partner violence in Sub-Saharan Africa: A review of the literature. *Journal of
the Association of nurses in Aids care, 24*(4), 383-390.

Anderson, E. A., & Kohler, J. K. (n.d). Maryland Responsible Fatherhood Demonstration
Project Evaluation. Department of Family Studies University of Maryland. Retrieved
from https://sph.umd.edu/sites/default/files/files/Maryland%20Responsible
%20Fatherhood%20Evaluation%20Report.pdf

Anderson, J., & Terer, K. (2013). Good practice lessons from Australian crime and violence
prevention awards winners. *Trends and Issues in Crime and Criminal Justice*, (455),
1-12.

Anthonissen, L. (2011). *Exploring the influence of gender on how female facilitators of a
wilderness programme view "wilderness"* (Unpublished master's thesis). Stellenbosch
University, Stellenbosch.

Arnold, L. (2012). Fatherhood. In J. R. Cochrane (Chair), *Symposium on Violence Prevention
Initiatives.* Symposium conducted at the meeting of Violence Injury Peace Research
Unit (SAMRC/UNISA), Strand.

Aronson, R. E., Whitehead, T. L., & Baber, W. L. (2003). Challenges to masculine
transformation among urban low-income African American males. *American Journal
of Public Health, 93*(5), 732–741.

Attree, P., & French, B. (2007). *Testing theories of change associated with community
engagement in health improvement and health inequalities reduction.* Report prepared

for National Institute for Health and Clinical Excellence (NICE). Retrieved from p.attree@lancaster.ac.uk

Aubel, J. (1999). Participatory programme evaluation manual: Involving programme stakeholders in the evaluation process. Retrieved from http://pdf.usaid.gov/pdf_docs/PNACH756.pdf

Babbie, E., & Mouton, J. (2006). *The practice of social research*. South Africa: Oxford University Press.

Balcazar, F. E., Taylor, R. R., Kielhofner, G. W., Tamley, K., Benziger, T., Carlin, N., & Johnson, S. (2004). Participatory action research: General principles and a study with a chronic health condition. In L. A Jason, C. B. Keys, Y. Suarez-Balcazar, R. R. Taylor & M. I. Davis (Eds.), *Participatory community research: Theories and methods in action* (pp.17- 35). Washington, DC: American Psychological Association.

Banjoko, A. A. (2011). Adolescent African American males and hegemonic aggressive masculinity. *Counterpoints, 392,* 136-148. Retrieved from http://www.jstor.org/stable/42981022

Banning, J. (n.d.). *Ecological triangulation: An approach for qualitative meta-synthesis.* Retrieved from http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.152.5185 &rep=rep1&type=pdf

Barak, G. (2006). A critical perspective on violence. In W. S. DeKeseredy & B. Perry (Eds.). *Advancing critical criminology: Theory and application* (pp. 133-154). Lanham, MD: Rowman and Littlefield Publishers, Inc. Retrieved from http://www.greggbarak.com/custom3_2.html

Baranowski, T., Cullen, K. W., Nicklas, T., Thompson, D., & Baranowski, J. (2003). Are current health behavioural change models helpful in guiding prevention of weight gain efforts? *Obesity Research, 11*, 23S-43S.

Barker, G. (2008). Men, Buddhism and the discontents of Western Modernity. *Journal of Men, Masculinities and Spirituality, 2*(1), 29-46.

Barker, G. & Pawlak, P. (2011). Men, families, gender equality and care work. In United Nations (Ed.), *Men in families and family policy in a changing world* (9-45). New York: United Nations.

Barker, G., & Ricardo, C. (2005).Young men and the construction of masculinity in Sub-Saharan Africa: Implications for HIV/AIDS, conflict, and violence. *Social

Development Papers: Conflict Prevention & Reconstruction (Paper 26, pp. 1-81), Washington DC: The World Bank..

Barker, G., Ricardo, C., & Nascimento, M. (2007). *Engaging men and boys in changing gender-based inequity in health: Evidence from programme interventions.* Geneva: World Health Organisation.

Barker, G., Ricardo, C., Nascimento, M., Olukoya, A., & Santos, C. (2010). Questioning gender norms with men to improve health outcomes: Evidence of impact. *Global Public Health, 5*(5), 539-553. doi: 10.1080/17441690902942464

Barnett-Page, E., Thomas, J. (2009). Methods for synthesis of qualitative research: A critical review. *BMC Medical Research Methodology, 9*,59. doi: 10.1186/1471-2288-9-59

Barroso, J., & Powell-Cope, G. M. (2000). Metasynthesis of qualitative research on living with HIV infection. *Qualitative Health Research, 10*(3), 340-53.

Bauman, C. (2010, 10-12 August). *Subverting violence reflections on the Men's Project of the Centre for Christian Spirituality as a response to violence and domination in South Africa.* Paper presented at Violence in the Democratic South Africa: A challenge to theology and the churches, University of Pretoria, Pretoria. Retrieved from http://web.up.ac.za/sitefiles/file /49/2852/Christoph%20Baumann%20-%20Subverting%20Violence%20final.pdf

Benbasat, I., Goldstein, D. K., Mead, M. (1987). The case research strategy in studies of information systems. *MIS Quarterly 11*(3), 369-386.

Berkowitz, A. D. (2004). An Overview of the Social Norms Approach. In L. Lederman, L. Stewart, F. Goodhart & L. Laitman (Eds). *Changing the Culture of College Drinking: A Socially Situated Prevention Campaign* (pp.187-208). New York, NY: Hampton Press.

Bess, G., King, P., & LeMaster, P. L. (2004). Process evaluation: How it works. *American Indian and Alaska Native Mental Health Research, 11*(2), 109-20. Retrieved from http://www.nih.gov/pubmed/15322979

Bhorat, H., & van der Westhuizen, C. (2010). *Estimating a poverty line: An application to free basic municipal services in South Africa.* South Africa: South African Local Government Association (SALCA).

Bettez, S. C. (2011). Building critical communities amid the uncertainty of social justice pedagogyin the graduate classroom. The Review of Education, Pedagogy, and Cultural Studies, 33, 76–106.

Biddulph, S. (1995). *Manhood.* Sydney: Finch Publishing.

Big Brothers Big Sisters of America. (2015). *Big Brothers Big Sisters of America.* Retrieved from www.bbs.org/site/c-9ilL13NGkhk6F/b.5962335/k.BE16/Home.htm

Bird, S. R. (1996). Welcome to the Men's Club: Homosociality and the maintenance of hegemonic masculinity. *Gender and Society, 10*(2), 120-132.

Bird, S., Delgado, R., Madrigal, L., Ochoa, J. B., & Tejeda, W. (2007). Constructing an alternative masculine identity: The experience of the centro Bartolomé de las Casas and Oxfam America in El Salvador. *Gender & Development, 15*(1), 111-121. doi: 10.1080/13552070601179227

Bishop, R. (2005). Freeing ourselves from neocolonial domination in research: A Kaupapa Maori approach to creating knowledge. In N.K. Denzin & Y.S. Lincoln (Eds.), *The Sage handbook of qualitative research* (3rd ed., pp. 109-239). Thousand Oaks: Sage Publications.

Bitar, G. W., Kimball, T. G., Gee, R., & Bermúdez, J. M. (2008). Overcoming man pride: Redefining masculinity with Mexican American men on federal probation. *Journal of Feminist Therapy, 20*(1), 21-45. doi: 10.1080108952808801907093

Blevins, D., Morton, B., & McGovern, R. (2008). Evaluating a community-based participatory research project for elderly mental healthcare in rural America. *Clinical Interventions in Aging, 3*(3), 535-545.

Blume, T. W. (1996). Social Perspective on Violence. *Michigan Family Review, 2*(1), 9-23. Retrieved from http://hdl.handle.net/2027/spo.4919087.0002.102

Bohman, J. (2015). *Critical Theory.* In E. N. Zalta (Ed.), *The Stanford Encyclopedia of Philosophy.* Metaphysics Research Lab, CSLI. Stanford University. Retrieved from http://plato.stanford.edu/archives/win2015/entries/critical-theory

Boon, V., & Head, N. (2010). Critical theory and the language of violence: Exploring the issues. *Journal of Global Ethics, 6*(2), 79-87.

Botha, M. (2007). *Harnessing wilderness in the rehabilitation of male adolescent offenders in a diversion programme.* (Unpublished master's thesis), Stellenbosch University.

Boxer, P., Huesmann, L. R., Dubow, E. F., Landau, S. F., Gvirsman, S. D., Shikaki, K., & Ginges, J. (2013). Exposure to Violence across the Social Ecosystem and the Development of Aggression: A Test of Ecological Theory in the Israeli-Palestinian Conflict. *Child Development, 84*(1): 163–177. doi: 10.1111/j.1467-8624.2012.01848.x

Bowen, F., Newenham-Kahindi, A., & Herremans, I. (2010). When suits meet roots: The antecedents and consequences of community engagement strategies. Journal of Business Ethics, 95, 297– 318.

Bradbury, H., & Reason, P. (2008). Issues and choice points for improving the quality of action research. In M. Minkler & N. Wallerstein (Eds.), *Community-based participatory research for health: From process to outcomes* (pp. 425-444). San Francisco, CA: Jossey-Bass.

Braithwaite, J., & Daly, K. (1994). *Masculinities, Violence and Communitarian Control.* Retrieved from https://www.anu.edu.au/fellows/jbraithwaite/_documents/Articles/ Masculinities_Violence_1994.pdf

Brankovic, J. (2012). *Leaving the gangster things to boys growing up now: Young men, physical violence, and structural violence in post-transition South Africa.* Cape Town: The Centre for the Study of Violence and Reconciliation (CSVR), University of the Western Cape.

Brantmeier, E. J. (2005). *Empowerment pedagogy: Co-learning and teaching.* Indiana University. Retrieved from http://www.indiana.edu/‿/eeehman/Brantmeier.pdf

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology, 3*(2). 77-101.

Brendtro, L. K., Brokenleg, M., & Van Bockern, S. (2001). *Reclaiming youth at risk: Our hope for the future*. Bloomington, IN: Solution Tree.

Bretherton, D., Weston, J., & Zbar, V. (2005). School-based peace building in Sierra Leone. *Theory Into Practice, 44*(4), 355-362.

Britto, P. R., Gordon, I., Hodges, W., Sunar, D., Kagitcibasi, C., & Leckman, J. F. (2014). Ecology of peace. In L. F. Leckman, C. Panter-Brick & R. Salah (Eds.), *Pathways to peace: The transformative power of children and families* (pp. 27-39). Cambridge, Massachusetts: MIT Press.

Britto, P. R., Salah, R., Abu-Nimer, M., Bhabha, J., Chowdhury, A. K., Gunderson, G. R., … Smyth, G. (2014). Creating effective programs and policies to reduce violence and promote peace. In L. F. Leckman, C. Panter-Brick, C., & R. Salah (Eds.), *Pathways to peace: The transformative power of children and families* (pp. 361-384). Cambridge, Massachusetts: MIT Press.

Bronfenbrenner, U. (1994). Ecological models of human development. In T. Husen & T. N. Postletwaite (Eds.), *International Encyclopedia of Education* (pp. 6963-6970). Oxford: Elserivier.

348

Bronfenbrenner, U. (1979). *The ecology of human development: Experiments by nature and design*. Cambridge, MA: Harvard University Press.

Bronfenbrenner, U. & Ceci, S. J. (1994). Nature-nurture reconceptualized in developmental perspective: A bioecological model. *Psychological Review, 101*(4), 568-586. doi: 10.1037/0033-295X.101.4.568.

Bronfenbrenner, U., & Morris, P. (1998). The ecology of developmental processes. In R. M. Lerner (Ed.), Theoretical models of human development (Vol. 1, 5th ed., pp. 993–1028). New York: Wiley.

Bruce, D. (2010). *Tackling armed violence: Key findings and recommendations of the study on the violent nature of crime in South Africa.* South Africa: The Centre for the Study of Violence and Reconciliation, Department of safety and Security.

Bulbulia, S. (1998). *An overview of three neighbourhood's initiative in Rusthof and Nomzamo, Strand, Western Cape.* Tygerberg: UNISA-Medical Research Council. Unpublished manuscript.

Bulhan, H. A. (1985). Frantz Fanon and the Psychology of Oppression. Boston, MA: Boston University Press.

Burr, V. (2003). Social constructionism (2nd ed.). Hove, East Sussex: Routledge.

Butchart, A., & Emmett, A. B. (2000). Crime, violence and public health. In A. B Emmett & A. Butchart (Eds), Behind the mask: Getting to grips with crime and violence in South Africa (pp. 3-28). Pretoria: Human Sciences Research Council. 3-28.

Butchart, A., Garcia-Moreno, C., & Mikton, C. (2010). Preventing intimate *partner and sexual violence against women: Taking action and generating evidence. Geneva:* World Health Organization/London School of Hygiene and Tropical Medicine. Retrieved from http://www.who.int/violence_injury_prevention/publications /violence/9789241564007_eng.pdf

Butchart, A., & Kruger, J. (2001). Public health and community psychology: A case study in communitybased injury prevention. In M. Seedat, N. Duncan, & S. Lazarus (Eds.), *Community psychology: Theory, method and practice: South African and other perspectives* (pp. 215–241). Cape Town, South Africa: Oxford University Press.

Butchart, A., Phinney, A., Check, P., &Villaveces, A. (2004). *Preventing violence: A guide to implememting the recommendations of the world report on violence and health.*Geneva, Switzerland: Department of Injuries and Violence Prevention, World Health Organization. Retrieved from http://whqlibdoc.who.int/publications/2004/9241592079.pdf

Bynner, J. (2006). *The Sage dictionary of social research methods*. Retrieved from
    http://srmo.sagepub.com/view/the-sage-dictionary-of-social-research-
    methods/n111.xml

Byczek, S. (2012). *Women's use of violence: An Ecological Systems Model*. (Unpublished master's
    thesis). Indiahana State University.

Campilan, D. (2000). Participatory Evaluation of Participatory *Research*. Forum on Evaluation of
    International Cooperation Projects: Centering on Development of Human Resources
    in the Field of Agriculture. Nagoya, Japan, International Potato Center.
    http://ir.nul.nagoya-u.ac.jp/jspui/bitstream/2237/8890/1/39-56.pdf

Canham, S. L. (2009). The interaction of masculinity and control and its impact on the
    experience of suffering for older men. *Journal of Aging Studies, 23,* 90-96.

Canetto, S. S. (1992). Gender and suicide in the elderly. In A. A. Leenaars, R. Maris, J. L.
    Mcintosh & J. Richman (Eds.), *Suicide and the older adult* (pp. 80-97). New York,
    NY: The Guilford Press.

Carlson, B. (2005). The most important things learned about violence and trauma in the past
    20 years. *Journal of Interpersonal Violence, 20,* 119-126. doi:
    10.1177/0886260504268603

Carmona, R. H. (2003, August 6). *Family violence as a Public Health Issue.* Symposium on
    Family Violence: The impact of child, Intimate Partner, and Elder Abuse. Retrieved
    from http://www.surgeon general.gov//news/speeches/violence08062003.html

Cassino, D. (2007). Changing the subject: Abortion and symbolic masculinities among young
    evangelicals. *Journal of Men, Masculinities and Spirituality, 1*(3), 201-214.

Centers for Disease Control (CDC). (2012). *Putting knowledge into action to prevent
    violence*. Atlanta, Georgia: CDC, Division of Violence Prevention. Retrieved from
    www.cdc.gov/ViolencePrevention/pdf/ASAP_Suicide_Issue1-a.pdf

Centre for Reviews and Dissemination. (2008). *Systematic reviews: CRD's guidance for
    understanding reviews in health care.* York: University of York.

Centre for the Study of Violence and Reconciliation (CSVR). (2008). *The Violent
    Nature of Crime in South Africa*. Retrieved from www.csvr.org.za

Cervantes, J. M., & Englar-Carlson, M. (2008). Surviving in a sea with few life-boats. In M.
    S. Kiselica, M. Englar-Carlson & A. M. Horne (Eds.). *Counseling troubled boys: A
    guidebook for professionals* (pp.69-96). New York: Routledge.

Chaskin, R. J., Brown, P., Venkatesh, S., & Vidal, A. (2001). *Building community capacity.*
    New York, NY: Aldine De Gruyter.

Chenail, R. J. (1995). Recursive Frame Analysis. *The Qualitative Report, 2*(2), Retrieved from http://www.nova.edu/ssss/QR/QR2-2/rfa.html

Christie, D. J., Panter-Brick, C., Behrman, J., Cochrane, J. R., Dawes, A., Goth, K., Hayden, J., … Tomlinson, M. (2014). Healthy human development as a path to peace. In L. F. Leckman, C. Panter-Brick & R. Salah (Eds.), *Pathways to peace: The transformative power of children and families* (pp. 273-302). Cambridge, Massachusetts: MIT Press.

Cissner, A. B. (2009). *Evaluating the Mentors in Violence Prevention Program: Preventing Gender Violence on a College Campus.* Retrieved from http://www.courtinnovation.org/sites/default/files/MVP_evaluation.pdf

Clarke, V., & Braun, V. (2013). Teaching thematic analysis: Overcoming challenges and developing strategies for effective learning. *The Psychologist, 26*(2), 120-123.

Clowes, L., Lazarus, S., & Ratele, K. (2010). Risk and protective factors to male interpersonal violence: Views of some male university students. *African Safety Promotion Journal, 8*(1), 1-18.

Cochrane, J. R. (2006). Religion in health of migrant communities: Asset or deficit? *Journal of Migration and Ethnic Studies, 32*(4), 715-736.

Cochrane, J. R., Seedat, M., Lazarus, S., Suffla, S., Taliep, N., & Shochet, I. (2015). Conceptualising religious assets, spiritual capacity, masculinity and violence in the pursuit of peace and safety: Position paper. SCRATCHMAPS Conceptual Working Group, Violence Injury and Peace Research Unit (MRC/UNISA) and International Religious Health Assets Programme (IRHAP) UCT, Cape Town.

Cohen, D. & Crabtree, B. (2006). *Qualitative Research Guidelines Project.* Retrieved from http://www.qualres.org/HomeCrit-3518.html

Colton, S., & Hatcher, T. (2004, March). *The web-based Delphi research technique as a method for content validation in HRD and adult education research.* Paper presented at the Academy of Human Resource Development International Conference (AHRD), Austin.

Colvin, C., & Peacock, D. (2009). *Summary of Research Findings on Sonke Gender Justice Network's "One Man Can" Campaign.* Retrieved from http://iwhc.org/wp-content/uploads/2009/11/OMC-Impact-Evaluation-Press-Release.pdf

Connell, R. W. (1987). *Gender and power: society, the person and sexual politics.* Stanford, CA: Stanford University Press.

Connell, R.W. (1995). *Masculinities*. Los Angeles, LA: University of California Press.

Connell, R.W. (2005). Change among the gatekeepers: Men, masculinities, and gender equality in the global arena. *Signs: Journal of Women in Culture and Society, 30*(3), 1801-1825.

Connell, R. W., & Messerschmidt, J. W. (2005). Hegemonic masculinity rethinking the concept. *Gender Society, 19,* 829-859. doi: 10.1177/0891243205278639

Corburn, J. (2005). *Street Science: Community Knowledge and Environmental Health Justice.* Massachusetts, MA: MIT Press.

Courtenay, W. (2000). Constructions of masculinity and their influence on men's well-being: A theory of gender and health. *Social Science & Medicine*, *50*, 1385-1401.

Craig, P., Dieppe, P., Macintyre, S., Michie, S., Nazareth, I., & Petticrew, M. (2013). Developing and evaluating complex interventions: The new Medical Research Council guidance. *British Medical Journal, 337, 979-983*.

Crawford, D. (2003). Becoming a man—The views of second generation Australian males. *Electronic Journal of Sociology.* Retrieved from http://www.sociology.org/content/vol7.3/02-crawford.html.

Creswell, J. W. (2007). *Qualitative inquiry and research design: Choosing among five traditions* (2nd ed.). Thousand Oaks, CA: Sage Publications.

Cultural diversity. (n.d.). *Dictionary.com unabridged*. Retrieved from http://dictionary.reference.com/browse/cultural-diversity

Cunningham, A., Jaffe, P. G., Baker, L., Dick, T., Malla, S., Mazaheri, N., & Poisson, S. (1998). *Theory-derived explanations of male violence against female partners: Literature update and related implications for treatment and evaluation.* London Family Court Clinic: London.

Curry-Stevens, A. (2012). The End of the Honeymoon: CBPR, Positional Privilege and Working with Community Coalitions. *American International Journal of Contemporary Research, 2* (7), 92-101.

Cutts, T., Olivier, J., Lazarus, S., Taliep, N., Cochrane, J. R., Seedat, M., … Carelse, H. (2015). Community asset mapping for violence prevention: A comparison of views in Western Cape, South Africa and Memphis, USA. *African Safety Promotion Journal* (submitted).

Dahlberg, L. L. (1998). Youth violence in the United States: Major trends, risk factors, and prevention approaches. *American Journal of Preventive Medicine, 14(4),* 259-272.

Dahlberg, L. L., & Krug, E. G. (2002). Violence: A global public health problem. In E. G. Krug, L. L. Dahlberg, J. A. Mercy, A. B. Zwi & R. Lozano (Eds.). *World report on violence and health* (pp. 1-21). Geneva: World Health Organisation.

Dale, R. (2004). *Evaluating development programmes and projects*. New Delhi: Sage Publications.

D'Alonzo, K. T. (2010). Getting started in CBPR: Lessons in building community partnerships for new researchers.*Nursing Inquiry, 7*(4),282-288.

Darling, N. (2007). Ecological Systems Theory: The Person in the center of the circles. *Research in Human Development, 4*(3–4), 203–217.

Darnton, A. (2008). *Reference report*: *An overview of behavioural change models and their uses*. London: Government Social Research (GSR) Behaviour Change Knowledge Review.

Davies, P., & MacPherson, K. (2011). *Why is crime in South Africa so violent?* Oxford: Oxford Evidentia Limited.

Davis, R., Parks, L. F., & Cohen, L. (2006). *Sexual violence and the spectrum of prevention: Towards a community solution.* National Sexual Violence Resource Center. Retrieved from http://www.nsvrc.org/sites/default/files/Publications_NSVRC_Booklets_Sexual-Violence-and-the-Spectrum-of-Prevention_Towards-a-Community-Solution_0.pdf

DeGue, S., Valle, L. A., Holt, M. K., Massetti, G. M. Matjasko, J. L., Tharp, A. T. (2014). A systematic review of primary prevention strategies for sexual violence perpetration. *Aggression and Violent Behaviour, 19*(4), 346–362. doi:10.1016/j.avb.2014.05.004

Delport, C. S. L. (2005). Quantitative data collection methods. In A.S. de Vos, H. Strydom, C. B. Fouché & C. S. L. Delport (Eds.), *Research at grass roots: For the social sciences and human service professions* (3rd ed., pp. 350-354). Pretoria: Van Schaick.

Delport, C. S. L., & Fouché, C. B. (2005). The qualitative research report. In A.S. de Vos, H. Strydom, C. B. Fouché & C. S. L. Delport (Eds.), *Research at grass roots: For the social sciences and human service professions* (3rd ed., pp. 350-354). Pretoria: Van Schaick.

Der-lan Yeh, T. (2006). The way to peace: A Buddhist perspective. *International Journal of Peace Studies, 11*(1), 91-112.

Demetriou, D. (2001). Connell's concept of hegemonic masculinity: A critique. *Theory Society, 30,* 337-361.

Denzin, N. K. (1970). *The research act in sociology*. Chicago: Aldine.

Denzin, N., & Lincoln, Y. (Eds.) (1994). *Handbook of qualitative research* (pp. 1-17). Thousand Oaks, CA: Sage

Department of Correctional Services. (2011/2012). *Incarceration levels in prison*. South Africa: Department of Correctional Services. Retrieved from http//www.dcs.gov.za/webstatistics/

Deshler, D. (1997). *Evaluating extension programmes*. FAO Corporate document repository. Retrieved from http://www.fao.org/docrep/W5830E/w5830e0d.htm

Development Action Group. (1997). *Homes for all: A Development Action Group case study of the housing programme in Cassablanca and Erijaville.* South Africa: Development Action Group.

De Vos, A. S. (2005). Combined quantitative and qualitative approach. In A.S. de Vos, H. Strydom, C. B. Fouché & C. S. L. Delport (Eds.), *Research at grass roots: For the social sciences and human service professions* (3rd ed., pp. 357-366). Pretoria: Van Schaick.

De Vos, A. S., Strydom, H., Fouché, C. B., & Delport, C. S. L. (2005). *Research at grass roots: For the social sciences and human service professions* (3rd ed.). Pretoria: Van Schaick.

Dodson, B., & Oelofse, C. (2000). Shades of xenophobia: In-migrants and immigrants in Mizamoyethu, Cape Town, *Canadian Journal of African Studies, 34*(1), 125-148.

Dolan, C. (2002). Collapsing masculinities and weak states: A case study of northern Uganda. In F. Cleaver (Ed.). *Masculinities matter! Men, gender and development.* (pp. 57-83). London: ZED Books.

Dolley, C. (2006, April 10). Hanover Park march against gangster violence. *IOL News*. Retrieved from http://www.iol.co.za/news/south-africa/hanover-park-march-against-gangster-violence-1.273509#.Vj4rQbcrIgs

Donson, H. (Ed.). (2008). *A profile of fatal injuries in South Africa, 2007.* Tygerberg: Medical Research Council-University of South Africa Violence and Injury Lead Programme.

DuBois, D. L., & Karcher, M. A. (Eds.). (2005). *Handbook of youth mentoring.* Thousand Oaks, CA: Sage.

Durrheim, K. (1999). Research design. In M. Terre Blanche & K. Durrheim (Eds.), *Research in Practice* (pp. 29-53). Cape Town: University of Cape Town Press.

Eisinger, A. & Senturia, K. (2001). Doing community-driven research: A description of Seattle Partners for healthy communities. *Journal of Urban Health: Bulletin of the New York Academy of Medicine, 78*(3), 519-534.

Eksteen, R., Bulbulia, A., Van Niekerk, A., Ismail, G., & Lekoba, R. (2012). Ukuphepha: A multi-level community engagement model for the promotion of safety, peace and health. *Journal of Psychology in Africa, 22*(4), 499-510.

Elmusharaf, K. (2012, July). *Qualitative sampling techniques.* Paper presented at the Training Course in Sexual and Reproductive Health Research, Geneva. Retrieved from http://www.gfmer.ch/SRH-Course-2012/research-methodology/Qualitative-sampling-techniques-Elmusharaf-2012.htm

Engbretson, K. (2006). Identity, masculinity and spirituality: A study of Australian teenage boys. *Journal of Youth Studies, 9*(1), 91-110. doi: 10.1080/13676260500523663

Engender Health. (2015). *Promoting gender equity: Technical Publications and resources.* Retrieved from https://www.engenderhealth.org/pubs/gender/index.php

EPISCenter. (2013). *Big Brothers Big Sisters of America.* EPISCenter. Retrieved from http://www.episcenter.psu.edu/sites/default/files/ebp/Implementation%20Manual%20BBBS%20Sec7%20Aug2013%20TL-RLS.pdf

Erlandson, D. A., Harris, E. L., Skipper, B. L., & Allen, D. (1993). *Doing naturalistic inquirey: A guide to methods.* Newbury Park, CA: Sage Publications.

Eriksson, E. (2011). *Christian communities and prevention of HIV among youth in KwaZulu-Natal, South Africa.* PhD Dissertation presented at Uppsala University. (Uppsala ISBN 978-91-554-8113-1).

Esperanza. (2010). *Gangs 101: Understanding the Culture of Youth Violence.* Philadelphia, PA: Esperanza. Retrieved from http://gangs.umd.edu/Downloads/Prevention/Gangs%20101%20-%20Understanding%20the%20Culture%20of%20Youth%20Violence.pdf

Esplen, E. (2006). *Engaging men in gender equality: Positive strategies and approaches.* Brighton: Institute of development studies, University of Sussex.

Estévez, E., Jiménez, T., & Musitu, G. (2008). Violence and victimization at school in adolescence. In D. H. Molina (Ed.), *School psychology: 21st century issues and challenges* (pp. 79-115). New York: Nova Science Publishers. Retrieved from https://www.uv.es/lisis/estevez.htm

Everett-Penhale, B., & Ratele, K. (2015). Rethinking 'Traditional Masculinity' as constructed, multiple, and hegemonic masculinity. *South African Review of Sociology, 46*(2), 4-22.doi: 10.1080/21528586.2015.1025826

European Council of Religious Leaders – Religions for Peace (2009). *Lille Declaration on a Culture of Peace.* Retrieved from http://www.rfp-europe.eu/index.cfm?id=241899

Ezekiel, M. J., Kazaura, M. R., & Chitama, D. (2014). *The evaluation of engenderhealth/champion's Men as Partners (MAP) project*. Retrieved from http://pdf.usaid.gov/pdf_docs/PA00JZFD.pdf

Fabinyi, M., Evans, L., & Foale, S. J. (2014). Social ecological systems, social diversity and power: Insights from anthropology and political ecology. *Ecology & Society, 19*(4), 28. Retrieved from http://dx.doi.org.5751/ES-07029-190428

Fabrik, C. (2004). *Reviving a forgotten custom: An evaluation of a community based mentoring intervention-The Jamestown Usiko Youth Project.* (Unpublished master's thesis). Stellenbosch University.

Fagan, J., & Browne, A. (1994). Violence between spouses and intimates: Physical aggression between women and men in intimate relationships. In A. J. Reiss & J. A. Roth (Eds.), *Understanding and prevention violence* (pp.115-292). Washington: National Research Council.

Farr, V., Dawes, A., & Parker, Z. (2003). *Youth violence prevention and peace education programmes in South Africa: A preliminary investigation of programme design and evaluation practices.* Cape Town: Children's Institute, University of Cape Town.

Farrell, A. D., & Flannery, D. J. (2006). Youth violence prevention: Are we there yet? *Aggression and Violent Behavior, 11,* 138 - 150.

Farquhar, S. A., & Wing, S. (2008). Methodological and ethical considerations in community-driven environmental justice research. In M. Minkler & N. Wallerstein (Eds.), *Community-based participatory research for health: From process to outcomes* (pp. 263 -283). San Francisco, CA: Jossey-Bass.

Fields, S. A., & McNamara, J. R. (2003). The prevention of child and adolescent violence: A review. *Aggression and Violent behaviour, 8,* 61-91.

Finlay, L. (*2006).* Rigour, Ethical Integrity, or Artistry? Reflexively Reviewing Criteria for evaluating Qualitative Research. *British Journal of Occupational Therapy 69*(7):319-26.

Flannery, D. J., & Williams, L. (1999). Effective youth violence prevention. In T. P. Gullota & S. J. McElhaney (Eds.), *Violence in homes and communities: Prevention, intervention and treatment* (pp.207- 244). London: Sage Publications.

Flicker, S., Travers, R., Guta, A., McDonald, S.,& Meagher, A. (2008). Ethical review of community-based participatory research: Considerations for institutional review boards. In M. Minkler& N. Wallerstein, (Eds.), *Community-based participatory research for health: From process to outcomes* (pp. 435-440). San Francisco, CA: Jossey-Bass.

Flood, R. L. (2002). Between men and masculinity: An assessment of the term "masculinity"in recent scholarship on men. In S. Pearce & V. Muller (Eds.), *Manning the next millennium: Studies in masculinities* (pp. 203-13). Bentley, WA: Black Swan.

Flood, M. (2005). *Harmful traditional and cultural practices related to violence against women and successful strategies to eliminate such practices – working with men.* United Nations Economics and Social Commission for Asia and the pacific (ENESCAP). Retrieved from http://www.unescap.org/esid/gad/events/egm-vaw2007/discussion%20papers%20 and%20presentations/michael%20flood%20paper-pdf2007

Foot, J., & Hopkins, T. (2010). *A glass half-full: How an asset approach can improve community health and well-being.* Retrieved from http://www.local.gov.uk/c/document_library/get_file?uuid= fc927d14-e25d-4be7-920c-1add80bb1d4e&groupId=10171

Fortuin, R. (n.d.). *The Men and Boys fatherhood Programme*. Retrieved from http://interactions.eldis.org/profile/gender-transformation-network.

Fortuin, R. (2012, October). *The Men and Boys Fatherhood Programme.* In J. R. Cochrane (Chair), *Symposium on Violence Prevention Initiatives.* Symposium conducted at the meeting of Violence Injury Peace Research Unit (SAMRC/UNISA), Strand.

Fountain, S. (1999). Peace education in UNICEF. USA, New York: United Nations Children's Fund Programme Publications. Retrieved from http://www.minnusanju.com/sites/ default/files/peaceeducation_89_22.pdf

Foss, C., & Ellefsen, B. (2002). The value of combining qualitative and quantitative approaches in nursing research by means of method triangulation. *Journal of Advanced Nursing, 40*(2), 242-248.

Fouché, C. B., & de Vos, A. S. (2005). Problem formulation. In A. S. de Vos, H. Strydom, C. B. Fouché & C. S. L. Delport (Eds.), *Research at grass roots: For the social sciences and human service professions* (3rd ed., pp. 100-110). Pretoria: Van Schaick.

Fountain, S. (1999). Peace Education in UNICEF. New York, NY: UNICEF. Retrieved from http://www.unicef.org/education/files/PeaceEducation.pdf

Freire, P. (1982). *Education for critical consciousness.* Boston College course notes taken by M. Frankenstein. Retrieved from http://andromeda.rutgers.edu/~powellab/docs/proceedings/paulofriere_epis.pdf

Freire, P. (2000). *Pedagogy of the oppressed: 30th Anniversary edition.* New York, NY: Bloomsbury Academic.

Freudenberg, N. (2001). Case history of the Center for Urban Epidemiologic Studies in New York.*Journal of Urban Health: Bulletin of the New York Academy of Medicine, 78*(3), 508-518.

Friedman, B. D., & Allen, K. N. (2011). Systems theory. In J. Brandell (Ed.), *Theory and Practice of clinical social work* (pp. 3-18). New York, NY: The Free Press. Retrieved from http://www..sagepub.com/upm-data/32947-chapter1pdf

Fuller, T., Guy, D., & Pletsch, C. (2002). Asset Mapping:A handbook. Retrieved 18 September 2014, from http://www.rwmc.uoguelph.ca/cms/documents/11/Asset_Mapping1.pdf

Gale, N. K., Heath, G., Cameron, E., Rashid, S., & Redwood, S. (2013). Using the framework method for the analysis of qualitative data in multi-disciplinary health research. *BMC Medical Research Methodology, 13*(117). Gallagher, H. A. (2004). Vaughn elementary's innovative teacher evaluation system: Are teacher evaluation scores related to growth in student achievement? *Peabody Journal of Education, 79*(4), 79-107.

Galtung, J. (1969). Violence, peace, and peace research. *Journal of Peace Research, 6*(3),167-191.

Garbarino, J. (2007). *Lost boys: Why our sons turn to violence and how we can save them.* The International Child and Youth Care Network. Retrieved from http://www.cyc-net.org/cyc-online/cycol-0207-garbarino.html

Gcabo, R. (2007). Managing community mental health projects.In M. Visser (Ed.),*Contextualising community psychology in South Africa* (pp 149-164). Pretoria: Van Schail Publishers.

Gibbs, A., Jewkes, R., Sikweyiya, Y., & Willan, S. (2015). Reconstructing masculinity? A qualitative evaluation of the Stepping Stones and creating futures interventions in urban informal settlements in South Africa. *Culture, Health & Sexuality: An International Journal for Research Intervention and care, 17*(2), 208-222. doi: 10.1080/13691058.2014.966150

Given, L. M. (Ed.). (2008). *The Sage encyclopedia of qualitative research methods* (vol. 1 & 2). Thousand Oaks, CA: Sage Publications, Inc.

Glesne, C. (2006). *Becoming qualitative researchers: An introduction* (3rd ed.). Boston, MA: Pearson Education, Inc.

Golafshani, N. (2003). Understanding reliability and validity in qualitative research. *The Qualitative Report, 8*, 597-607. Retrieved from http://www.nova.edu/ssss/QR/QR8 4/golafshani.pdf

Goodman, A. (2012). Human ecology as peacebuilding. In L. Williams, R. A. Roberts, & A. McIntosh (Eds.), *Radical Human Ecology: Intercultural and Indigenous Approaches* (pp. 257-274). Surrey, England: Ashgate Publishing Ltd.

Grauerholz, L. (2000). An ecological approach to understanding sexual revictimization: Linking personal, interpersonal, and sociocultural factors and processes. *Child Maltreatment, 5*(1), 5-17.

Greeff, M. (2005). Information collection: Interviewing. In A.S. de Vos, H. Strydom, C. B. Fouché & C. S. L. Delport (Eds.), *Research at grass roots: For the social sciences and human service professions* (3rd ed., pp. 286-313). Pretoria: Van Schaick.

Greeff, A. P., & Loubser, K. (2008). Spirituality as a resiliency quality in Xhosa-speaking families in South Africa. *Journal of Religion and Health, 47*(3), 288-301. doi: 10.1007/s10943-007-9157-7

Green, L. W. (2006). Public health asks of systems science: To advance our evidence based practice, can you help us get more practice-based evidence? *American Journal of Public Health, 96*, 406 –9.

Greig, A. (2007). Reflections from the Boardof Editors. *Critical Half: Bi-Annual Journal of Women for Women International, 5*(1), 5.

Grossman, J. B., & Garry, E. M. (1997). *Mentoring: A proven delinquency prevention strategy.* Washington, DC: United States Department of Justice, Office of Justice Programs (Juvenile Justice Bulletin, No. NCJ 164386).

Grossman, J. B., Baldwin, J., & Tierney, J. (1998). Does mentoring work? An impact study of the Big Brothers Big Sisters Program. *Evaluation Review, 22*(3), 403-426.

Guba, E. G., & Lincoln, Y. S. (2005). Paradigmatic controversies, contradictions, and emerging confluences. In N. K. Denzin & Y. S. Lincoln (Eds.), *The Sage handbook of qualitative research* (3rded., pp. 1–32). Thousand Oaks, CA: Sage Publications.

Haen, C. (2011). Boys and therapy: The need for creative reformulation. In C. Haen (Ed.), *Engaging boys in treatment: Creative approaches to the therapy process* (pp. 3-40). New York, NY: Routledge.

Haenfler, R. (2004). Manhood in contradiction: The two faces of straight edge. *Men and Masculinity, 7,* 77-99. doi: 10-1177/1097184X03257522

Hamber, B., Masilela, T. C., & Terre Blanche, M. (2001). Towards a Marxist community psychology: Radical tools for community psychological analysis and practice. In M. Seedat, N. Duncan & S. Lazarus (Eds.), *Community psychology: Theory, method and practice* (pp. 51–66). Cape Town: Oxford University Press.

Hargreaves, J., Hatcher, A., Strange, V., Phetla, G., Busza, J., Kim, J., … Bonell, C. (2009). Process evaluation of the Intervention with Microfinance for AIDS and Gender Equity (IMAGE) in rural South Africa. *Health Education Research, 2.* doi:10.1093/her/cyp054

Härkönen, U. (2007, October). *The Bronfenbrenner ecological systems theory of human development.* Keynote address at International Conference Person Color Nature Music. Daugavpils University, Saule, Latvia.

Harpham, T., Grant, E., & Thomas, E. (2002). Measuring social capital within health surveys: Key issues. *Health Policy and Planning, 17*(1), 106-111.

Harris, J. M. (2000). *Basic Principles of Sustainable Development.* Global Development and Environment Institute. Retrieved from http://ase.tufts.edu/gdae

Harvey, A., Garcia-Moreno, C., & Butchard, A. (2007, May 2-3). *Primary prevention of intimate partner violence and sexual violence: background paper for WHO expert meeting.* Retrieved from http://www.who.int/violence_injury_prevention/publications/violence/IPV-SV

Hashagen, S. (2002). *Models of community engagement.* Edinburgh: Scottish Community Development Centre.

Hawe, P., Shiell, A., & Riley, T. (2009).Theorising interventions as events in systems. *American Journal of Community Psychology, 43*(3-4), 267–276.

Hawkins, J. D., Catalano, R. F., & Arthur, M. W. (2002). Promoting science-based prevention in communities. *Addictive Behaviors, 27,* 951–976. Retrieved from http://www.sciencedirect.com/science/article/pii/S0306460302002988

Hayes, G. (2004). Marxism and critical psychology. In D. Hook, N. Mkhize, P. Kiguwa, A. Collins, E. Burman & I. Parker (Eds), *Critical psychology* (pp. 162-186). Lansdowne: UCT Press.

Hayes, E., & Sherwood, K. (2000). *The Responsible Fatherhood curriculum: A curriculum developed for the Parents' Fair Share Demonstration.* Manpower Demonstration Research Corporation. Retrieved from https://www.fatherhood.gov/toolkit/activities/reflection-and-awareness

Hearn, J. (2004). From hegemonic masculinity to hegemony of men. *Feminist Theory, 5*(1), 49-72.

Hearts of Men. (n.d.). *Strengthening fatherhood through community mentoring.* [Broschure]. Strand, Western Cape: Author.

Heise, L. L. (1998). Violence against women: An integrated, ecological framework. *Violence Against Women, 4*(3), 262-290.

Heller, K., Price, R. H., Reinharz, S., Riger, S., Wandersman, A., & D'Aunno, T. A. (1984). *Psychology and community change*. Illinois: The Dorsey Press.

Hernandez, B., Hayes, E., Balcazar, F. E., & Keys, C. B. (2001).Responding to the needs of the underserved: A peer-mentor approach. *Spinal Cord Injury Psychosocial Process, 14*(3), 142- 149.

Higgins, D. L., & Metzler, M. (2001).Implementing community-based participatory research centers in diverse urban settings. *Journal of Urban Health: Bulletin of the New York Academy of Medicine, 78*(3), 488-494.

Hildebrand, D. (2010). *The role and usefulness of Behavior Change Theories and models in guiding obesity prevention efforts.* Retrieved from http://www.docstoc.com/docs/97347550/The-Role-and-Usefulness-of-Behavioral-Change-Models-in-Obesity-Prevention-Efforts

Hill, G., & Cooke, M. (2013). How Do You Build a Community? Developing Community Capacity and Social Capital in an Urban Aboriginal Setting. *A Journal of Aboriginal and Indigenous Community Health, 11*(3), 421-432.

Hines, J. M., Hungerford, H. R. & Tomera, A. N. (1987). Analysis and synthesis of research on responsible environmental behaviour: a meta-analysis. *Journal of Environmental Education, 18*(2), 1-8.

Hipple, A., & Duff, J. (2010). Leveraging congregational infrastructures for maximum impact on disease and poverty. *Crosscurrents, 368-382.*

Hirose, A., & Kei-ho Pih, K. (2010). Men who strike and men who submit: Hegemonic and marginalized masculinities in mixed martial arts. *Men and Masculinities, 13,* 190-209.

Hodkinson, P., & Hodkinson, H. (2001). *The strengths and limitations of case study research.* Paper presented at the Learning and Skills Development Agency conference, Making an Impact on Policy and Practice, Cambridge, University of Leeds. Retrieved from education.exeter.ac.uk/tlc/docs/publications/LE_PH_PUB_05.12.01.rtf

Holborn, L., & Eddy, G. (2011). *First steps to healing the South African family. Rischmond: South African Institute of Race Relations.* Retrieved from http://irr.org.za/reports-and-publications/occasional-reports/files/first-steps-to-healing-the-south-african-family-final-report-mar-2011.pdf

Holkup, P. A., Tripp-Reimer, T., Salois, E. M., & Weinert, C. (2004). Community-based participatory research: An approach to intervention research with a native American community. *Advances in Nursing Science, 27*, 162-175.

Hong, L. (2000). Toward a transformed approach to prevention: Breaking the link between masculinity and violence. *Journal of American College Health, 48,* 269-279.

Hook, D. (2004). Frantz Fanon and racial identity in post-colonial contexts. In K. Ratele, N. Duncan, D. Hook, N. Mkhize, P. Kiguwa & A. Collins (Eds.), Self, Community & Psychology (pp. 6.1-6.22). Lansdowne: UCT Press.

Horowitz, C. R., Robinson, M., & Seifer, S. (2009). Community-based participatory research from the margin to the mainstream: Are researchers prepared? *Circulation 119,* 2633-2642. doi: 10.1161/CIRCULATIONAHA.107.729863

Hurst, D. (2002, February18-22). *Transculural masculinities: Engagement of men in domestic violence prevention – key issues.* Paper presented at the Expanding Our Horizons Conference, Sydney, Australia

Idaho Incident Reporting System. (2010). *The relationship between substance abuse and crime in Idaho: Estimating the need for treatment alternatives.* Retrieved from https://www.isp.idaho.gov/pgr/Research/documents/drugsandcrime.pdf

Imenda, S. (2014). Is there a conceptual difference between theoretical and conceptual frameworks. *Journal of Social Science, 38*(2), 185-195.

Institute for Health Metrics and Evaluation. (2013). *Global burden of disease profile: South Africa*. Retrieved from http://www.heathdata.org/stes/default/files/files/countryprofiles/ GBD/ihme gbd country report south africa.pdf

Israel, B. A., Eng, E., Schulz, J. A., Parker, E. A. (2005). *Methods in community-based participatory research for health.* San Francisco, CA: Jossey-Bass.

Israel, B. A., Krieger, J., Vlahov, D., Ciske, S., Foley, M., Fortin, P., … Tang, G. (2006). The New York Academy of Medicine Challenges and facilitating factors in sustaining community-based participatory research partnerships: Lessons learned from the Detroit, New York City and Seattle Urban Research Centers, *Journal of Urban Health: Bulletin of the New York Academy of Medicine, 83*(6), doi:10.1007/s11524-006-9110-1

Israel, B. A., Lichtenstein, R., Lantz, P., McGranaghan, R., Allem, A., Guzman, J. R. (2001). The Detroit community-academic urban research center: Development, implementation and evaluation. *Journal of Public Health Management and Practice, 7*(5), 1-5.

Israel, B. A., Lichtenstein, R., Lantz, P., McGranaghan, A., & Guzman, J. R. (2001). The Detroit community-academic urban resource center: Development, implementation and evaluation. *Journal of Public Health Management and Practice, 7*(5), 1-5.

Israel, B. A., Parker, E. A., Rowe, Z., Salvatore, A., Minkler, M., López, J., … Halstead, S. (2005). Community-based Participatory Research: Lessons learned from the Centers for Children's Environmental Health and Disease Prevention Research. *Environmental Health Perspectives*, *113*(10), 1463–1471.

Israel, B. A., Schulz, A. J., Estrada-Martinez, L., Zenk, S.N., Viruell-Fuentes, E., Villarruel, A. M., & Stokes, C. (2006).Engaging urban residents in assessing neighbourhood environments and their implications for health. *Journal of Urban Health, 83*(3)*,* 523-539.

Israel, B. A., Schulz, A. J., Parker, E. A., & Becker, A. B. (1998). Review of community-based research: Assessing partnership approaches to improve public health. *Annual Review of Public Health, 19,* 173-202.

Israel, B. A., Schulz, A. J., Parker, E. A., & Becker, A. B. (2001). Community-based participatory research: Policy recommendations for promoting a partnership approach in health research. *Education and Health (Abingdon), 14*(2), 182–197.

Israel, B. A., Schulz, A. J., Parker, E. A., Becker, A. B., Allen, A. J., & Guzman, R. (2003). Critical issues in developing and following community based participatory research principles. In M. Minkler& N. Wallerstein (Eds.), *Community based participatory research for health* (1st ed., pp. 53-76). San Francisco: Jossey-Bass.

Israel, B. A., Schulz, A. J., Parker, E. A., Becker, A. B., Allen III, A. J., & Guzman, R.

(2008). Critical issues in developing and following CBPR principles. In M. Minkler & N. Wallerstein (Eds.), *Community Based Participatory Research for health: From process to outcomes* (2nd ed., pp. 47-66). San Francisco, CA: John Wiley & Sons Publishers.

Jefthas, D., & Artz, L. (2007). Youth violence: A gendered perspective. In P. Burton (Ed.), *Someone stole my smile: An exploration into the causes of youth violence in South Africa* (pp. 37-56). Cape Town: Centre For Justice And Crime Prevention.

Jepson, R. G., Harris, F. M., Platt, S., & Tannahill, C. (2010). The effectiveness of interventions to change six health behaviours: A review of reviews. *Bio Medical Central, 10,* 538. doi: 10.1186/1471-2458-10-538

Jewkes, R., Flood, M., & Lang, J. (2015). From work with men and boys to changes of social norms and reduction of inequities in gender relations: A conceptual shift in prevention of violence against women and girls. *The lancet, 385,* 1580-89. doi: 10.1016/50140-6736(14)61683-4

Jewkes, R., Nduna, M., & Jama, P. N. (2002). *Stepping Stones, South African Adaptation* (2nd ed.). Pretoria, South Africa: Medical Research Council.

Jewkes, R., Nduna, M., Levin, J., Jama, N., Dunkle, K. (2007). Evaluation of Stepping Stones: A gender transformative HIV prevention intervention. Pretoria, Medical Research Council.

Jewkes, R., Nduna, M., Levin, J., Jama, N., Dunkle, K., Khuzwayo, N. … Duvvury, N. (2006). A cluster randomised controlled trial to determine the effectiveness of Stepping Stones in preventing HIV infections and promoting safer sexual behaviour amongst youth in the rural Eastern Cape, South Africa: trial design, methods and baseline findings. *Tropical Medicine and International Health*, *11*, 3-16.

Jewkes, R., Nduna, M., Levin, J., Jama, N., Dunkle, K., Puren, A., & Duvvury, N. (2008). Impact of stepping stones on incidence of HIV and HSV-2 and sexual behaviour in rural South Africa: A cluster randomized controlled trial. *British Medical Journal, 337,* 1074-1084. http://dx.doi.org/10.1093/her/cyq062

Jewkes, R., Sikweyiya, Y., Morrell, R., & Dunkle, K. (2011). Gender inequitable masculinity and sexual entitlement in rape perpetration South Africa: Findings of a cross-sectional study. *PLoS ONE, 6*(12): e29590. doi:10.1371/journal.pone.0029590

Jewkes, R., Wood, K., & Duvvury, N. (2010). I woke up after I joined Stepping Stones: Meanings of an HIV behavioural intervention in rural South African young people's lives. *Health Education Research, 25*(6), 1074-1084. doi: 10.1093/her/cyq062

Kanjee, A. (1999). Survey methods in market and media research. In M. Terre Blanche & K. Durrheim (Eds.), *Research in Practice* (pp. 287-306). Cape Town: University of Cape Town Press.

Kanji, N., & Greenwood, L. (2001). *Participatory approaches to research and development in IIED: Learning from experience.* London: International Institute for Environment and Development (IIED).

Katz, J. (1995). Reconstructing masculinity in the locker room: The mentors in violence prevention project. *Harvard Educational Review, 65*(2), 163–174.

Katz, J. (n. d.). Mentors in violence prevention. Retrieved from http://www.jacksonkatz.com/aboutmvp.html

Kenway, J., & Fitzclarence, L. (1997). Masculinity, violence and schooling: Challenging 'poisonous pedagogies'. *Gender and Education, 9*(1), (69-88).

Kerns, S. E., Prinz, R. J. (2002). Critical issues in the prevention of violence-related behavior in youth. *Clinical Child and Family Psychology Review*, *5*(2),133–160.

Kim, J., Gear, J., Hargreaves, J., Makhubela, B. B., Mashaba, K., Morison, L., … Watts, C. (2002). *Social interventions for HIV/AIDS intervention with microfinance for AIDS and gender equity: IMAGE study.* Retrieved from http://www.aidsportal.org/atomicDocuments/AIDSPortalDocuments/Intervention_monograph_no_pics.pdf.pdf

Kim, A., & Pyke, K. (2015). Taming tiger dads: Hegemonic American masculinity and South Korea's father school. *Gender & Society, 29*(4), 509-533. doi: 10.1177/0891242315584602

Kincheloe, J. L., & McLaren, P. (2005). Rethinking critical theory and qualitative research. In N. K. Denzin & Y. S. Lincoln (Eds.), *Handbook of qualitative research* (vol. 3, pp. 303-342). Thousand Oaks, CA: Sage.

Kirschenbaum, H. (1992). [Toward] a comprehensive model for values and moral education. *Phi Delta Kappan, 73,* 10, 771-776.

Kirschenbaum, H. (2000). From values clarification to character education: A personal journey. *Journal of Counseling, Humanistic Education and Development [ACA], 39*(1), 4-20.

Kirkpatrick, R. G., Katsiaficas, G. N., & Emery, M. l. (1978). *Critical theory and the limits of logical positivism.* Red Feather Institute for advanced studies of sociology. Retrieved from http://www.tryoung.com/archives/176krkpt.htm

Kiselica, M. S., & Englar-Carlson, M. (2010). Identifying, affirming, and building upon male strengths: The positive psychology/positive masculinity model of psychotherapy with boys and men. *Psychotherapy Theory, Research, Practice, Training, 47*(3), 276-287. doi: 10.1037/a0021159

Kiselica, M., Englar-Carlson, M., Horne, A., & Fisher, M. (2008). A positive psychology perspective on helping boys. In M. S. Kiselica, M. Englar-Carlson, & A. M. Horne (Eds.), *Counseling troubled boys: A guidebook for professionals* (pp. 31-48). New York: Routledge/Taylor & Francis Group.

Knizek, B. L., Kinyanda, E., Owens, V., & Hjelmeland, H. (2011). Ugandan men's perceptions of what causes and what prevents suicide. *Journal of Men, Masculinities and Spirituality, 5*(1), 4-21.

Knoetze, K. (2003). *Crossing the threshold: evaluation of a rites of passage programme in a peri-urban South African community.* (Unpublished master's thesis). Stellenbosch University.

Kolb, D. A., Boyatis, R. E., & Mainemelis, C. (2010). *Experiential learning theory: Previous research and new directions.* Retrieved from http://www.d.umn.edu/~kgilbert/educ5165-731/Readings/experiential-learning-theory.pdf

Kolb, A. Y., & Kolb D. A (2010). *Experiential learning theory: A dynamic, holistic approach to management learning, education and development.* Retrieved from http://learningfromexperience.com/media/2010/08/ELT-Hbk-MLED-LFE-website-2-10-08.pdf

Kralik, D. & van Loon, A. M. (2010). *Feminist research.* Retrieved from http://pdf.trading5.net/Chapter-4-Feminist-Research---Elsevier-Health-Sciences-Medical-download-w3321.html

Kramer, S., Amos, T., Lazarus, S., & Seedat, M. (2012). The philosophical assumptions, utility and challenges of asset mapping approaches to community engagement. *Journal of Psychology in Africa, 22*(4), 537–546.

Kramer, S., Seedat, M., Lazarus, S. & Suffla, S. (2011). A critical review of instruments assessing characteristics of community. *South African Journal of Psychology, 41*(4), 503-516.

Kretzman, J. P., & McKnight, J. L. (1993).*Building communities from inside out: A path toward finding and mobilising community assets.* Chicago, IL: ACTA Publications.

Kretzmann, J. P., & McKnight, J. L. (1997). A guide to capacity inventories: Mobilizing the

community skills of local residents. Retrieved from
www.abcdinstitute.org/docs/CapacityInventories(1).pdf

Krieger, N. (2004). *Positive masculine profiles.* Retrieved from <u>http://test2.lutheranworld.org/</u>
What_We_Do/DMD/DMD-Documents/EN/DMD-Positive_Masculine_Profiles.pdf

Krienert, J. L. (2003). Masculinity and crime: A quantitative exploration of Messerschmidt's
hypothesis. *The Electronic Journal of Sociology, 7*(2).

Krueger, R. A. (2010). Using stories in evaluation. In J. S. Wholey, H. P. Hatry, K.
E.Newcomer (Eds.), *Handbook of practical program evaluation* (3ʳᵈ ed., pp. 404 –
423). United States of America, San Francisco: A Wiley Imprint. Retrieved from
http://www.themedfomscu.org/media/Handbook_of_Practical_Program_Evaluation.p
df

Krug, E., Dahlberg, L. L., Mercy, J. A., Zwi, A. B., & Lozano, R. (2002). *World Report on
violence and health.* Geneva: World Health Organisation Retrieved from
http://www.who.int/violence_injury_prevention/violence/world_report/en/full_en.pdf

Laerd Dissertation. (2012). *Non-probability sampling.* Lund Research Ltd. Retrieved from
http://dissertation.laerd.com/non-probability-sampling.php

Laher, H. (2008). *Religion and violence: Review of the literature.* Pretoria: UNISA Institute
for Social and Health Science.

LaPelle, N. R. (2004). Simplifying Qualitative Data Analysis Using General Purpose
Software Tools. *Preventive and Behavioral Medicine Publications and Presentations*.
Paper 84. Retrieved from http://escholarship.umassmed.edu/prevbeh_pp/84

Lazarus, S. (2006). Indigenous approaches to health promotion: Challenges for education
support in South Africa. *South African Journal of Psychology, 36*(3), 521–546.

Lazarus, S. (2007). Assumptions and values of community psychology. In N. Duncan, B.
Bowman, A. Naidoo, J. Pillay, & V. Roos (Eds.), *Community psychology: Analysis,
context and action* (pp. 67–83). Cape Town: UCT Press.

Lazarus,S. (2011). Creating the melting pot: Some thought on the curriculum as a vehicle for
integrating diverse knowledges. *Proceedings of the Third International Conference on
Science and Indigenous Knowledge Systems* (pp. 22–31), Cape Town: University of
the Western Cape.

Lazarus, S., Bulbulia, S., & Seedat, M. (2013, March). *What really matters: Addressing
challenges in community engaged research, drawing on lessons from
SCRATCHMAPS*. Paper presented at University of South Africa's Research and
Innovation Week, Pretoria, South Africa.

Lazarus, S., Bulbulia, S., Taliep, N., & Naidoo, T. (2015). Community-based participatory research as a critical enactment of community psychology. *Journal of Community Psychology, 4*(1). 87-98. doi: 10.1002/jcop.21689

Lazarus, S., Cochrane, J. R., Taliep, N., Simmons, C., & Seedat, M. (2015, July). *Identifying and Mobilising factors that promote community peace.* Paper presented at the 14th International Symposium on the contributions of psychology to peace. Johannesburgh.

Lazarus, S., Duran, B., Caldwell, L., & Bulbulia, S. (2012). Public health research and action: Reflections on challenges and possibilities of Community-Based Participatory Research. In J. Maddock (Ed.), *Public Health – Social and Behavioral Health* (pp. 309-324). Retrieved from www.intechweb.org

Lazarus, S., Naidoo, A.V., May, B., Williams, L. L., Demas, G., & Filander, F. J. (2014). Lessons learnt from a Community-Based Participatory Research Project in a South African rural context. *South African Journal of Psychology, 44*(2), 147-159. (Online: SAGE).

Lazarus, S., Ratele, K., Seedat, M., Suffla, S., & Paulse, J. (2009, September). *Colonisation, apartheid and historical trauma: risks for male violence in South Africa?* Paper presented at Community Dialogue hosted by the Trauma Centre for Survivors of Violence and Torture, Cape Town.

Lazarus, S., Seedat, M., & Naidoo, T. (2009). *Mobilizing religious health assets to build safe communities.* Paper presented at ARHAP Conference Cape Town, 13-16 July 2009.

Lazarus, S., Seedat, M., & Naidoo, A.V. (In press). Community Building: Challenges of constructing community. In M.A. Bond, C.B. Keys, I. Serrano-García, B. Shinn (Eds). APA Handbook of Community Psychology. (commissioned, Chapter 22 in Section IV: Methods of Community Change). USA: APA.

Lazarus, S., Taliep, N., Bulbulia, S., Phillips, S., & Seedat, M. (2012). Community-based participatory research: An illustrative case of community engagement in one low income community. *Journal of Psychology in Africa, 22*(4), 511–519.

Lazarus, S., Taliep, N., Olivier, J., Cochrane, J., Seedat, M. Cutts, T., … Gunderson, G. (2014). *SCRATCHMAPS Community Asset Mapping Research Report: Report on community asset mapping conducted in Erijaville during 2012.* Tygerberg: Violence, Injury and Peace Research Unit (MRC/UNISA).

Lazarus, S., Taliep, N., & Naidoo, A. V. (2015). Critical reflections on community asset mapping as a community-engaged research methodology. In M. Seedat & S. Suffla (eds), Community, Liberation and Public Engagement (Submitted).

Lazarus, S., Tonsing, S., Ratele, K. & Van Niekerk, A. (2009). *Report on exploratory study into the theoretical and methodological frameworks for investigating risk and protective factors to male interpersonal violence*. Tygerberg: Medical Research Council.

Lazarus, S., Tonsing, S., Ratele, K., & van Niekerk, A. (2011). Masculinity as a key risk and protective factor to male interpersonal violence: An exploratory and critical review. *African Safety Promotion Journal, 9*(1), 23-50.

Leischow, S. J., & Milstein, B. (2006). Systems thinking and modeling for public health practice. *American Journal Public Health*, *96*(3), 403–5.

Leckman, J. F., Panter-Brick, C., & Salah, R. (2014). Peace is a Lifelong Process. In J.

Leckman,C. Panter-Brick, & R, Salah (Eds.). *Pathways to peace: The transformative power of children and families Strüngmann Forum report* (vol.15, pp. 3-17). MIT Press. Retrieved from https://mitpress.mit.edu/index.php?q=books/pathways-peace

Lee, P., Krause, N., Goetchius, C., Argriesti, J. M., **&** Baker, R**.** (2008). Participatory Action Research with Room Cleaners in San Francisco and Las Vegas: From a Collaborative Study to the Bargaining Table. In M. Minkler & N. Wallerstein (Eds.), *Community Based Participatory Research: From Process to Outcomes*, (2nd ed., pp. 335-353). San Francisco, CA: Josey-Bass.

Leung, M. W., Yen, I. H., & Minkler, M. (2004). Community-based participatory research: A promising approach to increasing epidemiology's relevance in the 21st century. *International Journal of Epidemiology, 33,* 499-506. doi: 10.1093/ije/dyh010

Levant, R. (1992). Toward the reconstruction of masculinity. *Journal of Family Psychology, 5*(3-4), 379-402.

Lewin, K. (1935). *A dynamic theory of personality.* New York, NY: McGraw Hill.

Lewthwaite, B. (2011). Applications and Utility of Urie Bronfenbrenner's Bio-ecological Theory. Manitoba Education Research Network (MERN). Retrieved from http://www.mern.ca/monographs/Bio-Ecological.pdf

Lincoln,Y. S. & Guba, E. (1985) *Naturalistic Enquiry*. Beverly Hills, CA: Sage.

Lindegger, G. (1999). Research methods in clinical research. In M. Terre Blanche & K. Durrheim (Eds.), *Research in Practice* (pp. 251-268). Cape Town: University of Cape Town Press.

Linstone, H. A., & Turoff, M. (1975). Introduction. In H. A. Linstone, & M. Turoff (Eds.), *The Delphi method: Techniques and applications* (pp. 3-12). Reading, MA: Addison-Wesley Publishing Company.

Lipsey, M. W., & Cordray, D. S. (2000). Evaluation for social intervention. *Annual Review Psychology, 51,* 345-375.

Little, D. (2006). Religion, conflict and peace. Proceedings from symposium: *Rebuilding Nation Building*. Cleveland, Ohio: Case Western Reserve University School of Law.

Lonczak, H. S. V., Thomas, L. R., Donovan, D., Austin, L., Sigo, R. L. W., Lawrence, N., & the Suquamish Tribe. (2013). Navigating the tide together: Early collaboration between tribal and academic partners in a CBPR study. *Pimatisiwin: A Journal of Aboriginal and Indigenous Community Health, 11*(3), 395-409.

Longwood, W. M. (2006). Theological and ethical reflections on men and violence: Toward a new understanding of masculinity. *Theology & Sexuality, 13*(1), 47-62. doi: 10.1177/1355835806069784

Longwood, W. M., Muesse, M. W., & Skipper, W. (2004). Men, spirituality and the collegiate experience. *New Directions for Student Services, 107,* 87-95.

Maiese, M. (2005). Preventing interpersonal violence.In G. Burgess & H. Burgess (Eds.), *Beyond Intractability* (unpaginated). Colorado, CO: Conflict information consortium. Retrieved from http://www.beyondintractability.org/essay/preventing-interpersonal-violence

Mancini, J. A., & Marek, L. I. (2004). Sustaining Community-Based Programs for Families: Conceptualization and Measurement. Family Relations, 53, 339–347.

Mandour, T. M. (2010). Islam and religious freedom: Role of interfaith dialogue in promoting global peace. *Brigham Young University Law Review,* 885-893. Retrieved from www.aensiweb.com/old/jasr/jasr/2012/2920-2924.pdf

Marais, S., Naidoo, A., Donson, H., & Nortje, C. (2007). Strategic violence prevention partnerships in a peri-urban South African town: The case of the Jamestown community project. *African Safety Promotion Journal, 5*(1), 19-30.

Marek,L. I., & Mancini, J. A. (2007). *Sustaining Community-Based Programs: Relationships Between Sustainability Factors and Program Results.* Blacksburg, VA: Virginia Polytechnic Institute and State University. Retrieved from http://ag.arizona.edu/sfcs/cyfernet/evaluation/Sustaining_2007_cyfar_pp.pdf

Mathewson, S. H. (2009). *Man is the remedy of man: Constructions of masculinity and health related behaviours among young men in Dakar, Senegal.* London: Development

Studies Institute. Retrieved from
http://www2.lse.ac.uk/internationalDevelopment/pdf/WP91.pdf

Maton, K. I. (2008). Empowering community settings: Agents of individual development, community betterment, and positive social change. *American Journal of CommunityPsychology, 41*(1), 4-21.

Matzopoulos, R., Bowman, B., Mathews, S., & Myers, J. (2010). Applying upstream interventions for interpersonal violence prevention: An uphill struggle in low-to middle-income context. *Health Policy, 97,* 62-70.

Matzopoulos, R., & Myers, J. E. (2014). The Western Cape Government's new Integrated Provincial Violence Prevention Policy Framework: Success and challenges. *Agression and Violent Behavior,* 649-654. doi: 10.1016/javb.2014.09.009

Mayer, S. E. (2002). *Building community capacity: How different groups contribute.* Retrieved from http://www.effectivecommunities.com

Mayer, P. H. & Mayer, I. (1990). A dangerous age: From boy to young man in Red Xhosa youth organisations. In P. Spencer (Ed.), *Anthropology and the riddle of the sphinx* (pp. 35-44). New York: Routledge.

Maynus, L., White, S., Williams, L. & Wood, J. (no date). Feminist, Adaptive and Marxist critical theorists. Retrieved from http://jillwood.weebly.com/uploads/2/6/9/0/26906284/presentation_leadership_theory _merged_jill_leatha_lou_april_13_2014.pdf

McDonald, M. (2009, February 10). New research finds nearly three quarters of NH men are victims of sexual or physical violence. *University of New Hampshire Media Relations.* Retrieved from http://www.unh.edu/news/cj_nr/2009/feb/lw10vam.cfm

McKay, B., & McKay, K. (2014, February 24). *The 3 p's of manhood.* Art of Manliness [Blog post]. Retrieved from http://www.artofmanliness.com/2014/02/24/the-3-ps-of-manhood-protect/

McKnight, J. L., & Kretzmann, J. P. (1990). *Mapping community capacity*. Retrieved from http://www.abcdinstitute.org/docs/MappingCapacity.pdf

Men's Studies News. (2010, November 24). Churches promote new images of masculinity to stop violence against women. *PCTV Newsdesk.* Geneva, Switzerland. Retrieved from http://mensstudies.ord/?p=3094

Mercy, J. A., & Hammond, R. W. (1999). Combining action and analysis to prevent homicide: A public health perspective. In M. D. Smith & M. A. Zahn (Eds.), *Homicide: A sourcebook of social research* (pp. 274-94). Thousand Oaks, CA: Sage.

Mercy, J. A., Krug, E. G., Dahlberg, L. L., & Zwi, A. B. (2003). Violence and health: The United States in a global perspective. *American Journal of Public Health, 93*(2), 256-261.

Mercy, J. A., Rosenberg, M. L., Powell, C., Broome, C. V., & Roper, W. L. (1993). Public Health Policy for preventing violence. *Health Affairs, 12*(4), 7-29. Retrieved from http://content.healthaffairs.org/subscriptions/online.shtml

Mertens, D. M. (2005).*Research and evaluation in education and psychology: Integrating diversity with quantitative, qualitative, and mixed methods* (2nded.). California: Sage Publications.

Messerschmidt, J. W. (1993). *Masculinities and crime: Critique and reconceptualization of theory.* Lanham, MD: Rowman & Littlefield.

Meyer, C. H. (Ed.). (1983). *Clinical social work in the eco-systems perspective.* New York: Columbia University Press.

Minkler, M. (2000). Using Participatory Action Research to build Healthy Communities. *Public Health Reports, 115*(2-3), 191-7.

Minkler, M. (2004).Using participatory action research to build healthy communities .*International Journal of Epidemiology, 33,*191-506.

Minkler, M. (2005). Community-based research partnerships: Challenges and opportunities. *Journal of Urban Health: Bulletin of the New York Academy of Medicine, 82*(2, supplement 2). doi: 10.1093/jurban/jti034

Minkler, M., & Baden, A. C. (2008). Impacts of CBPR on academic researchers, research quality and methodology, and power relations. In M. Minkler & N. Wallerstein (Eds.), *Community based participatory research for health: From process to outcomes*(pp.47–66).San Francisco: Jossey-Bass.

Minkler, M., Glover-Blackwell, A., Thompson, M., & Tamir, H. (2003). Community-based participatory research: Implications for public health funding. *American Journal of Public Health, 93*(8), 1210-1213.

Minkler, M., Garcia, A. P., Rubin, V., Wallerstein, N. (2012).*Community-Based Participatory Research: a Strategy for building healthy communities and Promoting health through Policy change: A report to the California endowment.* Policylink. Retrieved from http://www.policylink.org

Minkler, M., & Hancock, T. (2003). Community-driven asset identification and issue selection. In M. Minkler & N. Wallerstein (Eds.), *Community based participatory*

research for health: From process to outcomes (pp.135–54).San Francisco: Jossey-Bass.

Minkler, M., & Hancock, T. (2008). Community-driven asset identification and issue selection. In M. Minkler & N. Wallerstein (Eds.), *Community-based participatory research for health: From process to outcomes* (2nd ed., pp. 153-169). San Francisco, CA: Jossey-Bass.

Minkler, M., & Wallerstein, N. (Eds.). (2003). *Community-based participatory research for health.* San Francisco, CA: Jossey-Bass.

Minkler, M., & Wallerstein, N. (Eds.). (2008). *Community-based participatory research for health: From process to outcomes* (2nd ed.). San Francisco, CA:Jossey-Bass.

Misago, J. P., Landau, L. B., & Monson, T. (2009). *Towards tolerance, law, and dignity: Addressing violence against foreign nationals in South Africa.* Arcadia: IOM, Regional Office for Southern Africa.

Mkhize, N. (2004). Psychology and African perspective. In K. Ratele, N. Duncan, D. Hook, N. Mkhize, P. Kiguwa & A. Collins (Eds.), *Self, Community and Psychology* (pp.24-52). Lansdowne: UCT Press.

Monday, J. L. (2002). *Building back better: Creating a sustainable community after disaster.* The National Hazards Informer. Retrieved from http://www.colorado.edu/hazards/publications/informer/infrmr3/informer3c.htm

Moore, C. (2008). The ecosystemic approach. In W. Meyer, C. Moore, & H. Viljoemn (Eds.), *Personology: From individual to ecosystem* (pp. 462-498). Johannesburg: Heinemann.

Moore, M. H. (1993). Perspective: Violence prevention, criminal justice or public health? *Health Affairs, 12*(4), 34-45. doi: 10.1377/h/thaff.12.4.34

Morgan, A., Boxall, H., Lindeman, K., & Anderson, J. (2011). *Effective crime prevention interventions for implementation by local governemt.* Canberra: Australian Institute of Criminology.

Morrell, R. (1998). Of boys and men: Masculinity and gender in Southern African studies. *Journal of Southern African Studies, 24*(4), 605-30.

Morrell, R. (2001). The times of change: Men and masculinity in South Africa. In R. Morrell (Ed.), *Changing men in Southern Africa* (pp. 3-37). Pietermartizburg: University of Natal Press.

Morrell, R. (2002). A calm after the storm? Beyond schooling as violence. *Educational Review, 54*(1), 37-46. doi:10.1080/00131910120110866

Morrell, R., & Jewkes, R. (2011). Carework and caring: A path to gender equitable practices among men in South Africa. *International Journal of Equity and Health, 10*(7), 1-11. Retrieved from http://www.equityhealthj.com/content/10/1/17

Morrell, R., & Richter, L. (2005). Introduction. In L. Richter & R. Morrel (Eds.), *Baba: Men and fatherhood in South Africa* (pp.1-11). Pretoria: HSRC Press.

Mosavel, M., Simon, C., Van Stade, D., Buchbinder, M. (2005). Community-based participatory research (CBPR) in South Africa: Engaging multiple constituents to shape the research question. *Social Science and Medicine, 61,* 2577-87.

Mtuzu, P.T. (2004). *Engaging men in men's violence prevention: Exploring the tensions, dilemmas and possibilities.* Australian Domestic & Family Violence Clearinghouse (Issue Paper 17, pp. 1-20). Australia: The University of New South Wales.

Munro, S., Lewin, S., Swart, T., & Volmink, J. (2007). A review of health behavior theories: How useful are these for developing interventions to promote long-term medication adherence for TB and HIV/AIDS? *BMC Public Health, 7.*

Murphy, R. (2007. *A metatheoretical framework for social work practice.* Retrieved from www.eric.ed.gov/ERICWebPortal/recordDetail?accno=EJ482922

MVP Strategies. (2015). *The critical importance of changing social norms.* Retrieved from http://www.mvpstrat.com/the-bystander-approach/

Nadu, K. (2005). *Participatory monitoring and evaluation field experiences.* Retrieved from http://www.sswm.info/sites/default/files/reference_attachments/Intercooperation%202005%20Participatory%20Monitoring%20And%20Evaluation.pdf

Naidoo, A. V. (2012, October). *The Usiko Youh Project.* In J. R. Cochrane (Chair), *Symposium on Violence Prevention Initiatives.* Symposium conducted at the meeting of Violence Injury Peace Research Unit (SAMRC/UNISA), Strand.

Naidoo, A. V., & van Wyk, S. B. (2003). Intervening in communities: Combining curative and preventive interventions. *Journal of Prevention and Intervention in the Community, 25*(1), 65-80.

Naidoo, A. V. & van Wyk, S. B. (2009). *Community Projects: Stellenbosch Usiko Youth Project.* Department of Psychology, University of Stellenbosch Retrieved from http://sun025.sun.ac.za/portal/page/portal/Arts/Departments/psychology/community/Stellenbosch%20Usiko%20Youth%20Project

Nation, M., Bess, K., Voight, A., Perkins, D. D., & Juarez, P. (2011). Levels of community engagement in youth violence prevention: The role of power in sustaining successful

university–community partnerships. *American Journal of Community Psychology, 48*, 89–96.

National Institute on Drug Abuse (NIDA). (2003). *Preventing drug use among children and adolescents: A research-based guide for parents, educators and community leaders* (2nd ed.). National Institute of Health. US Department of Health and Human Services. Retrieved from http://www.drugabuse.gov/sites/default/files/redbook_0.pdf

National Institute of Justice. (n. d.). *Big Brothers Big Sisters (BBBS) Community-Based Mentoring (CBM) program.* Retrieved from https://www.crimesolutions.gov/ProgramDetails.aspx?ID=112

Neef, A. (2003). Participatory approaches under scrutiny: Will they have a future? *Quarterly Journal of International Agriculture, 42*(4), 489-497.

Nell, V. (2001). Chapter 13: Community psychology and the problem of policing in countries in transition. In M. Seedat (Ed.), N. Duncan & S. Lazarus. (Cons. Eds.) *Theory, Method and Practice in Community Psychology. South African and other perspectives* (pp. 261-291). Johannesburg: Oxford University Press.

Netting, F., Kettner, P., & McMurtry, S. (2008). *Social work macro practice.* Boston, MA: Allyn & Bacon.

Newham, G. (2013, September 22). *The politics of crime statistics* [Blog post]. Retrieved from https://africacheck.org/2013/09/22/the-politics-of-crime-statistics-2/

New World Encyclopedia. (2013). *Paulo Freire.* Retrieved from http://www.newworldencyclopedia.org/entry/Paulo_Freire

Ngunjiri, E. (1998). Participatory methodologies: Double-edged swords. *Development in practice, 8*(4), 466-470.

Nigatu, T. (2009). Health research methods: A guide to quality health research. Germany, Saarbrücken: VDM Verlag.

Nisbett, S. (2013, September 18). *Ecological systems theory* [Blog post]. Retrieved from https://prezi.com/rvwgvdcc4jq2/ecological-systems-theory/

Norman, R., Matzopolous, R., Groenewald, P., & Bradshaw, D. (2007). The high burden of injuries in South Africa. *Bulletin of the World Health Organization, 85*(9), 649-732. Retrieved from http://www.who.int/bulletin/volumes/85/9/06-037184/en/

Norman, R., Schneider, M., Bradshaw, D., Jewkes, R., Abrahams, N., Matzopoulos, R., & Vos, T. (2010). Interpersonal violence: An important risk factor for disease and injury in South Africa. *Population Health Metrics*, *8*, 32. doi: 10.1186/1478-7954-8-32. Retrieved from http//www.ncbi.nlm.nih.gov/pmc/articles/pmc3009696/

Northern Illinois University. (n.d.). *Experiential learning.* Retrieved from
   http://www.niu.edu/facdev.

Nyden, P. (2003). Academic incentives for faculty participation in community-based
   participatory research. *Journal Gen Intern Med, 18*(7), 576-585. doi: 10.1046/j.1525-
   1497.2003.20350.x

Nzioka, C. (2001). Perspectives of adolescent boys on the risks of unwanted pregnancy and
   sexually transmitted infections: Kenya. *Reproductive Health Matters, 9,* 108-117.

O'Donoghue, A. M. (2009, May). *Defining Community in the International Legal
   Context.* Paper presented at the annual meeting of the the Law and Society
   Association, Grand Hyatt, Denver, Colorado. Retrieved from
   http://citation.allacademic.com/meta/p302563_index.html

Ogunniyi, M. B. (2011, October). Science and indigenous knowledge in the melting pot:
   Prospects and challenges. In M. B. Ogunniyi& S. K. Kwofie (Eds.), *Proceedings of
   the Third International Conference on the Integration of Science and Indigenous
   Knowledge Systems: The Melting Pot: Science and IKS* (pp. 2–21), University of the
   Western Cape.

Onah, G. I. (2011). *The meaning of peace in African traditional religion and culture*.
   Retrieved from http://www.afrikaworld.net/goddionah.htm

Ortlipp, M. (2008).Keeping and using reflective journals in the qualitative research process.
   The Qualitative Report, *13*(4), 695-705.

Øvretveit, J. (2002). *Health programmes and changes: A handbook for a user-focused
   approach.* Oxon, UK: Radcliffe Medical Press Ltd.

Palys, P. (2008). Purposive sampling. In L. M. Given (Ed.), *The Sage encyclopediaof
   qualitative research methods* (vol. 2, pp. 697-698). Thousand Oaks, CA: Sage.

Paquette, D., & Ryan, J. (2001). *Bronfenbrenner's Ecological Systems Theory.* Retrieved
   from File:///Cl/My%20Documents/My%/Bronfnebrenner%20webquest/index.htm

Parker, Z., Dawes, A., & Farr, V. (2004). Interpersonal youth violence prevention. In S.
   Suffla, A. van Niekerk & N. Duncan (Eds.), *Crime, Violence and Injury Prevention in
   South Africa: Developments and Challenges* (pp. 22–39). Tygerberg South Africa:
   MRC-UNISA Crime, Violence and Injury Lead Programme.

Parker , E. A., Israel, B. A., Williams, M., Brakefield-Caldwell, W., Lewis, T. C., Robins, T.
   … Keeler, G. (2003). Community action against asthma: Examining the partnership
   process of a community-based participatory research project. *Journal of General
   Internal Medicine, 18*, 558–67.

Patterson, A., Cromby, J., Brown, S. D., Gross, H., & Locke, A. (2011). 'It all boils down to respect doesn't it?': Enacting a sense of community in a deprived inner-city area. *Journal of Community & Applied Social Psychology, 21*(4), 342-357. doi: 10.1002/casp.1078

Patton, M. Q. (1997). *Utilization-focused evaluation* (3rd ed.). Thousand Oaks, CA: Sage Publications, Inc.

Peacock, D., & Levack, A. (2004). The Men as Partners Programme in South Africa: Reaching men to end gender-based violence and promote sexual and reproductive health. *International Journal of Men's Health, 3*(3), 173-188.

Peltzer, K. (1997). The role of religion in counseling victims of organized violence. *Journal of Transpersonal Psychology, 29*(1), 13-29.

Pembroke, N. (2008). Narratives of silence: Availability in a spirituality of fathering. *Journal of Men, Masculinities and Spirituality, 2*(2), 82-94.

Petersen, E. (2013, February 11). SA's religious leaders must address gender violence and abuse. *Cape Times*. Retrieved from http://www.saffi.org.za/media

Pleasants, R. K. (2007). Teaching young men in correctional education: Issues and interventions in male identitydevelopment. *Journal of Correctional Education, 58*(3), 249-261.

Poling, J. N. (1999). The men's movements: atoning for male violence. *Journal of Religion & Abuse, 1*(3), 49-67.

Popay, J. (2006). *Community engagement and community development and health improvement: A background paper for National Institute for Health and Clinical Excellence (NICE)*. Retrieved from antony.morgan@nice.org.uk.

Popenoe, D. (1996). *Life without father: Compelling new evidence that fatherhood and marriage are indispensable for the good of children and society*. New York: The Free Press.

Potter, C. (1999). Programme evaluation. In M. Terre Blanche & K. Durrheim (Eds.), *Research in Practice* (pp. 209-226). Cape Town: University of Cape Town Press.

Prevention Institute. (1999). *The Spectrum of Prevention: Developing a comprehensive approach to injury prevention*. Oakland, CA: Prevention Institute. Retrieved from http://www.preventioninstitute.org/component/jlibrary/article/id-105/127.html

Radebe, B. (2007). Prevention and empowerment. In M. Visser (Ed.), *Contextualising*

community psychology in South Africa (pp. 134 – 148). Pretoria: Van Schaik Publishers.

Rahman, M. A. (1991). Glimpses of the 'other Africa'. In O. Fals-Borda & M. A. Rahman (Eds.), Action and Knowledge: Breaking the monopoly with participatory action-research (pp. 85-107). New York, NY: Intermediate Technology.

Railton CAP Research Team. (2011). *Conducting a community assessment: A practical community handbook.* Stellenbosch: Stellenbosch University.

Rasmus, S. M. (2014). Indigenizing CBPR: Evaluation of a community-based and participatory research process implementation of the ElluamTungiinun (Towards Wellness) Program in Alaska. *American Journal of Community Psychology, 54*(0), 170–179. doi:10.1007/s10464-014-9653-3

Ratele, K. (2008). Masculinity and male mortality in South Africa. *African Safety Promotion: A Journal of Injury and Violence Prevention, 6,* 22-35.

Ratele, K. (2013): Masculinities without Tradition. *Politikon: South African Journal of Political Studies, 40*(1), 133-156. doi: 10.1080/02589346.2013.765680

Ratele, K. (2014). Currents against gender transformation of South African men: Relocating marginality to the centre of research and theory of masculinities. *NORMA: International Journal for Masculinity Studies, 9*(1), 30-44. doi: 10.1080/18902138.2014.892285

Ratele, K. & Duncan, N. (2003). *Social Psychology: Identities and relationships.* Cape Town: UCT Press.

Ratele, K., Shefer, T., & Clowes, L. (2012). Talking South African fathers: a critical examination of men's constructions and experiences of fatherhood and fatherlessness. *South African Journal of Psychology, 42*(4), 553-563.

Ratele, K., Suffla, S., Lazarus, S., & Van Niekerk, A. (2010). Towards the development of a responsive, social science-informed, critical public health framework on male interpersonal violence. *Social Change, 40*(4), 415-438.

Rayburn, C. (2004). *Assessing students for morality education: A new role for school counsellors.* Retrieved from wap.johnhawkins/pc.com/PDF/Assessing%20Morality%20Ed.pdf

Reason, P. (1994).*Participation in human enquiry.* London: Sage.

Reason, P. (2006). Choice and Quality in Action Research Practice. *Journal of Management Inquiry, 15*(2), 187-203. doi: 10.1177/1056492606288074. Retrieved from *www.peter**reason**.eu/Papers/choice%20and%20quality.pdf*

Reason, P. & Bradbury, H. (2008). *The SAGE handbook of action research: Participative inquiry and practice* (2nd ed.). London: SAGE.

Reddy, S. P., Panday, S., Swart, D., Jinabhai, C. C., Amosun, S. L., James, S.,… Van den Borne, H. W. (2003). *Umthenthe Uhlaba Usamila – The South African Youth Risk Behaviour Survey 2002.* Cape Town: South African Medical Research Council.

Religions for Peace. (2009). *Restoring dignity: A toolkit for religious communities to end violence against women.* Retrieved from http://www.healthpolicyinitiative.com/Publications/Documents/1032_1_RESTORIN G_DIGNITY__End_Violence_Against_Women_Toolkit_acc.pdf

Reychler, L. (1997). Religion and conflict. *International Journal of Peace Studies, 2*(1). Retrieved from http://www.gmu.edu/programs/icar/ijps/vol2_1/Reyschler.htm

Rifkin, S. B., Lewando-Hundt, G., & Draper, A. K. (2000). *Participatory approaches in health promotion and planning: A literature review.* London, England: Health Development Agency.

Ritchie, J., Spencer, L., & O'Connor, W. (2003). Carrying out qualitative analysis. In J. Ritchie & J. Lewis (Eds.), *Qualitative research practice* (pp. 219-262). London: Sage Publications Ltd.

Rosenberg, M. L., Butchart, A., Mercy, J., Narasimhan, V., Waters, H., & Marshall, M. S. (2006). Interpersonal Violence . In D. T. Jamison, J. G. Breman, A. R. Measham, G. Alleyne, M. Claeson, D. B. Evans, ... P. Musgrove (Eds.), *Disease Control Priorities in Developing Countries* (pp.755-770). New York: Oxford University Press.

Rosenberg, J., & Wilcox, W. B. (2006). *The importance of fathers in the healthy development of children.* US Department of Health and Human Services. Retrieved from https://www.childwelfare.gov/pubs/usermanuals/fatherhood.pdf

Rossi, P. H., Freeman, H. E., & Lipsey, M. W. (1999). *Evaluation: A systematic approach* (6th ed.). Thousand Oaks, CA:Sage Publications.

Rossi, P. H., Lipsey, M. W., & Freeman, H. E. (2004). *Evaluation: A systematic approach* (7th ed.). Thousand Oaks, CA: Sage Publications.

Rossman, G. B. (2000). Participatory monitoring and evaluation. Center for International Education. Amherst, MA: University of Massachusetts. Retrieved from http://www.umass.edu/cie/Themes/participatory_evaluation.htm

Rousseau, E., & Pinnock, D. (2014). *Wild resilience: Working with high-risk adolescents using wilderness, ritual and mentorship.* Cape Town: African Sun Press.

Rutherford, A., Zwi, A. B., Grove, N. J., & Butchart, A. (2007). Violence: A glossary *Journal of Epidemiology & Community Health, 61*, 676 – 680. doi:10.1136/jech.2005.043711

SABC. (2015, April 16). Government, religious leaders call for end to xenophobic violence. *SABC*. Retrieved from http://www.sabc.co.za/news/a/0221180048097f6a8d36cd78423ca9af/Govt,-religious-leaders-call-for-an-end-to-xenophobic-violence-20151604

Sandelowski, M. (1991). Telling Stories: Narrative Approaches in Qualitative Research. *The Journal of Nursing Scholarship, 23*(3), 161-166

Sandoval, J. A., Lucero, J., Oetzel, J., Avila, M., Belone, L., Mau, M., …Wallerstein, N. (2012). Process and outcome constructs for evaluating community-based participatory research projects: a matrix of existing measures. *Health Education Research, 27*(4), 680–690.

Santana, M. C., Raj, A., Decker, M. R., La Marche, A., & Silverman, J. G. (2006). Masculine gender roles associated with increased sexual risk and intimate partner violence perpetration among young adult men. *Journal of Urban Health.* Retrieved from http://ezproxy.mrc.ac.za:2129/content/6nx113500517nj37/fulltext.html

Scheele, D. S. (1975). Reality construction as a product of Delphi interaction. In H. A. Linstone & M. Turoff (Eds.), *The Delphi method: Techniques and applications* (pp. 37-71). Reading, MA: Addison-Wesley.

Scheepers, E., Goldstein, S., & Usdin, S. (2001). *Soul City 4 evaluation – illustrative results. Houghton, South Africa, Soul City Institute for Health and Development Communication.* Retrieved from http://www.comminit.com/africa/evaluations/evasc4evaluation/sld-2643.html

Schlossberg, E. (1998). *Interactive excellence: Defining and developing new standards for the twenty-first century.* New York, NY: The Ballantine Publishing Group.

Schofield, T., Connell, R.W., Walker, L., Wood, J. F., & Butland, D. L. (2000). Understanding men's health and illness: A gender-relations approach to policy, research, and practice. *Journal of American College Health, 4,* 247-256.

Schrock, D., & Schwalbe, M. (2009). Men masculinity and manhood acts. *Annual Review of Sociology, 35,* 277-295.

Schulz, A. J., Israel, B. A., Selig, S. M., Bayer, I. S. (1998). Development and implementation of principles for community-based research in Public Health. In R. H.

MacNair (Ed.), *Research strategies for community practice* (pp. 83-110). New York, NY: The Haworth Press, Inc.

Schulz, A. J., Parker, E. A., Israel, B. A., Allen, A., Decarlo, M., & Lockett, M. (2002).Addressing social determinants of health through community-based participatory research: The East Side Village Health Worker Partnership.*Health Education Behaviour, 29*(3), 326–341.

Seale, C. (2002). Quality issues in qualitative inquiry. *Qualitative Social Work, 1*(1), 97–110.

Seedat, M. (2006a). Data to Action: Mobilising compassion and merging voices in safety promotion. *African Safety Promotion: A Journal of Injury and Violence Prevention, 4*(1), 7-21.

Seedat, M. (2006b). Wahiduddin Khan and Peace in Contemporary Islamic Thought. *South African Journal of Psychology, 36*(4), 170-190.

Seedat, M. (2012). Community engagement as liberal performance, as critical intellectualism and as praxis. *Journal of Psychology in Africa, 22*(4), 489-500.

Seedat, M., Duncan, N., & Lazarus, S. (2001). *Community psychology: Theory, method and practice: South African and other perspectives.* Cape Town: Oxford University Press.

Seedat, M., & Suffla, S. (2012). Editorial: Community engagement: Conceptualisation, methods, and illustrations. *Journal of Psychology in Africa, 22*(4), 483-485.

Seedat, M., Van Niekerk, A., Jewkes, R., Suffla, S., & Ratele, K. (2009). Violence and injuries in South Africa: Prioritising an agenda for prevention. *The Lancet, 374*(9694). 1011-1022. doi:10.1016/S0140-6736(09)60948-X

Seifer, S., & Gust, S. (2010, July). *Community-based participatory research*. Presentation at the Australian Universities Community Engagmenet Alliance, Community-Campus Partnerships for Health, Australia.

Seiler, R. M. (n.d.). *Human communication in the critical theory tradition.* Retrieved from http://people.ucalgary.ca/~rseiler/critical.htm

SELA Advisory Group. (2009). *How to monitor and evaluate sport for development project.* Denmark: NSD – Network for Sport and Development.

Sethi, D., Hughes, K., Bellis, M., Mitis, F. & Racioppi, F. (Eds.). (2010). *European report on preventing violence and knife crime among young people.* Geneva: World Health Organisation.

Sethi, D., Marais, S., Seedat, M. Nurse, J., & Butchart, A. (2004). *Handbook for the documentation of interpersonal violence prevention programmes.* Geneva: Department of Injuries and Violence Prevention, World Health Organization.

Sethi, D., Racioppi, F., Baumgarten, I., & Vida, P. (2006). *Injuries and violence in Europe: Why they matter and what can be done.* Debmark: WHO Regional Office for Europe. Retrieved from http://www.euro.who.int/__data/assets/pdf_file/0005/98762/E88037.pdf

Shabangu, T. (2011). *A comparative inquiry into the nature of violence and crime in Mozambique and South Africa.* Pretoria: IDASA. Retrieved from https://issafrica.org/crimehub/uploads/b9c503b885446a59649bc9baeb200dcd.pdf

Shefer, T. (2013). Critical reflections on contemporary responses to gender violence within public, political, health and research contexts. *African Safety Promotion Journal, 11*(2), 2-13.

Shefer, T. (2014). Pathways to Gender Equitable Men: Reflections on findings from the International Men and Gender Equality Survey in the light of twenty years of gender change in South Africa. *Men and Masculinities, 17*(5), 502-509. doi: 10.1177/1097184X14558235

Shefer, T., Bowman, B., & Duncan, N. (2008). Editorial: Reflections on men, masculinities and meanings in South Africa. *PINS, 36,* 1-5.

Shefer, T., Crawford, M., Strebel, A., Simbayi, L., Dwadwa-Henda, N., Cloete, A., … Kalichman, S. C. (2008). Gender, power and resistance to change among two communities in the Western Cape, South Africa. *Feminism & Psychology, 18*,157–82.

Sipe, C. L. (1996). *Mentoring: A synthesis of P/PV's Research, 1988-1995.* Philadelphia: Public/Private Ventures.

Skovdal, M., Campbell, C., Madanhire, C., Mupambireyi, Z., Nyamukapa, C., & Gregson, S. (2011). Masculinity as a barrier to men's use of HIV services in Zimbabwe. *Globalization and Health,* 7(13). Retrieved from http://www.globalizationandhealth.com/content/7/1/13

Small, S. (2000). *Introduction to prevention.* University of Wisconsin-Madison. Retrieved from http://wch.uhs.wisc.edu/01-Prevvention/01-Prev-Intro.html

Smith, A. (2006). Perceptions of masculinity in the transition to manhood. *New Zealand Journal of Counselling, 26*(3), 41-55.

Smith, J. (2011). Qualitative data analysis: The framework approach. *The Nurse Researcher, 18*(2), 52-62.

Smith, T. L. (2005). On tricky ground: Researching the native in the age of uncertainty. In N.K. Denzin& Y.S. Lincoln (Eds.), *The Sage handbook of qualitative research* (3rded., pp. 85-107). Thousand Oaks, CA: Sage Publications.

Songer, T., Stephens-Stidham, S., Peek-Asa, C., Bou-Saada, I., Hunter, W., Lindemer, K., & Runyan, C. (2009). Prevention and preparedness: Core competencies for injury and violence prevention. *American Journal of Public Health, 99*(4), 600-606.

Sonke Gender Justice Project. (2006). *Working with men: essential to reducing the spread and impact of HIV and AIDS in Southern Africa: HIV/AIDS, gender equality, human rights.* Retrieved from http://www.genderjustice.org.za/publication/working-with-men/

South African Police Services. (2014). *Crime statistics: April 2013 – March 2014.* Retrieved from www.saps.gov.za/resource_centre/.../statistics/crimestats/.../crime_stats.

South African Police Services (SAPS). (2015). *Crime Situation in South Africa (Released 29 September 2015).* Retrieved from http://www.saps.gov.za/resourcecentre/publications/statistics/crimestats/2015/crime_stats.ph

Spangaro, J. M., Zwi, A. B., Poulos, R. G. (2011). "Persist. persist.": A qualitative study of women's decisions to disclose and their perceptions of the impact of routine screening for intimate partner violence. *Psychology of Violence*. 1, 150–162.

Spencer, R. (2007). "I just feel safe with him": Emotional closeness in male youth mentoring relationships. *Psychology of Men & Masculinity, 8*(3), 185–198. doi: 10.1037/1524-9220.8.3.185

Springett, J., & Wallerstein, N. (2008). Issues in participatory evaluation. In M. Minkler & N. Wallerstein (Eds.), *Community-based participatory research for health: From process to outcomes* (pp. 404-418). San Francisco, CA: Jossey-Bass.

Stack, E. E. (2013). *Empowerment in Community-Based Participatory Research with Persons with Developmental Disabilities: Perspectives of Community Researchers.* Portland State University. Retrieved from http://pdxscholar.library.pdx.edu/cgi/viewcontent.cgi?article=1549&context=open_access_etds

Stake, R. (1995). *The art of case study research.* Thousand Oaks, CA: Sage Publications.

Stake, R. (2000). Case studies. In N. Denzin & Y. Lincoln (Eds), *Handbook of qualitative research* (pp. 435-454). Thousand Oaks, CA: Sage Publications.

Standing, A. (2005). *The threat of gangs and anti-gangs policy: Policy discussion paper.* Pretoria: Institute for security studies. Retrieved from http://www.iss.co.za/pubs/papers/116/Paper116.htm

Steuart, G. W. (1993). Social and cultural perspectives: Community intervention and mental health. *Health Education Quarterly, 20*(Suppl. 1), S99-S111.

Stevens, G., Seedat, M., & van Niekerk, A. (2003). Understanding and preventing violence. In K. Ratele & N. Duncan (Eds.), *Social psychology: Identities and relationships* (pp. 353-370). Cape Town: UCT Press.

Steyn, F. (2005). *Review of South African Innovations in Diversion and Reintegration of Youth at Risk.* Cape Town: Open Society Foundation for South Africa.

Stoecker, R. (2005). *Research methods for community change.* Thousand Oaks, CA: Sage Publications.

Stokols, D. (1995). Translating Social Ecological Theory into guidelines for community health promotion. *American Journal of Health promotion, 10*, 282–98. doi:10.4278/0890-1171-10.4.282

Strickland, C. J. (2006). Challenges in community-based participatory research implementation: Experiences in cancer prevention with pacific Northwest American Indian tribes. *Cancer Culture and Literacy, 13*(3230), 230- 236.

Strong, L. L., Israel, B. A., Schulz, A. J., Reyes, A., Rowe, Z., Weir, S. S., & Poe, C. (2009). Piloting interventions within a community-based participatory research framework: Lessons learned from the Healthy Environments Partnership. *Progress in Community Health Partnership, 3*(4), 327-334. doi: 10.1353/cbpr.0.0094.

Strydom, H. (2005). Ethical aspects of research in the social sciences and human service professions. In A.S. de Vos, H. Strydom, C.B. Fouché & C.S.L. Delport (Eds.).Research at grass roots: For the social sciences and human service professions. (3rd ed. pp. 56-70). Pretoria: Van Schaik.

Sullivan, M., Kone, A., Senturia, K., Chrisman, J., Ciske, S., & Krieger, J. (2001). Researcher and researched – community perspectives: Towards bridging the gap. *Health Education and Behaviour, 28*, 130-149.

Taliep, N., Lazarus, S., & Bulbulia, S. (2011). *A community profile: Erijaville.* Tygerberg: Violence Injury Peace Research Unit (MRC/UNISA).

Taliep, N., Lazarus, S., Seedat, M., & Cochrane, J. (2011, September). *Mobilising spiritual capacities and religious assets to promote safety and peace: A Western Cape case study.* Paper presented at the UCT Safety and Violence Initiative Conference 8-9 September 2011.

Taliep, N., Lazarus, S., Seedat, M., & Cochrane, J. (2015). The role of religious leaders in the anti-Apartheid struggle in mobilizing spiritual capacity and religious assets: Implications for violence prevention in contemporary South Africa. (Submitted).

Tansey, O. (2007). Process tracing and elite interviewing: A case for non-probability sampling. *PS: Political Science and Politics*, *40*(4). 1-23.

Taylor, R. R., Jason, L. A., Keys, C. B., Suarez-Balcazar, Y., Davis, M. I., Durlak, J. A., Isenberg, D. H. (2004). Introduction: Capturing theory and methodology in participatory research. In L. A Jason, C. B. Keys, Y. Suarez-Balcazar, R. R. Taylor & M. I. Davis (Eds.), *Participatory community research: Theories and methods in action* (pp.3-14). Washington, DC: American Psychological Association.

Tellis, W. (1997). Application of a case study methodology. *The Qualitative Report*, 3(3). Retrieved from http://www.nova.edu/ssss/QR/QR3-3/tellis2.html

The Unit for Religion and Development Research. (2001). *Helderberg basin transformation project.* Stellenbosch: University of Stellenbosch in partnership with Transformation Africa and Western Cape Department of Community Safety.

The Women's Commission for Refugee Women and Children. (2005). *Masculinities : Male roles and male involvement in the promotion of gender equality.* New York :Women's Commission for Refugee Women and Children.

Thornton, T. N. Craft, C. A., Dahlberg, L. L., Lynch, B. S., & Baer, K. (2002). *Best Practices of Youth Violence Prevention: A Sourcebook for Community Action*. Atlanta: Centers for Disease Control and Prevention. Retrieved from http://www.cdc.gov/violenceprevention/pdf/introduction-a.pdf

Tirri, K. & Quinn, B. (2010). Exploring the role of religion and spirituality in the development of purpose: Case studies of purposeful youth. *British Journal of Religious Education, 32*(3), 201-214.

Toh, S. H. (1999, December). Building a culture of peace. *Building Bridges,* p. 1-6. Retrieved from http://www.changeforchildren.org/cfca/downloads/bridges/bridges_99_dec.pdf

Torres-Harding, S.R., Herrell, R., & Howard, C. (2004). Epidemiologic research: Science and community participation. In L.A. Jason, C.B. Keys, Y. Suarez-Balcazar, R.R. Taylor, M.I. Davis, J.A. Durlak, & D. Holtz Isenberg (Eds.), *Participatory Community Research: Theories and Methods in Action* (pp.53-69). Washington, DC: American Psychological Association.

Trading Economics. (2015). *South Africa Unemployment Rate 2000-2015.* Retrieved from http://www.tradingeconomics.com/south-africa/unemployment-ratethat 21, 2% of men aged 15-65 being unemployed in 2006.

Trickett, E. J. (2009). Community psychology: Individuals and interventions in community context. *Annual Review of Psychology, 60,* 395-419. doi: 10.1146/annurev.psych.60.110707.163517

Trochim, W. M. K. (2006). *Nonprobability sampling.* Retrieved from http://www.socialresearchmethods.net/kb/sampnon.php

Trotter, H. 2002. *Contoured memory: gender, class and generation, in 'removals and remembrance: Commemorating community in coloured Cape Town.* (Unpublished master's thesis). Yale University.

Tudge, J. R., Mokrova, I., Hatfield, B. E., & Karnik, R. B. (2009). Uses and misuses of Bronfenbrenner's bioecological theory of human development. *Journal of Family Theory & Review, 1,* 198–210.

Twala, C. (2012). The Marikana massacre: A historical overview of the labour unrest in the mining sector in South Africa. *South African Peace and Security Studies, 1*(1), 61-67.

Tyson, L. (2006). *Critical theory today: A user friendly guide* (2nd ed.). New York, NY: Routledge.

United Nations (UN). (2011). *Men in families and family policy in a changing world.* New York: United Nations Publication. Retrieved from http://www.un.org/esa/socdey/family/docs/men-in-families.pdf

United Nations World Health Organization (UN WHO), (2014). *Global status report on violence prevention 2014.* Retrieved from http://www.refworld.org/docid/54aa8de14.html

UNESCO- United Nations Educational, Scientific and Cultural Organization. (2002). *Mainstreaming the culture of peace.* Retrieved from http://unesdoc.unesco.org/images/0012/001263/126398e.pdf

UNFPA. (2013). *Building bridges among faith-based organisations and secular development practitioners.* Retrieved from http://www.unfpa.org/culture/fbo.html

UN WOMEN - United Nations Entity for gender equality and the improvement of women. (2011). *Community mobilization, outreach and mass media.* Retrieved from http://www.endvawnow.org/en/articles/219-community-mobilization-outreach-and-mass-media-.html

Valdez, A., Kaplan, C. D., & Curtis, R. L. (2007). Aggressive crime, alcohol and drug abuse, and concen- trated poverty in 24 U.S. urban areas. *The American Journal of Drug and Alcohol Abuse, 33,* 595-603. doi: 10.1080/00952990701407637

Van Gesselleen, M., Lazarus, S., Taliep, N., Isobell, D., Carelse, H., & Phillips, S. (2015). *Process evaluation of the implementation of a communitylevel violence prevention intervention using participatory methodologies.* Tygerberg: MRC/UNISA Violence, Injury and Peace Research Unit (VIPRU).

Van Niekerk, A. (2011, July). *An analysis of research into violence and injury prevention in South Africa.* Paper presented at the National Health Research Summit, Birchwood Hotel, Johannesburgh.

Van Wyk, S. B., & Naidoo, A. V. (2006). Broadening mental health services to disadvantaged communities in South Africa. *Journal of Psychology in Africa, 2,* 273-282.

Vendley, W. F. (2005). *The power of inter-religious cooperation to transform conflict.* Association for Religion and Intellectual Life. Retrieved from http://findarticles.com/p/articles/mi_m2096/is_1_55/ain13798052/

Vetten, L., & Ratele, K. (2013). Men and violence. *Agenda: Empowering women for gender equity, 27*(1), 4-11.

Viljoen, G. & Eskell-Blokland, L. (2007). Critical approaches in community psychology. In M. Visser (Ed.), *Contextualising community psychology in South Africa* (pp. 51-65). Pretoria: Van Schaik.

Vincent, L. (2008). Cutting tradition: The political regulation of traditional circumcision rites in South Africa's liberal democratic order. *Journal of South African Studies, 34*(1), 77-91.

Violence Prevention Alliance. (2015). *Definition and typology of violence.* World Health Organisation. Retrieved from http://www.who.int/violenceprevention/approach/definition/en/index.html

Viswanathan, M., Ammerman, A., Eng, E., Gartlehner, G., Lohr, K. N., Griffith, D., …Whitener, L. (2004). *Community-based participatory research: Assessing the evidence.* Summary, Evidence Report/Technology Assessment No.99 (prepared by RTI-University of North Carolina Evidence-based Practice Center under Contract No. 290-02-0016). AHRQ Publication 04-E022-1. Rockville, MD: Agency for Healthcare Research and Quality.

Walden, I., & Wall, L. (2014). Reflecting on primary prevention of violence against women: The public health framework. *ACSSA Issues,* (9), 1-24. Retrieved from http://www.aifs.gov.au/acssa/pubs/issue/i19/i19.pdf

Wallace, T. (2006). Evaluating Stepping Stones: A review of existing evaluations and ideas for future M&E work. ActionAid International. Retrieved from http://www.genderandaids.org/index.php?option=com_content&view=article&id=288 :evaluating-stepping-stones-a-review-of-existing-evaluations-and-ideas&catid=42:monitoring-and-evaluation&Itemid=89

Wallerstein, N. (2002, September). *Community-based participatory research*. Paper presented at American College of Epidemiology Albuquerque, New Mexico.

Wallerstein, N., & Duran, B., (2003). The conceptual, historical and practice roots of community based participatory research and related participatory traditions. In M. Minkler & N. Wallerstein (Eds.), *Community based participatory research in health* (pp. 27-52). San Francisco: Jossey-Bass.

Wallerstein, N., & Duran, B. (2006).Using community-based participatory research to address health disparities. *Health promotion Practice, 7*(3), 312-323.

Wallerstein, N., & Duran, B. (2008).The theoretical, historical and practice roots of CBPR. In M. Minkler & N. Wallerstein (Eds.). *Community-based participatory research for health: From process to outcomes* (pp. 25-46; 2nded.). San Francisco, CA.:Jossey-Bass.

Wallerstein, N., Duran, B., Minkler, M., & Foley, K. (2005). Developing and maintaining partnerships with communities. In B. A. Israel, E. Eng, A. J. Schulz & E. A. Parker (Eds.), *Methods in community-based participatory research* (pp.31-51). San Francisco: Jossey-Bass.

Walsh, A., & Ellis, L. (2007). *Critical theories: Marxist, Conflict, and Feminist.* Retrieved from http://www.sagepub.com/criminologystudy

Wangmo, T., Teaster, P. B., Grace, J., Wong, W., Mendiondo, M. S., Blandford, C., … Fardo, D. W. (2014). An ecological systems examination of elder abuse: A week in the life of adult protective services. *Journal of Elder Abuse & Neglect, 26*(5), 440-457.

White, V., Greene, M., & Murphy, E. (2003). The synergy project: Men and reproductive health programs: Influenecing gender norms. Washington, DC: US Agency for International Development – Office of HIV/AIDS. Retrieved from http://www.usaid.gov/our_work/global_health/pop/.../gendernorms.doc

Ward, K. (2000). *MVP: Evaluation 1999-2000.* Northeastern University Center for Study of Sport and Society. Retrieved from http://www.mvpnational.org/wp-content/uploads/2011/12/MVP-HS-Eval-Report-1999-2000.pdf

Ward, K. (2001). *2000-2001 Evaluation Report*. Boston, MA: Center for the Study of Sport in Society. Retrieved from http://www.sportinsociety.org/vpd/mvp.php.

Ward, C. L. (2007). Young people's violent behaviour: Social learning in context. In P. Burton (Ed.), *Someone Stole My Smile An Exploration into the Causes of Youth Violence in South Africa* (pp. 9-35). Cape Town: Centre For Justice And Crime Prevention.

Watson, J., White, A., Taplin, S., & Huntsman, L. (2005). *Prevention and early intervention literature review.* Ashfield, NSW: NSW Department of Community Services.

Welander, G., Svanström, L., & Ekman, R. (2004). *Safety promotion: An introduction* (2nd ed.). Stokholm: Karolinska Institutet, Department of Public Health Sciences, Division of Social Medicine.

Welbourn, A. (1995). *Stepping Stones: Strategies for hope*. Retrieved from   http://www. steppingstonesfeedback.org

Welland, C., & Ribner, N. (2008). *Healing from violence: Latino men's journey to a new masculinity.* New York: Springer Publishing Company.

Welman, C., Kruger, F., & Mitchell, B. (2005. *Research methodology* (3rd ed.). Cape Town: Oxford University Press.

Wechsberg, W. M., El-Bassel, N., Carney, T., Browne, F. A., Myers, B., & Zule, W. A. (2015). *Substance Abuse Treatment Prevention and Policy, 10*(6). doi: 10.1186/s13011-015-005-6

Whitaker, D. J., Morrison, S., Linquist, C., Hawkins, S. R., O'Neil, J. A., Nesius, A. M., …Reese, L. R. (2006). A critical review of interventions for the primary prevention of perpetration of partner violence. *Aggression and Violent Behavior, 11,* 151-166. doi: 10.1016/j.avb.2005.07.007

Whitehead, T. L. (2002). *Traditional Approaches to the Evaluation of Community Based Interventions: Strengths and Limitations.* Maryland, MD: University of Maryland, The Cultural Ecology of Health and Change (CEHC).

Tellis, W. (1997). Application of a case study methodology. *The Qualitative Report, 3*(3). Retrieved from http://www.nova.edu/ssss/QR/QR3-3/tellis2.html

Women's Commission for Refugee Women and Children. (2005). *Masculinities: Male roles and male involvement in the promotion of gender equality.* Retrieved from http://www.womenscommission.org

Woods, M. (2015, April 21). Our country is burning says South African church leader as migrants are driven out. *Christian Today*. Retrieved from

http://www.christiantoday.com/article/our.country.is.burning.says.south.african.churc

h.leader.as.migrants.are.driven.out/52510.htm

World Health Organisation. (2007). *Preventing injuries and violence: A guide for ministries of health.* Geneva: WHO. Retrieved from

http://whqlibdoc.who.int/publications/2007/9789241595254_eng.pdf

World Health Organization. (2009). *Violence Prevention: The Evidence.* Geneva: WHO. Retrieved from: http://www.who.int/violence_injury_prevention/violence/

4th_milestones_meeting/publications/en/index.html.

World Health Organisation (WHO). (2010). *Violence prevention evidence: Series of briefings on violence prevention.* Retrieved from

http://www.who.int/violence_injury_prevention/

violence/4th_milestones_meeting/evidence_briefings_all.pdf

World Health Organisation. (2014). *Global status report on violence prevention 2014.* Geneva: WHO. Retrieved from

who.int/violence_injury_prevention/violence/status_report2014/report

Wyrod, R. (2008). Between women's rights and men's authority: Masculinity and shifting discourses of gender differences in urban Uganda. *Gender & Society, 22*(6), 799-823.doi: 10.1177/0891243208325888

Zarate, O., & Woodfin, R. (2004). Introducing Marxism. Ferndown, United Kingdom: Infinity Books Ltd.

Zille, H. (2012, October 3). *Zille:* Why the army should help fight gangs. *IoL News*. Retrieved from http://www.iol.co.za/news/crime-courts/zille-why-the-army-should-help-fight-gangs-1.1337761#.UGwWHZjMgus

Zukoski, A., & Luluquisen, M. (2002) Participatory Evaluation *What is it? Why do it? What are the challenges?* California: Community based public health policy and practice, partnership for public health, Retrieved from http://depts.washington.edu/ccph/pdf files/Evaluation.pdf