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Passages



REAL FATHERS INITIATIVE in INDIA

Adaptation of the program to the context of West Bengal



Implemented by Child in Need Institute with the
Institute for Reproductive Health, Georgetown University, USA

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Child in Need Institute (CINI) implemented the REAL Fathers learning lab to pilot 2 sessions of the project after conducting an adaptation workshop with young fathers of Falta block in West Bengal. The organization was guided by Georgetown University's Institute for Reproductive Health (IRH), which has developed the REAL Fathers Initiative. This work was supported by the United States Agency for International Development. We are grateful to members of the community in Falta block, team members of Diamond Harbour Unit, CINI, and all the stakeholders of South Kalagacchia village, Falta.

About the Document

This document of the Learning Lab testing has been developed by Child in Need Institute (CINI) for the Institute for Reproductive Health, Georgetown University to capture the details of adaptation and implementation of each step of the project for application in scaling up of the initiative.

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ABBREVIATIONS AND ACRONYMS

ANM	Auxiliary Nurse Midwife
ASHA	Accredited Social Health Activist
CBO	Community Based Organization
CINI	Child in Need Institute
CPC	Child Protection Committee
FGD	Focus Group Discussion
ICDS	Integrated Child Development Services
IDI	In-Depth Interview
IPV	Intimate Partner Violence
IRH	Institute for Reproductive Health
IUD	Intrauterine Device
NFHS	National Family Health Survey
NGO	Non-Governmental Organization
OCP	Oral Contraceptive Pill
REAL	Responsible, Engaged and Loving Fathers
USAID	United States Agency for International Development
VAC	Violence Against Children

I. INTRODUCTION



THE REAL FATHERS INITIATIVE

Responsible, Engaged, and Loving (REAL) Fathers is a community-based mentoring program that capitalises on the key period of transition when young men become fathers for the first time. Piloted in Northern Uganda in 2013, the program has shown promise in breaking cycles of violence and improving positive parenting. The set of interventions was designed by Georgetown University's Institute for Reproductive Health (IRH) and Save the Children supported by the United States Agency for International Development (USAID).

The REAL Fathers program worked by providing mentoring sessions to young fathers in Northern Uganda over a period of six months. Young fathers (aged 16-25) participated in home and group mentoring sessions (4 individual sessions, 2 couple-based sessions and 6 group sessions). The program uses a gender transformative approach, addressing dominant notions of masculinity and beliefs that may lead men to assert control over women and discipline children harshly. REAL Fathers challenges these gender norms and supports fathers as caring, supporting, equal partners. Raising awareness through poster campaigns

reinforce messages of positive masculinity and fatherhood, as do community celebrations. The celebration supports the fathers' achievements and expresses their commitment to sustaining new behaviours.ⁱ

In 2015, REAL was expanded through integration into a livelihoods programme in Northern Uganda and early childhood development centres in Karamoja, Uganda's least-developed region. In this adaptation, a new module was added to the mentoring sessions on family planning bringing the total of sessions to 4 individual, 3 couple and 7 group sessions. Results confirmed the efficacy of the programing improving young fathers' skills in parenting, couple communication and preventing Intimate Partner Violence (IPV) and Violence against Children (VAC) (Kohli et al., 2019). Designed for scale, it was found that this simple and culturally grounded mentorship model could be integrated into existing programs while retaining its effectiveness. Scale-up through integration was planned in several contexts globally.ⁱⁱ

Rationale for Implementation in West Bengal, India

In 2019 -2020, a collaborative process began between Georgetown University's Institute for Reproductive Health (IRH) and Child in Need Institute (CINI) of West Bengal, India to adapt and scale up the REAL Fathers program in India with support from USAID.

The state of West Bengal in India has high rates of both IPV and VAC. Eight years ago, more than one in 10 cases of crime against women in 2014 was reported from the state. Bengal accounted for one in five cases of cruelty by husband and relatives, far more than north Indian states.ⁱⁱⁱ

Similarly, violence against children is also intensifying. This includes issues like child marriage, child labour, sexual abuse and exploitation, corporal punishment, and trafficking is very much associated with gender-based violence, abuse, and neglect. According to National Crime Record Bureau, cases registered under crime against children in West Bengal have increased overwhelmingly from 6191 in 2019 to 10,248 in 2020^{iv}.

As per the National Family Health Survey Report, domestic violence cases are reported as the highest, crime against women. Violence, in general, is increasing excessively in our country. A patriarchal structure of society with an out-dated and orthodox mind-set regards women as being submissive to men. Domestic abuse can be in any form mental, physical, and sexual but these data largely focus on physical and sexual abuse at the domestic level. As per the reports of National Family Health Survey 5 (2019-2020), although domestic abuse in West Bengal has declined from 33.1% in 2015-16 (NFHS 4) to 27% in 2019-20, it continues to remain significant. Data also reveals that Sexual Abuse in West Bengal has unfortunately increased from 8.9% in 2015-16 to 9.7% in 2019-20.^v West Bengal data reveals that use of family planning methods has increased to 74% in West Bengal (NFHS 5). However, discussions with women during the intervention reveal that the onus of

family planning continues to be on the women with low male partner involvement.

The IRH –CINI partnership for adapting REAL Fathers

The background of an existing patriarchal social system, gender inequality and discrimination and violence within the homes set the stage for the partnership between IRH and CINI to develop an adaptation of REAL Fathers for use with rural and urban communities in West Bengal, India. CINI has strong community ties, networks, and a diverse portfolio of projects in West Bengal. An inception partnership meeting held between IRH and CINI in December 2019 laid out a plan for adapting REAL Fathers which included formative research, an adaptation workshop and a pilot of 2 sessions of REAL Fathers with a learning lab to finalize the adaptation.^{vi}

II. THE PREPARATORY PHASE



FORMATIVE RESEARCH

Surveying the Behavioural and Stakeholder landscape

Formative research for the REAL Fathers program was conducted in one urban and one rural site in West Bengal, India as part of the worldwide USAID-funded Passages Project. It was a collaborative endeavour between Georgetown University's Institute for Reproductive Health (IRH) and Child in Need Institute (CINI) of West Bengal, India. The objective of this formative research was to gather information for guiding the adaptation of the REAL Fathers initiative, a parenting intervention.

Qualitative techniques such as In-depth Interviews (IDI) and Focus Group Discussions (FGD) were used to explore individual and social perceptions, behavior and support related to parenting, intimate relationships and family planning. Participants for FGDs included young fathers (aged 18-34), young mothers (aged 18-29); older fathers (aged 35-55 with children) and older mothers (aged 30-55). Participants for IDIs included Younger and older fathers, younger and older mothers (age group as in FGDs); Community Leaders, village or ward Child Protection Committee (CPC) members, Health Workers, and Government

Key Findings

Representatives. Apart from age, participants were selected on the basis of set eligibility criteria such as residence in the study community, married or co-habiting with an intimate partner, and having child/ren aged 0-5 years (younger group) and having children of any age (for older group).

Some of the key findings from the formative research study included:^{vii}

- Government officials and CPOs expressed a need for a program like REAL Fathers. A government official from the rural area stated that currently there are no informal or formal parenting mentorship programs in the community. She also expressed the need to exercise caution during implementation so that it is not politicized.
- Men in both rural and urban areas shared similar views about the role of the father being a provider financially, emotionally, and socially; older women in rural areas suggested that fathers provided material support only, while women were considered the primary caregivers of children.
- Parents divided their parenting responsibilities, often adhering to gendered roles and responsibilities with some urban fathers participating in a few care giving activities typically considered a woman's role.
- Lockdown was mentioned as a challenging period regarding livelihood and income generation to provide for their families
- Young men learnt to be fathers from various sources, including advice from and observations of family members and neighbors, through discussions with friends, and through religious congregations. They also adopted practices promoted by media and were willing to listen to advice from local NGO workers.
- Being a 'good father' was considered normal and thus not celebrated.
- Parents in both settings valued learning and aspired for their child/ren to have a good education and a successful career which would make a child "manusher moto manush (a worthy human being)."
- Values instilled in children included importance of good education and good manners
- Physical punishment of children less than five years is broadly discouraged though it continues to be a practice in both rural and urban areas.
- Household chores including care giving of child/ren, husband and in-laws considered to be primarily the women's responsibility
- Violence against women emerged as a justified practice, if the situation so warranted it. Other methods of resolving couple's conflict included sending women to their parents' homes, divorce, and involving both sets of parents to resolve conflict.
- Respondents from both settings mentioned that couples' relationship deteriorated during Covid-19 with increased stress around reduced family income and from the pandemic
- ASHAs and community health workers were generally considered as key sources of knowledge for various modern family planning methods (with variance in confidence levels).

- There was more family and social pressure to have a child soon after marriage in rural areas as compared with the urban setting.
- Advice on parenting appeared to be more acceptable than advice on couple relationships

Recommendations

Based on the findings of the formative research on REAL Fathers conducted in one urban and one rural setting of West Bengal the following recommendations were proposed:

1. Integrate REAL Fathers with livelihoods programming
2. Build on growing involvement of fathers in caregiving.
3. Implement the REAL Fathers mentoring program in rural areas.
4. Support existing positive parenting practices.
5. Improve couples' communication to reinforce positive practices.
6. Encourage adoption of modern family planning methods.^{viii}

The Adaptation Workshop on REAL Fathers



The REAL father Adaptation program was organised at The Stadel, Kolkata, on 17th March, 2022. Participants in the workshop included both young and old couples from the community (Ward 66, Kolkata and Falta block in South 24 Parganas); NGO partners, members of local clubs, service providers such as Accredited Social Health Activists (ASHA) and Auxiliary Nurse Midwives (ANM) of Falta and Ward 66 of Topsia under the Kolkata municipal area (KMC) and CINI team members. Introduction to the REAL Fathers program and its adaptation in Uganda was followed by sharing of the primary formative research study findings and an interactive discussion around thought provoking questions. These included questions on their perceptions regarding role of a father and fatherhood; primary

involvement of mothers in parenting, care giving and education as compared to low involvement of fathers; and gender and social norms.

While introducing the project, the meaning of adaptation and how the program could be adapted to the Indian context and that of West Bengal state, engaging fathers in the process, was also discussed. NGO partners supporting CINI in the process included SWAYAM, NARI-O-SHISHU KALYAN, and JABALA. Findings from the formative research on IPV and VAC were also shared to highlight the WB and Indian context related to domestic violence and harsh disciplining of children.

The modules for the seven topics discussed within the program, the activities, visualisation exercises and posters used in the African program were shared. Participants expressed their views regarding the terms /activities and posters used in the module. After participating in some of the exercises, they came up with useful suggestions for adaptation of both the program methodology and the modules.

Among them, one of the most crucial points of adaptation was to adopt a 'couple to couple approach' in the Indian context instead of a 'elder father to younger father mentorship' approach as implemented in Uganda.

It was an interactive workshop where the CINI team facilitated the discussions and review of content. Participants were divided into groups. This was followed by group discussions that were held in plenary and small breakout sessions to review the REAL Fathers program and evidence and make recommendations to adjust the program approach and activities. Discussions were open and activity focused. The goal was to develop a program approach that the participants believed to be the most effective with young fathers and their families living in urban and rural communities.

SUGGESTED CHANGES FOR THEME – FATHERHOOD

- a) Modification of question on feelings on becoming a father for the first time.
Most of the modification that was done was in terms of vernacular language used (Bengali). When the question in English was translated and presented to the participants, the suggested modifications in the words/phrases were used to frame the question differently.
- b) Regarding the question on animals that they can think of as representing good fathers, they suggested changing the term 'animals' to living things.
- c) Changing the framing of the third question on how being a father today is different from the past to 'Can you share your views on the difference between fathers of the past and fathers of today?'
- d) Regarding questions of the visioning exercise, they suggested that the question be framed as 'What kind of a father would you like to be?'
- e) Community Poster: Poster ideas included showing mother and father with happy faces holding the hands of their child sitting in the middle; or poster of

father feeding milk to his child with mother sitting beside them; poster of father taking his child for vaccination to the community health centre.

SUGGESTED CHANGES FOR THEME – FAMILY PLANNING

"Plantation of the rice saplings is the same as family planning"

- a) The Rice plantation game to communicate the idea of spacing of children for their growth was well liked by participants. According to the participants, harvesting rice is a game which can be understood by young couples. However, they recommended simplification of some words for better understanding. They responded well to the question of why giving birth to the first child is similar to planting rice seeds during the correct season.
- b) Inclusion of Gender in the family planning module: Concerns were raised about the preference for the boy child as an asset to the family leading to multiple child births till a son is born. One change that was made was the question – what do you desire for your son's and daughter's future? Emphasis has been given to the parents' responsibility to nurture their children, whether boy or girl, with love and care.
- c) Poster idea: Participants came up with 3 series of posters encouraging the young couples to change their perspective on family planning - husband wife discussing; husband and wife going to health center; health workers showing the samples of temporary family planning methods.
- d) Suggested inclusion of a short video with local people enacting the concept of family planning (with whom the community can relate) could be made for young couples (this may be done in the near future during further implementation)

Translating and adapting the REAL Father Mentor Discussion Guide to the West Bengal context

Based on the suggestions presented during the workshop, CINI subsequently translated and adapted the Mentor Discussion Guide accordingly. Terms and questions were changed as suggested. Points of discussion on gender preference and birth spacing were added to the module accordingly. Poster ideas were also implemented. However, they need to be developed further and include messages to be presented as a series for a REAL Fathers campaign.

III. IMPLEMENTATION



REAL FATHERS

The Stand-Alone Learning Lab Project

The Learning Lab project of REAL Fathers (testing 2 sessions of REAL) was implemented in the selected area of South Kalagachhia village in Falta block of South 24 Parganas district in West Bengal, as a stand-alone project. It was designed to be implemented to one rural area. The process of conducting research and the Learning Lab intervention suffered an extensive delay due to the COVID-19 pandemic and thus had to be completed in a short period with limited participants. A couple to couple approach was planned for implementation. Ten

South Kalagachhia village is located in Falta block of South 24 Parganas district in West Bengal, India. Gopalpur is the Gram Panchayat of Kalagachhia village. With a geographical area of 81.68 hectares, South Kalagachhia has a total population of 2,096 people, out of which male population is 1,044 while female population is 1,052. There are about 483 houses in the village.

young couples participating in the program selected three (3) couples as their Mentors. The initial plan was that, post-training, 3 groups of young couples would

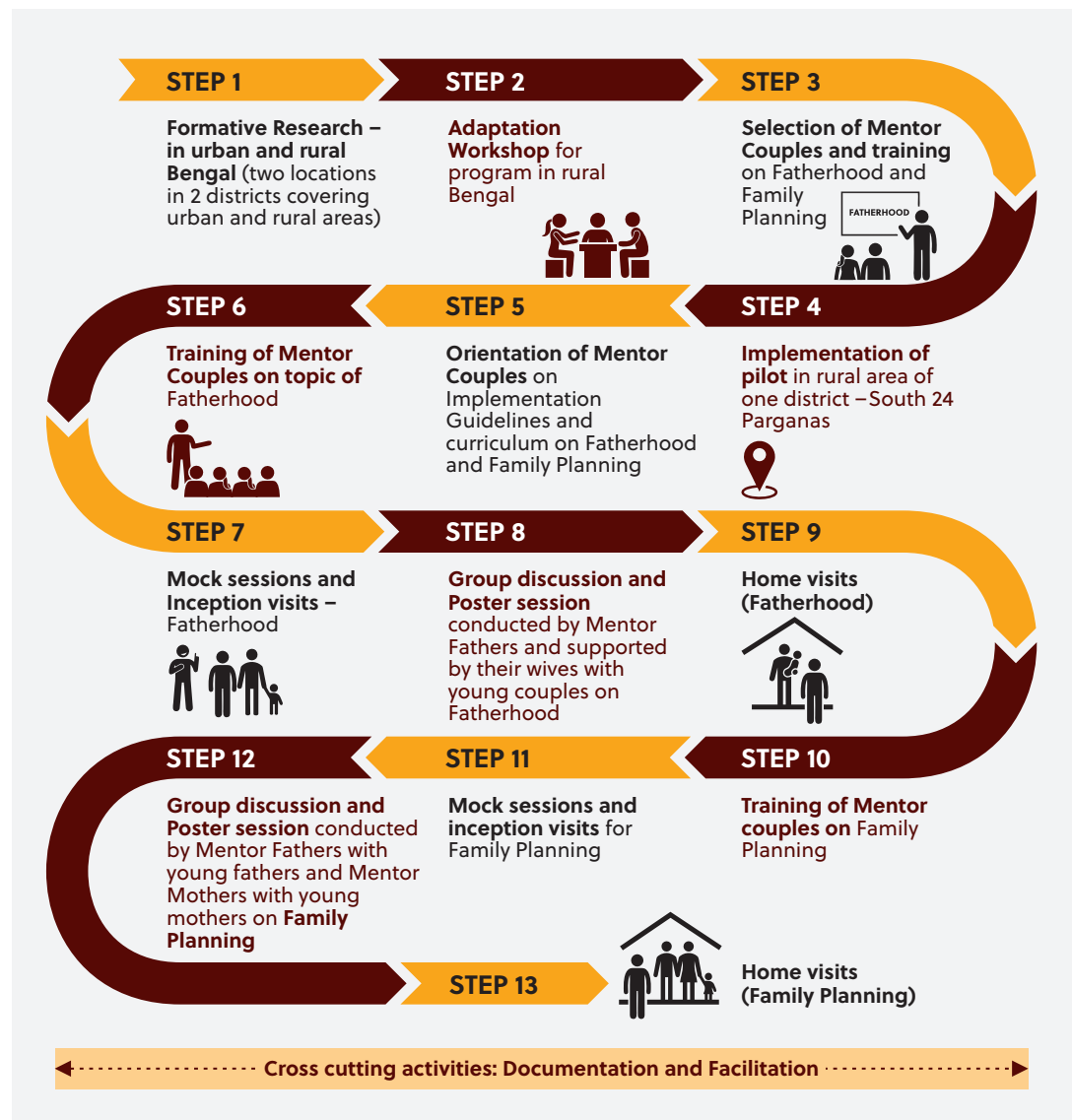
be formed – 2 groups of 3 young couples each and 1 group of 4 young couples. Each of these groups would be assigned to one Mentor couple.

As part of the learning lab, a one-day session was held at the ICDS centre in Falta block on 11th April, 2022. The session took place with the predetermined participants along with the potential couple mentors. The participants along with the couple mentors were given a background of REAL initiative to equipped them to choose mentors democratically.

The meeting was attended by 10 young fathers aged 21-29 years and their wives. Participants were introduced to the REAL Fathers program, its inception in Uganda and the objectives of reducing intimate partner violence and positive parenting.

The Adaptation and Learning Lab of REAL Fathers in India:

The Implementation Process At A Glance



Selection of Mentor Couples

This was followed by the democratic selection of 3 mentor couples (aged 30 to 40 years) out of the 8 couples present at the meeting (on the basis of their positive behaviour towards their children and families, responsibilities fulfilled and the love and care they provide). Participants voted for the ones whom they considered to be ideal fathers and mentors. It was explained that these mentor fathers would build the capacities of selected younger fathers from the area.

Training of Mentors

Post selection, the mentors were trained on the themes of Fatherhood and Family Planning according to the Training module. They were trained to ask questions and elicit responses from the fathers, conduct the activities/games and the poster session. They were also given time to study the module and practice on their own. It was understood that they would continue to study the resource material and practice. The training guide and resource sheets were shared with the mentors.

IV. IMPLEMENTATION: MENTOR THEME 1 FATHERHOOD



Reorientation of Mentor Couples

The first day in the community had been planned as a day for Mock Sessions along with introduction of the documentation team members who would be present with the Mentor Couples for each of their activities. At first, the facilitators enacted the roles of mentors and young couples to show them how to facilitate the discussion. Subsequently all three mentor couples were given a chance to rehearse one by one. Here, the facilitators enacted as young couples giving them an idea of the real situation. However, it was found that although the couples were able to recapitulate some of the activities in the training, they needed further orientation on the process of the mentoring program and the messages to be conveyed. The CINI team also observed that none of the Mentor Fathers had been able to take the time to study the resources given to them. The older children of mentors had exams and their parents studying their guides (reading aloud sometimes, as new learners do) was a somewhat disturbing or irritating factor.

To ease the process, and help the Mentors to become comfortable with the two themes of Fatherhood and Family Planning, there was a discussion around the

topics. Mentor couples were guided through the contents in the REAL Father Mentor Discussion Guide (Adaptation to the West Bengal context and language) with special focus on the questions and activities including poster sessions.

The day-long session – a re-orientation and planning meeting - ended with a field

“When an outsider is present, people listen attentively and thus gradually change occurs. This area is still in the dark ages. We need programs such as these to help bring them out into the light. We are poor. But as parents we have only one goal for our daughters – to bring them up well so that they are able to walk out of this dark place into a world of light.”

plan for the program. The CINI team also discussed the steps of the program and the role and responsibilities of mentors. There was a visible increase in the confidence levels and communication skills of the Mentors. They were requested to study their modules and resource sheets for a training session on Fatherhood.

ADAPTATION: The learning point for CINI was that continuity in interactions with the Mentors during the program was essential for them to fulfil their roles.

1. Mentors felt that either the ASHA or ICDS worker or CINI Representative was required to be present during the discussion at least during the introductory phase so that people are more willing to listen. After that the mentors would be able to conduct the program on their own. Thus, presence of CINI member to facilitate the process was requested by Mentors.
2. Developing the field plan according to the short time span as given below:
 - i. Conducting a one-day refresher training of Mentor Couples to prepare them for the group discussions on Fatherhood or 'Baba Howa' and Family Planning with REAL fathers and mothers.
 - ii. Conducting mock sessions post training to prepare mentors for the inception visits to homes of young fathers for inviting them to the group discussion at a given time and place
 - iii. Dividing the group sessions into two groups of young couples from two different communities (on the basis of religion) : members from the one religious group (referred to as 'minority group') were observing fasts and they had to be called earlier as a separate group.
 - iv. Visiting young couples in their homes to discuss their progress with the home tasks
 - v. Adopting a similar process with the second theme of Family Planning with one point of difference: Mentor fathers talking to young fathers and their wives talking to young mothers due to the sensitive nature of the theme.

Training of Mentors on Fatherhood

Refresher Training

According to plan, a training session was conducted for the Mentor couples on Fatherhood. Mentors had made efforts to study the resource material and appeared to be more confident. CINI team members used role play and an interactive question-answer method to help the mentors understand how to talk to younger fathers and introduce themselves as mentors or 'paramorshodata' (literally giver of advice). During the REAL Fathers intervention, it was important for them to attach that term to their names. They were guided on questioning techniques so that the younger fathers are able to understand the concepts and respond accordingly.

ADAPTATION: 1.Changing the word 'Pitritwo' for Fatherhood to the term 'Baba Howa', which is easier to understand.

2. All three mentor couples to conduct the discussion together, with Mentor Fathers guiding the discussion. One of the Mentor Fathers (with low literacy level but good communication skills) was given the responsibility of conducting the poster session. So instead of one Mentor Couple talking to a young couple, it was all 3 couples talking to 10 couples in a group.

It is important to note that, based on the theme, leadership role of mentor fathers and mother may change. In the 2 sessions tested in the learning lab, the fatherhood theme required leadership from the mentor fathers with mentor mother also flagging very crucial points such as difference in roles of father and mother in rearing a child. On the other hand, the family planning discussions were held in separate groups where both father and mother mentors led their respective discussions. Also to keep the essence of REAL Fathers intact, mentors father were asked to lead the process to encourage the young fathers which was also appreciated by them.

Observation: This adaptation step was required since despite the ice-breaking session, two out of three Mentor Fathers had not reached the required confidence levels as Mentors to conduct the activities alone.

Mock Sessions with Mentor Couples

Soon after the training and demonstrations given by the CINI team on conducting a) inception visit, b) group session on Fatherhood and c) home visit, one day was spent in conducting mock sessions with the Mentor couples. Where wives were more literate /educated than their spouses, they were asked to support their husbands or the Mentor Fathers in leading the process. It was observed that in both recall and communication, the women were very vocal. However since the focus was on Mentor Fathers, it was agreed that they would remain in a supportive role.

With rigorous participation in the two-day period, the ability to open up and communicate increased and they began to develop as trainers. This led CINI team

to conclude that a longer, intensive training period for the Mentors including practice sessions would add to the efficacy of the program.

Inception Visits

After the mock sessions were completed, the CINI Facilitators and the Documentalist accompanied the Mentor Couples during their inception visits to the homes of young couples. Although, the Mentor couples visited the homes as a group, one couple among them took the lead in inviting the young couples. They talked a little about the program, the session they had attended earlier, and invited the REAL young fathers and mothers to the group discussion at the selected venue and time.

Group Discussion and Activities

The Group discussions were divided into two sections - young couples from minority groups and other groups.



One member of the CINI team announced the beginning of the program and requested the involvement of the fathers while introducing the mentor couples. There was no formal introductory session because all of them knew each other very well.

Observation: During the scaling up, it would be good to proceed methodically with a formal introduction among the group since participants may not be as familiar with each other. Also, the introduction gives insight into other important information regarding the participant father such as occupation, number of children, and their ages.

FEELINGS ON BECOMING A FATHER FOR THE FIRST TIME

- "A daughter is born to light up my world."
- "Responsibilities have increased. I have to earn more to take better care of her, her education."
- I have to make time for my child even though I am very busy. Have to keep aside one or two hours for my daughter."
- "Have to keep an eye on whether my child is getting the required nutrition."

"Chinta o anonde chokhe jol eshe gelo." (Tears filled my eyes with both joy and worry.)

- "I have to bring up my child well. I don't want my child to go through the hardships that I have suffered."
- "Now that I am a father, I have to ensure that my child gets a good education, good values through my parenting so that people appreciate my child as a 'good child'."
- "My husband dented a metal pot by beating on it constantly, he was so happy when our son was born!"
- "I was overjoyed when my child was born. I was also very happy to hear my child say BABA for the first time."

DIFFERENCE BETWEEN FATHERHOOD IN THE PAST AND IN THE PRESENT

- The group feel was that earlier fathers had been involved in earning a livelihood and providing for their families. As children, they went through a difficult childhood without much involvement of fathers in their lives. Now children experience much more joy and affection. As REAL Fathers, they would want their children to grow up with love and care.
- The love of parents for their children does not change over the years, but the expression of affection changes. There is more focus on providing education. Earlier it was primary school in the village. Now it is a good KG school.
- "We want our children to learn English and dress like their urban counterparts. We also dress differently" Earlier, as children, we used to eat whatever was available and go to school carrying a cloth bag. Now things are different.
- There is more sharing with fathers now. "As children, we used to share our needs and desires with our mothers more; nowadays children share more with their fathers."

Non-minority Group

- This group felt that fatherhood had changed much over the ages. People were more gentlemanly in their behavior as fathers and they used to discipline their children. Presently, fathers are impatient, and abusive. There is no disciplining of children.
- Education has suffered. Education system was better before. Now there is no grading or marking system. They are just being promoted to the next class.

"If fathers instil good values in children's minds from a young age, they will learn and practice good things. We have to observe what they are good at – studies, drawing; have to observe their performance and support them..."

Efforts at good parenting in the present

- As present day fathers, we try to help the mothers in child care. If she is busy, we play with the child for some time and then let her takeover. Sometimes we take them to the school and bring them back home whenever we get the time. We

share this responsibility with our wives.

- “Whatever we could not do as children – eat well, dress well, be educated – we want our children to be able to do. We want them to be well and happy.”
- “We used to fear our fathers. The bonding could not develop well. Now the relation is more affectionate with fathers showing their love and affection.”

LIVING BEINGS SIMILAR TO REAL FATHERS

- Monkey/Hanuman – From what I have seen, the father guides the children, takes care of them like the mother;
- Elephant – The father and mother protect the child as they move, guiding the child and protecting him/her from outside threats.
- Lion – As humans, mothers do more of the caregiving; fathers do less

HOPES AND ASPIRATIONS FOR CHILDREN

Responses included getting a good /higher education; getting a good job and salary; becoming a worthy human being; doing better than us and being able to lead a better life; and treating children well so that after becoming good human beings, they treat us well in our old age.

RESPONSIBILITIES OF REAL FATHERS

Young Fathers speak...

“Baba howar onek jwala. There is a lot of pain involved in being a good father. When I am sad or angry, instead of shouting or fighting, I leave the house and return when I am more in control.”

- REAL Fathers need to ensure nutritious food for the child; whether the child is well cared for, health of the child, proper growth and development, and education in a good school.
- One has to make an effort to become a Real father. It will not do to leave everything to the mother. One has to plan in order to raise a child well according to the income of the family.
- Education of parents is a critical factor. If parents were educated they will be able to support their children in studies better. (Felt by all couples)
- REAL Fathers have to ensure that their children are protected from abusive language or anti-social activities such as substance abuse. They need to take care that they do not use their children to vent their frustration, or anger or even tiredness. They should make an effort to make the child understand and send him/her to the mother or grandparents. They should manage their anger during communication and not indulge in verbal or physical abuse in front of their children.
- Since mothers are taking care of infants during the day, fathers have to help at night by staying awake and sharing the caregiving duties.
- One has to remember to change oneself to educate one's child so that he/she becomes a worthy human being.



During this session, a Poster of REAL Father with child and mother standing beside them was shared with the group members. The third Mentor Father (who was assigned the responsibility of conducting this part of the session) took over and asked the group questions. It was observed that he was clear and confident about what and how he had to communicate.

Responses from fathers included:

- "It is a small family but a happy family."
- "They are all feeling joyful and smiling."
- "They are poor but happy as a family."
- "The Father is spending time with his child."
- "The Father is being affectionate and loving towards his child."

The group felt that money was not everything. Like this family, parents could be more loving and affectionate towards their children and spend time with them whenever possible so that family life is happy.



What young REAL Fathers do for their child / children

Responses to this included playing with the child after returning home; taking care of a crying baby; teaching the child; and looking after the child whenever time permits after work.

What young REAL Fathers did not do for their child/children

Bathing, feeding, cleaning (changing nappies) and maintaining hygiene were mentioned as activities that were not done /done rarely by the fathers. These were perceived as being the responsibilities of a mother since the fathers lacked the natural ability to do them satisfactorily.

Observation: Responses to this question highlight gendered perspectives and existing social norms.

At the end of the session, mentors asked the young fathers to do any one or more caregiving activity/activities with their child that they had not done earlier. Before closing, the group was shown a video on fatherhood in the Hindi vernacular called, 'PAPA'.

It is an outsourced video found on fatherhood on the Youtube channel. This was shown to make the session attractive and interesting. It may be used as reference for preparing a similar video in the near future for inclusion in the resource material.

Despite a language barrier, the group was able to understand and feel the love and bonding between a girl and her father, throughout her life cycle. "Amrao erokom baba howar cheshta korte pari." (We can also try and become such a good father!")

Home Visits



Mentor couples visited the homes of REAL Fathers and started a conversation with them regarding the group discussion on Fatherhood and if they had gotten the opportunity to do something new. Parenting activities carried out in the homes was similar to what was shared by young couples during the discussions. Young mothers continued to be the primary care givers. However, the young fathers reflected a change in attitude and were trying to help their spouses in care-giving of their child/children.

A few fathers mentioned that they hadn't got the time yet but normally they did help out at home. Other responses included:

- "My daughter is 5 yrs. old. I bathed my child. I am off on Sundays. I usually help to bathe my child and we eat together. After she goes to sleep, I go out for other work. I help by handing her the water and help her clean herself. Usually, after returning from work, I share the load with my wife. I want to educate her well and will try to admit her in KG the coming year. I do not get time to play with her. On Sundays, I try to take her to the school playground and play with her a little."
- "I already try to help by cleaning my child and the potty if my wife is absent and my mother is busy. I will try to do more."
- "I learned that it is important not to scold the child and try to explain what they are doing wrong and why. I am trying not to scold them."
- "My daughters feel that I have been less angry and am scolding them less."
- "My wife was very busy, so I tried to feed my child. I also try to help her to sleep. I feel good while doing these things."
- "I bathed my child. Since my wife was cooking, I helped to take care of her."
- "I gave my child a bath for the first time and I really liked it."
- "I will try to spend time with my children during the evening hours."
- My child is an infant. I work outside and come home for short visits. I do try and help my wife change nappies and clothes. I play with my child.
- Generally, all young fathers said that they have enjoyed doing the activities and will make efforts to change and continue to support their wives in future.

V. IMPLEMENTATION: MENTOR THEME 2 FAMILY PLANNING



Refresher Training

Refresher training was conducted with Mentor Couples on the theme Family Planning to prepare them for the group discussion with REAL fathers and mothers. Mentors were explained the concepts of Family Planning and Spacing of children using the rice planting activity. This activity helped mentors to understand the concept easily and they participated enthusiastically.

They were explained how to relate the better farmer with the better parent who spaces his children for their growth and well-being. The trainers ensured that the Mentor mothers understood the questions and felt comfortable in probing for answers from the participants. Mentors were guided on watching out for signs of lack of comprehension and guided on how questions could be framed differently to ensure better understanding and response.

Similarly, Mentors were also trained on conducting the poster session and explaining the need for communication with their spouse.

ADAPTATION:

1. For this theme it was decided that all three Mentor mothers would conduct the session and other activities with the wives of younger REAL Fathers and Mentor Fathers would conduct the discussion with the younger fathers.
2. Since the Mentors could easily relate to the rice planting activity as similar to the spacing of pregnancies, they were told that they could begin with the activity if they wished and then explain Family Planning and related issues by connecting it to the activity.



Mock Sessions with Mentors

Following the training, mock sessions were conducted during which the Mentor couples conducted the activities. During this session, the lead Mentor Fathers and Mothers conducted the session, while the others conducted the supporting activity of poster session.

RECOMMENDATION:

During the session, the group felt that the poster idea of a woman talking to a doctor at the health centre in the presence of ASHA was incomplete since the husband was missing from the picture. Besides, the group was trying to create awareness about family planning being the responsibility of both spouses. Hence, the poster was changed before the group discussion was conducted.

Inception Visits

Mentor couples set out on their inception visits to invite couples to the selected venues for discussions. The timings were discussed and problems of availability due to work and the festival season for minority couples were sorted out. The young couples agreed to attend the discussion.



Group Discussions and Activities

The groups were held simultaneously so that couples had enough time to make arrangements for the festive days. The documentarian was physically present during the sessions with younger mothers and used a recorder for the session with fathers. CINI team members also shared their observations.

UNDERSTANDING OF FAMILY PLANNING

Rice Planting Activity: Young Mothers' Group

The Group did not have a clear understanding of family planning. Most young mothers felt that it meant everybody living together amicably as one family with children, parents, grandparents and bringing up children well. During the mock session the mentors decided to start the group discussion with this activity to engage the participants in an interesting way and help them to understand the issue. The story and activity around two farmers Raju and Babu who adopted different methods of farming was shared. Saplings had been obtained for the activity and participants were asked to volunteer as the farmers. They were explained that one had to plant the rice saplings close together and another farmer had to space them out. On completion of the plantation, Mentors asked them which farmer they wished to be and why.

- Group felt that Raju was the wiser and better farmer who had planted his saplings at an equal distance from each other. His plants would receive adequate air, water and space to grow and thus his harvest would be better.
- Babu on the other hand had planted the saplings with minimum space in between, giving his plants no space to grow and flourish, hence his yield would be low.
- The spacing of rice plants was compared to birth of children. The mothers shared that having children too close together would not allow mothers to provide the children with proper care or give them due attention. One needed to watch out for the proper time /season and apply wisdom and the technique of proper spacing for both rice and birth of children.
- Giving birth too early without being mentally or physically prepared would lead to ill health of both mother and child. It is important to wait for the right age and readiness for pregnancy.



Rice planting Activity: Young Fathers Group

The Mentors introduced the two farmers in the story – Arun had planted too many saplings without spacing them and Nitai had planted them giving them adequate space. Whose yield would be better?

- Fathers agreed that Nitai's yield would be better since the plants would get enough space to grow, along with air and water. Arun would get less yield from his plantation since growth will be less.
- Fathers agree that they would learn from Nitai who was the wiser farmer, achieving higher yields.
- The Mentor also shared his views by saying that in nature there is a right time for everything including plantation of rice. If one follows the rules, then harvest will be good.
- Fathers compared the process to human activity saying that pregnancy and childbirth should occur at the right time. Spacing of children like the rice plants is important for their growth and development.

PLANNING A FAMILY

Young Mothers Group

- Group agreed that it was the correct thing to plan pregnancies but sometimes unplanned pregnancies do occur.
- It was important for the husband and parents/in-laws to be included in the discussion since many times they are the ones who pressurise couples to have children soon after getting married.
- It may not be right for a couple to have a child soon after getting married; understanding between couples, income of the husband and the household, family environment – all of these should be considered before deciding to have a child.
- Some of the women in the group felt that having a child immediately after marriage led to domestic peace since everyone gets involved in taking care of the child.
- Communication and discussion regarding family planning with husbands is important so that both can be equally involved in analysing the pros and cons.

Young Fathers Group

- The Group of young fathers agreed that Family planning was important and some of them agreed to discussing with their wives
- Fathers shared that there were many males who did not want to understand their responsibility and there were others who were ashamed or shy to talk about the topic /their problems.
- The fathers felt that spacing children too close to each other would make it difficult to bring them both up with enough care and attention.

- Unplanned births may also add to financial burdens. It may be difficult to afford good education for both simultaneously
- Parents would find it tough to manage both children; one father shared that he was facing problems in managing both children
- Sometimes there is pressure from parents and grandparents to have a child but they have to consider the age of the mother, her readiness, and financial status of the household.
- Multiple pregnancies without spacing may affect the health and nutrition status of the mother
- ASHA didi had shared information with my wife but I didn't participate in the discussion.
- Fathers shared similar stories of unexpected, unplanned pregnancies and child birth

One of the fathers admitted that they had talked to ASHA and his wife was taking OCPs. This validated the information shared by the women that Family Planning continued to be the responsibility of women. Facilitator explained that continuous use of medication may be harmful and in this case it may be better for the husband to use condoms.

During the session, Mentors shared their thoughts on what the men could do to change their attitude and level of involvement such as talking to their wives, talking to ASHA or the doctor at the health centre and adopting family planning. Mentors connected the session to good parenting and being REAL Fathers by sharing the responsibility of Family Planning.

FAMILY PLANNING METHODS

- Women and men in both the groups were aware regarding family planning methods but it was evident that there were gaps in practice. Many mentioned unplanned pregnancies. One woman from a minority community believed that it was important to space children. However, at the same time she also believed that children were a gift from Allah.
- This small village too reflected the larger picture in the state and country. The onus continues to be with the women to practice family planning and use female contraceptives. Men are either unaware or do not wish to practice family planning by using a method and pressurise their wives.
- There was an animated discussion around usage of condoms. The women were very vocal about usage and misuse of condoms as well as unhygienic disposal of the condoms in the village. They felt that children were unknowingly becoming exposed to the products since people were insensitive about proper disposal. However, it is important to note that this discussion is not enough to draw conclusions regarding actual usage of condoms.
- Young Fathers mentioned that substance abuse often led to unplanned pregnancies. This was significant since alcohol and drug abuse is rampant in

the area and is often the cause of both IPV and VAC. They also brought up the need to address this problem during the course of the program. Mentors responded by giving examples of practical events and the CINI co-facilitator also aided in the discussion.



FAMILY PLANNING COMMUNICATION

- The women agreed that there is discussion around the issue but somehow, in the final analysis it is the wives who shoulder the responsibility.
- Some husbands do practice male spacing methods but there are a lot of failures.
- Many husbands do not wish to use any method and hence avoid discussion.
- Husbands do not wish to accompany the wives for FP counselling. They don't have any responsibility.
- Sometimes there is shyness behind it. No one does it. How can I?

Young Mothers Group

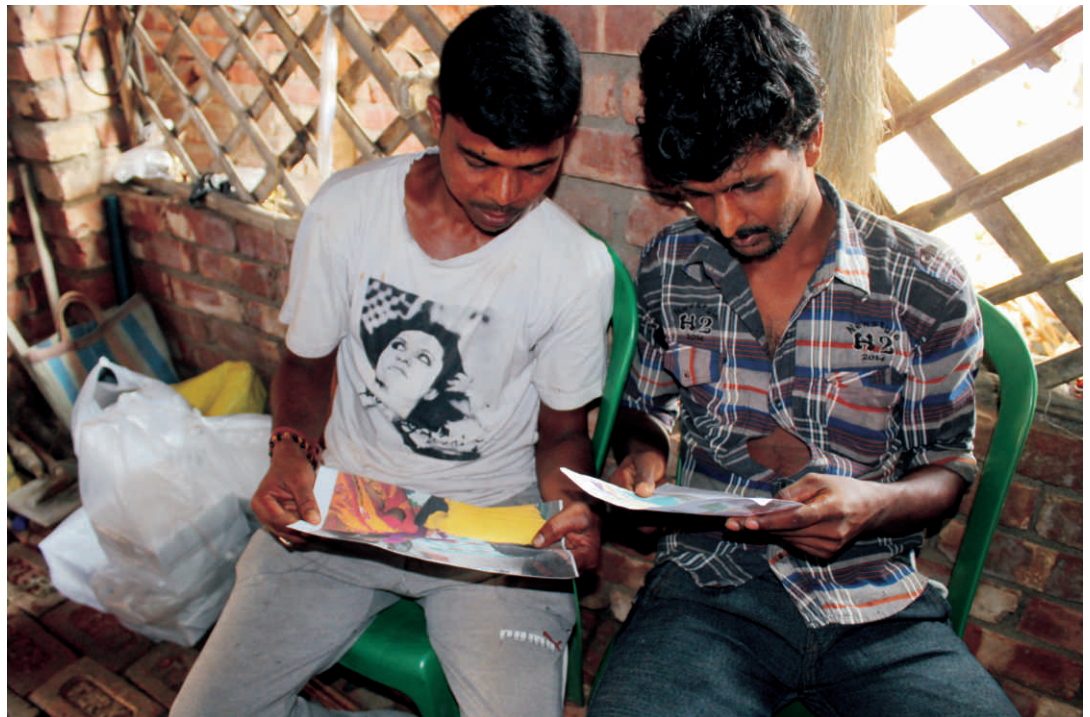
- The groups felt that this was the right visual to spread awareness regarding family planning. Both husband and wife were talking to the health worker regarding the issues and she was sharing a box of oral contraceptives.
- All three of them were discussing the best method for the couple. This is the appropriate way to approach Family Planning.
- At this point the young mothers shared that Family planning meant discussion between spouses; it meant thinking about what is the right decision; whether both are ready for a child and can give the child time and care.
- Sometimes women face a lot of problems due to taking oral contraceptives or using the Intrauterine Device (IUD). Hence it is important for the health worker

to try and convince the husband that it would be safer for him to use an FP method.

- Some women felt that discussions with the health worker were necessary since failure of contraceptive maybe due to incorrect usage.
- Women felt that the poster communicated the message of males coming forward to get involved in family planning.

The mentors ended the session by summing up the main ideas of Family Planning and informed the group about discussing the topic with their spouses. It was observed that by the end of the session, women had more clarity and understanding of the meaning of Family Planning.

Poster Session



Young Fathers Group

The poster that was shared with the men was one that showed a young mother at the health centre with ASHA didi, talking to the doctor. Reactions from the fathers group were:

- The husband is missing from the picture. It is important for him to accompany his wife to the health centre so that he knows what the ASHA didi or doctor said and whether his wife will suffer any complications from taking the OCPs. The Mentor pointed out that it was the father's responsibility too so he could also use a method such as a condom that can be used externally. Chances of damages to health are less that way.
- Both husband and wife need to visit the centre together. If they are together, then the problems will be less.
- No spouse should take the decision of family planning alone. It should be a joint decision.

Home Visits

During the home visits for Family Planning a couple to couple approach was followed. Mentor couples spoke to younger couples who did not hesitate much in sharing their thoughts despite the issue being a sensitive one. Since the home visit was conducted soon after the discussion, it was evident that they had hardly any time to discuss the issue in depth. However, they shared many thoughts regarding Family Planning as well as the program.

"This program would be more effective if we reach out to more people and involve newly married young couples. When we visit the health centre, we see many pregnant young girls. It is important to spread awareness regarding early marriage and early pregnancy."

- Couples said that they had talked about the issue, sharing the outcome of their respective discussions that were held separately.
- Most couples agreed that spacing was important and that the rice planting activity was an effective way of explaining the concept of spacing of children for their growth and well-being. They felt that a second child should be born when the first child is old enough to do simple tasks and take care of his/her daily needs.
- All couples agreed to discuss the issue of planning their family with each other and support each other while taking a decision. They also agreed to approach ASHA didi (health worker) during her home visits and seek information from or share their concerns with her.
- Couples felt that one should overcome shyness and communicate about Family Planning and the methods used. It is not a woman's responsibility alone. Fathers have to contribute from the early stages of pregnancy by accompanying their wives to the health centre and seeking information regarding her needs during pregnancy as well as Family Planning for the future. One young father gave the example that he could remind his wife to take her pills regularly if she is advised to use oral contraceptive pills.
- No preference for girl child was observed during the discussion. Many couples had girl children and were happy.
- Participating couples shared that there was need to spread awareness regarding the issue since couples had low levels of knowledge about spacing and family planning methods.
- One of the couples did not want any more children but since the mother was weak and ailing, they were practicing homeopathic treatment. However, they did agree to visit the health centre as suggested by the mentor.
- "We have two children with right planning but we have never really discussed the issue separately. Now I feel that it is important to understand each other.
- "Many couples have expressed their interest in joining the program and are willing to know and learn more. We will ask them to join the program. Maybe not everyone, but at least 80% will listen and try to change."
- "Copper T is not used in the villages. It is important to spread accurate information regarding the spacing method. I liked learning about caring for my wife, accompanying her to the health centre, and taking care of her health. No one does this in the village. Both of us are educated and we usually discuss everything."

VI. FACILITATING AND DOCUMENTING THE INITIATIVE



Documenting All Aspects of The Adaptation Process

STEP ONE: Orientation and planning of activities in the field with the Documentalist.

STEP TWO: Sharing of available resources and project reports and studies with the Documentalist for clarity of understanding and inclusion in the final process documentation report.

STEP THREE: Travelling with the team to the implementation area for the entire implementation period to record the proceedings and be present as a participant observer of the activities. This included refresher training; mock sessions, inception visits by mentors to homes of young fathers, group discussions and activities and home visits post discussions on fatherhood and family planning.

Capturing the thoughts shared by Mentors and young couples about the program; their views regarding the themes of fatherhood and family planning and what they liked about the group activities.



Still photography of major activities as visual documentation of the program by photographer (simultaneous activity)

STEP FOUR: Translating and transcribing the recorded data and presenting it as a draft report after discussions with the CINI team.

STEP FIVE: Finalising the report after incorporating feedback of the team.

STEP SIX: Incorporating the learning and feedback of the CINI team and participants as presented in this report in the resource materials developed for the further implementation of the program.

Facilitation Support By CINI Team

Although according to the guidelines, mentor couples are to be trained to conduct the discussions themselves, it was observed that the time allotted to training of the mentors was not enough for this group. Even though they were keen learners, they felt the need for the presence and support in facilitation by the CINI team. They requested at least one person to be with them while they conducted their mentoring activities. Another reason for this change was that mentors felt that initially, the presence of outsiders sharing such information would be more acceptable than someone from the community. Usually they would have to listen to comments like - "It's all very easy for you to say. It is not so easy to be a good father. Don't come here to preach," said one of the Mentor Fathers.

ADAPTATION: CINI team members were present during the Group discussions and home visits conducted by the mentors.

Taking the program to scale will require expansion of the training to include more practice sessions facilitated by CINI trainers. Also the trainers have a critical role to play in providing hand-holding support to the mentor couples, initially.

VII. IMPACT ON YOUNG COUPLES



Impact on REAL Fathers

Impact on young couples who participated in the REAL Fathers program was evident in the enthusiasm with which they participated in the discussion. Theme related and common areas of impact reflecting the beginning of a changing mind set among young fathers and mothers are presented below:

Theme – Fatherhood

- Mentor Fathers shared that it was a very unique and new thing to teach other fathers good parenting skills. They did it on an individual level but spreading knowledge and skills on parenting was very new.
- Fathers are aware and admit that children are exposed to abuse and violence in the present and need to be protected.
Both parents understand that good parenting does not just involve being able to provide material comforts. It also involves loving and caring for children.
- Young fathers have started thinking beyond gendered roles and are more open to doing activities such as bathing or feeding their children which they considered to be a mother's domain.
- The process of change has begun with younger fathers spending time with

their children. Initiating further behavior change will be easier with these fathers.

- They are keen to know more about good parenting and willing to break away from existing social norms of fatherhood.
- Older fathers felt that such a program should have been there when they were young fathers; they could have benefitted from learning parenting skills.
- Young fathers participating in the program have expressed a desire to know about family planning and the choice of methods available to them.
- Fathers in the group agreed that they have equal responsibility of being involved in planning the number and spacing of children. They are now aware of the need to understand their wives feelings, preparedness and health conditions before planning conception.
- REAL fathers have understood the need to communicate about family planning and discuss it with their wives. However, this is a sensitive issue and change will take time.
- Participants were able to overcome their sensitivity to the issue and share their own experiences of not being able to bring up their children properly since the births were not spaced out or planned properly.
- Participants were so involved in the discussion that they opened up and admitted that extensive substance misuse among the fathers is leading to non-cooperative behavior with their wives which in turn leads to low practice of modern family planning methods.
- The rice planting activity was well liked by the participants. They found it very relatable and understood the concept clearly and quickly. All participants agreed that they wanted to be the wise farmer who spaced his saplings and was successful in getting high yields.
- All of them said they learned something new. REAL fathers have started sharing their newly acquired knowledge with others, especially newly married friends.

Theme – Family Planning

"Having children close together hurts them; doesn't allow them to grow."

OVERALL AREAS OF IMPACT

- Mentors were communicative and able to conduct the discussion effectively. During the discussion, they shared their personal experiences to evoke responses from the participating fathers.
- Participants were willing to discuss their problems with the mentors in future and also expressed an eagerness to be mentors in future.
- Participants are spreading awareness about being REAL fathers. "Amra prachar korchhi, onyoder bolchi."
- Couples were eager to know about future meetings." There are many more couples who wish to join the program."
- They welcomed the continuation of the initiative in a larger format and feel that more time should have been given to discussion of the topics.
- Some of the participants also asked why such kinds of programs/meetings

"Such programs should have been conducted 15-18 years ago."

have not been conducted before 15 – 18 years.

- Community people of a nearby Gram Panchayat approached the mentors and CINI team and expressed their interest in participating in such adaptation programs in their area.
- Some of the participants wanted a further continuation of such discussion for more knowledge and betterment of their community.

LIMITATIONS AND MISSED OPPORTUNITIES

- The program was conducted within a short span of 45 days which was very challenging for the team.
- Due to time constraints, training for mentor fathers and their wives was conducted for 2 days.
- The program was conducted in the midst of a heat wave and the heat and humidity affected the energy levels of all participants. However, the family members who graciously agreed to host the group discussions provided full support.
- Young fathers were exposed to only two themes of Fatherhood and Family Planning; exposure to the other five thematic sessions could not be conducted in the limited time span.
- Although posters were used during the groups sessions and assigning of home tasks, the time span did not permit their use in a campaign mode in the community.
- The celebration component could not be conducted. However, it was found that the village conducts several community celebrations during certain times of the year and scale up efforts can utilize this to include a celebration of REAL Fathers during such times.
- Implementation of the program as a pilot will facilitate detailed documentation of other thematic sessions including observations of variation in the roles of mentor fathers and mentor mothers as they handle various sensitive issues.

VIII. MOVING AHEAD



Sharing the Experience and Learning from the Project

The Dissemination Program

A Dissemination program of the REAL Fathers Learning Lab project was organized on 14th June, 2022. It was attended by the representatives of USAID (online participation using Zoom), CINI team and other staff members, Mentor Couples from the community and the representatives of four NGOs viz. Swayam, Child Rights & You (CRY), Jabala and Nari-o-ShishuKalyan. Participants were introduced to the origin and the development of the program in Uganda by IRH and USAID and its subsequent adaptation in other places. The CINI team involved in the project presented the journey of adapting the REAL Fathers program to the context of the state of West Bengal in India. Highlights of the presentations included information from the Formative Research, the Adaptation workshop, translation and adaptation of resource material and the experiential learning from each step of the implementation in the Falta area.

"It will be good if this program spreads to other nearby villages, not only ours. Then more people will come forward to participate and we will be able to reach out to young fathers on a larger scale".

Feedback from the mentor couples and NGO representatives was a significant part of the meeting. The mentor fathers said that they had learned much from participating in this program and were trying to share the knowledge and skills with others. Participants from other NGOs felt that the concept was indeed very unique and would help to bring about changes not only regarding positive parenting, but also gender and social norms and family planning.

Suggested strategies for the next phase included:

- Emphasizing the Couple-to-Couple approach to make the program more acceptable while implementing on a larger scale in the Indian context
- Focusing on both male and female mentors (as a couple) from the community to include both male and female perspectives towards gender and social norms, family planning, parenting and caring for their children
- Sensitizing all stakeholders such as PRI members, ASHA (health workers) and Anganwadi (ICDS) service providers, working closely with the community, to facilitate their support for the initiative
- Increasing the number of mentor training sessions and group discussions among young fathers
- Sensitizing elderly members of the family such as fathers/mothers –in-law, especially on the topic of family planning



Scaling Up the REAL Fathers Initiative

The Way Forward (REAL Fathers Initiative)

Adaptation of REAL Fathers as a pilot on a small scale at the local level in Falta, was a learning experience, not only for the participants but also for the CINI team. Although many points of adaptation had come up during the workshop, each step of the actual implementation presented a challenge for the team and one had to find immediate solutions. For example, after the first session at the ICDS (Integrated Child Development Services) Scheme centre, it was found that the government functionaries had objected to conducting the meetings there. Hence, the venue had to be shifted to the home of one young father. Thus, whether it was program logistics, the mentoring process or the language used in the module, changes had to be made to execute the program successfully.

Thus far, the pilot initiative conducted by CINI, even with its constraints of time and limited reach, has been a positive and successful effort. Lessons learned from program indicated the issues to be considered while planning the next phase of taking the initiative to scale in other districts of West Bengal including the non-CINI intervention areas. Subsequently, after studying the impact one could collaborate with Government departments and other NGO/CBO partners to intervene in other states.

Planning for successful scale up intervention includes:

INCLUSION AND SENSITISATION OF STAKEHOLDERS

- Sharing the process documentation of pilot study with donor organisations to explain the need for - a) increasing the implementation period enabling inclusion of all topics and b) financially supporting the scaling of this project.
- Launching the program officially, bringing all stakeholders on board in a larger sensitisation workshop in the locality
- Including other stakeholders during the community mobilisation process such as school teachers and government functionaries of the health department such as ASHA and Anwesha clinic counsellor (in West Bengal)
- Conducting community conversations to mobilise the community and conducting longer training sessions for mentors with more practice sessions and inception visits in case of non-CINI intervention areas

LOGISTICS

- Increasing the time span of the program to cover 9-12 months to achieve measurable impact on attitude and behaviour change of Fathers; seven months to be use for implementation of 7 modules and about 2-3 months for training and mock sessions of the mentors.
- Ensuring the logistics such as a venue for discussions with availability of water, electricity, and enough space to seat a large group (space in a school building

or the ICDS centre with permission from higher authorities)

- Adjusting the timing of discussions and home visits around the availability of participating fathers since many of them are migrant workers. Besides, many have to give up a day of earning for each session held during the day.

REACH AND FREQUENCY

- Increasing reach by involving larger number of mentors and young fathers and developing pictorial training tools to support them in communicating the messages; identifying and involving newly married couples
- Inclusion of community volunteers as co-facilitators to support the Mentors during group discussions and home visits
- Bringing elders - grandfathers and grandmothers (mother – in-laws) into the community conversations around the topics since in India, they are equally a part of the 'decision-making' process regarding childbearing and perpetuate unequal gender and social norms in many ways.

TRAINING AND COMMUNICATION

- Including the other 5 topics of How to be a REAL Father, Family Dreams, Loving My Family, Communications and Parenting along with Fatherhood & Family Planning so that all aspects of the gender transformative process are discussed
- Adding a section on 'mentoring' and communication to the curriculum as well as gender and social norms related to parenting and family planning (men's reluctance to practice family planning was evident during the sessions; the strong reactions of the wives also supported the norm of family planning continuing to be a woman's responsibility)
- Developing a training/communication package with guidelines on REAL Fathers initiative to support implementation in other states
- Involving more trainers and once again arranging for an adaptation meeting with the new members and also to check with their availability as we spoke of migrating workers
- Using a couple to couple approach since it was evident that the wives were effectively supporting their mentor husbands. Also women as wives and mothers have to be included in the gender transformative process in Indian society.

ENDNOTES

- I. <https://www.comminit.com/policy-blogs/content/real-fathers-lessons-scaling-violence-prevention-program>. Accessed on 19/04/22
- ii. <https://earlychildhoodmatters.online/2019/loving-fathers-thriving-children-opportunities-for-scaling-gender-transformative-approaches>. Accessed on 12/05/22
- iii. <https://timesofindia.indiatimes.com/india/west-bengal-tops-chart-in-domestic-violence/articleshow/49928756.cms#>. Accessed on 12/05/22
- iv. <https://ncrb.gov.in/en/Crime-in-India-2020>
- v. groundreport.in/10-indian-states-with-most-domestic-violence-cases/
- vi. REAL Fathers India: Findings from Formative Research. December 2021. Washington, D.C.: Institute for Reproductive Health, Georgetown University for the U.S. Agency for International Development (USAID)
- vii. Ibid., 5-8
- viii. The Integrated Child Development Services (ICDS) Scheme is one of the flagship programmes of the Government of India and represents one of the world's largest and unique programmes for early childhood care and development.



REAL FATHERS INITIATIVE in INDIA

Adaptation of the program
to the context of West Bengal



Child in Need Institute (CINI)

Daulatpur, P.O. Pailan, Via Joka, South 24 Parganas
West Bengal, 700104, India

Contact Number: +91 33 2497 8641/ 84204 58926

e-mail: cini@cinindia.org

Website: <http://www.cini-india.org>

TEENLINE Toll free number: 18001215323

(Monday to Friday 9:30 am to 5:30 pm)

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