



Pyaw Gya Meh – Let's talk

Transforming gendered
power relations for
peace and social cohesion

A qualitative assessment



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Cover: A Burmese family of three (man, woman & child on shoulders) walk home after shopping along the Chindwin River in northwestern Myanmar (Burma)

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A qualitative assessment

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Abbreviations

AA	Arakan army
CDM	Civil disobedience movement
DV	Domestic violence
FGD	Focus group discussion
GBV	Gender-based violence
IPV	Intimate partner violence
KII	Key informant interview
LGBTIQ+	Lesbian, gay, bisexual, trans, intersex, queer and other
MMK	Myanmar kyat
MHPSS	Mental health and psychosocial support services
NGO	Non-governmental organisation
PTE	Phan Tee Eain
SOGIESC	Sexual orientations, gender identities and expressions and sex characteristics
SRH	Sexual and reproductive health
YCT	Yaung Chi Thit

Executive summary

The Pyaw Gya Meh (Let's Talk) project was implemented by International Alert together with local partners, Phan Tee Eain (PTE) and Yaung Chi Thit (YCT) over 18 months from June 2020 to December 2021.

The project goals were to increase respect for women's rights, diverse masculinities and equality at the grassroots level; complement the many women-focused activities implemented by women's rights organisations across Myanmar; and contribute to the work of the gender equality, social cohesion and peacebuilding sectors in Myanmar by providing new insights and experiences of working with transformative masculinities.

In 2012 International Alert began working in Myanmar with local organisations promoting gender equality, highlighting the rights of women and girls, and preventing gender-based violence (GBV). International Alert's work engages both women and men of different ages and focuses on transforming expectations of masculinity and changing gender norms and behaviours.

The Pyaw Gya Meh project was initially planned to be implemented in Yangon, Bago Region and Rakhine State. However, due to Covid-19 restrictions and security concerns following the political crisis unfolding since February 2021, implementation in Bago Region had to be suspended. The final implementation sites were Dawbon and Mingaladon Townships in Yangon and Thinganet and Pyar Lae Chaung Townships in Rakhine State.

A total of 134 people, 78 women (48 in Rakhine State, 30 in Yangon) and 56 men participated (38 in Rakhine State and 18 in Yangon) participated in the Pyaw Gya Meh project.

Participants in the communities in Rakhine State were Buddhist Rakhine majority (Pyar Lae Chaung Township) and Kaman Muslim majority (Thinganet Township), while the majority of the Yangon participants were Buddhist Bamar. Among the younger male cohort of the Yangon participants was a comparatively substantial number (8) of men of diverse sexual orientation and gender identity.

Intervention approaches were built around ways to promote more gender-equitable understandings and practices of masculinities, as well as more egalitarian and inclusive family and community dynamics and communication, including more male participation in care work. These approaches sought to reduce GBV and communal conflicts, decrease horizontal conflict and discrimination, and reduce discriminatory attitudes and practices, including those against women, LGBTIQ+ persons, ethnic and religious minorities and persons living with disabilities. Overall, the aim was to promote positive individual and group identities through positive, inclusive actions, rather than actions which oppose "the other" or take superior positions.

The design of Pyaw Gya Meh was based partly on the Zindagii Shoista (Living with Dignity) project implemented successfully by International Alert in Tajikistan. The project focused on changing gender norms, balancing unequal power dynamics and improving interpersonal communication skills. In Myanmar, the Pyaw Gya Meh project added sessions on LGBTIQ+, people living with disabilities and breaking down taboos around menstruation and sexual and reproductive health (SRH). These sessions were delivered to both men and women. Two additional exercises explored everyday peace indicators and charted how women and men use the 24 hours of a day.

The Pyaw Gya Meh project was implemented under extreme conditions. Throughout the project, Covid-19 was raging in the country, with the fourth wave hitting the country especially hard during June to August, 2021. At

the beginning of this project, in June 2020, stringent lockdown measures were imposed in Yangon and Rakhine State. The impacts of the coronavirus pandemic restrictions were further exacerbated by the political crisis following the coup in February 2021. The work was physically dangerous and practically challenging with frequent internet and mobile phone network blackouts and severe cash flow interruptions as the banking system was crippled by strikes.

This evaluation, conducted soon after project completion, shows the Meh Gya Meh project was largely successful in meeting the project aims, at least in the short-term. The participants reported that the project was a useful and relevant intervention. It is difficult to gauge the extent to which the project was able to achieve real shifts in participant fundamental attitudes, particularly as there is likely a degree of social desirability bias in some respondents' answers. Nonetheless, based on the interviews, the intervention clearly gave participants important life skills and got people thinking about the issues around menstrual health, LGBTIQ+ and communication.

The project facilitators were an important factor in the project's success, according to the evaluation respondents, the project participants, who praised the facilitators for the ways they treated people with respect, listened and explained issues clearly. The respondents appreciated that the sessions were contextualised and relatable. The roleplays and other interactive elements of the project were highly appreciated and should be a central part of future interventions.

The innovations added to the Pyaw Gya Meh curriculum succeeded, to varying degrees. Respondents reported that the menstrual health and SRH sessions were both important and impactful, and should be retained. The LGBTIQ+ sessions, especially if and when LGBTIQ+ participants themselves can share their own experiences, were also a very positive addition to the curriculum.

While the project aimed to engage people living with disabilities, this was not achieved, despite outreach to several organisations working with people living with disabilities. Some of the barriers faced included challenges with transportation and accessibility, as well as insufficient funds for sign language interpretation.

Future iterations of this project should consider the time period for the intervention implementation. This could be lengthened to allow more time for covering the wide range of topics and more spacing between the sessions. Alternatively, there could be fewer topics for the shorter intervention period. An economic empowerment component would help address the key structural challenges faced by communities and allow for longer-term engagement with the beneficiaries and is therefore also recommended for inclusion in future interventions.

1. Introduction

Since 2012, International Alert has been working closely with local partners in Myanmar to promote gender equality in the country, in particular promoting the rights of women and girls as well as of persons of diverse sexual orientations, gender identities and expressions and sex characteristics (SOGIESC).¹

The work in Myanmar focuses on transforming masculinities expectations, researching the interplay of conflict and masculinities in different areas of the country,² examining masculinities and disabilities in the contexts of armed conflict and displacement,³ as well as targeting men in the efforts to reduce gender-based violence (GBV) during the Covid-19 pandemic.⁴

International Alert has been working in other countries implementing approaches aimed at transforming gender relations and norms with the aim of reducing GBV. One of the most successful interventions was the Zindagii Shoista (Living with Dignity) project in Tajikistan, which effectively and sustainably reduced GBV in the target communities and, as a positive unintended impact, also increased social cohesion in the communities.⁵ The design of the Pyaw Gya Meh (Let's talk) project was based on and adapted from the Zindagii Shoista project.

This report gives the background to the Pyaw Gya Meh project, provides a summary of the research questions, methodology and key findings from the evaluation research and concludes with a discussion and recommendations.

2. Pyaw Gya Meh background

The Pyaw Gya Meh project was implemented in Myanmar over 18 months from June 2020 to December 2021⁶ by International Alert, in partnership with two local organisations, Phan Tee Eain (PTE) and Yaung Chi Thit (YCT).

The project was initially planned to be implemented in Yangon, Bago Region and Rakhine State. However, due to Covid-19 restrictions and security concerns following the political crisis unfolding since February 1, 2021, the implementation in Bago had to be suspended. The final implementation sites were Dawbon and Mingaladon Townships in Yangon, and Thinganet and Pyar Lae Chaung Townships in Rakhine State. In total, 78 women (48

1 Persons of diverse SOGIESC are also often referred to using the LGBTIQ+ (lesbian, gay, bisexual, trans, intersex, queer and other) acronym or variations thereof

2 J. Naujoks and M. Thandar Ko, *Behind the masks: Masculinities, gender, peace and security in Myanmar*, Yangon: International Alert, 2018

3 D. Seng Lawn and J. Naujoks, *Conflict impacts on gender and masculinities expectations on people with disabilities in Kachin State*, Myitkyina/Yangon: Kachinland Research Centre and International Alert, 2018

4 Myanmar Covid-19 family violence support, International Alert, <https://www.international-alert.org/myanmar-covid-19-family-violence-support-english> and https://www.facebook.com/thinbarlutemalae?_rdc=1&_rdi

5 Mastonshoeva, Subhiya, Shahribonu Shonasimova, Parvina Gulyamova, Rachel Jewkes, Nwabisa Shai, Esnat Chirwa and Henri Myrntinen (2019). *Zindagii Shoista/Living With Dignity - Mixed-methods evaluation of intervention to prevent violence against women in Tajikistan*. London/Dushanbe: International Alert.

6 The curriculum is available upon request from International Alert Myanmar

in Rakhine, 30 in Yangon) and 56 men participated (38 in Rakhine and 18 in Yangon).

The communities in Rakhine were Buddhist Rakhine majority (Pyar Lae Chaung Township) and Kaman Muslim majority (Thinganet Township), while the majority of the Yangon participants were Buddhist Bamar. There was a substantial number of diverse SOGIESC men among the younger male cohort of the Yangon participants.⁷ The project also included beneficiaries of other ethno-religious backgrounds, including Hindu and Christian, Mro, Khami, Thet, Kayin, Mon, Chin and others.

Although the Pyaw Gya Meh project aimed to engage people living with disabilities, this was not achieved, despite outreach to several organisations working with people living with disabilities. The barriers included challenges to arrange transportation and accessibility, and insufficient funds for sign language interpretation.

The project aimed to build increased respect for women's rights, diverse masculinities and equality at the grassroots level and to complement the many women-focused activities by women's rights organisations across Myanmar. It also aimed to contribute more broadly to the work of the gender equality, social cohesion and peacebuilding sectors in Myanmar, by providing new insights and experiences in working with transformative masculinities, and disseminating these to national and international actors.

The approach used in the intervention sought to promote more gender-equitable understandings and practices of masculinities, more egalitarian and inclusive family and community dynamics and communication (including more male participation in care work). It also sought to reduce GBV and communal conflicts, decrease horizontal conflict and discrimination, as well as reduce discriminatory attitudes and practices, including against women, persons of diverse SOGIESC, ethnic and religious minorities and persons living with disabilities. The aim was to support positive individual and group identities defined through positive, inclusive action rather than identities defined in opposition or superiority to "others".

The Pyaw Gya Meh project was implemented under extremely challenging conditions. Throughout the project, Covid-19 was raging in the country, with the fourth wave hitting the country especially hard in June-August 2021. However, project implementation was already hampered at the beginning of the project, in June 2020, due to stringent lockdown measures in both Yangon and Rakhine State. The impacts of the pandemic and subsequent restrictions were further exacerbated by the political crisis, which made work physically dangerous and practically challenging, given frequent internet and mobile phone network blackouts and severe cash flow interruptions.

These circumstances inevitably affected the project implementation, especially in Yangon, where the participant dropout rate was a concern. The most challenging in this respect was the group of older men in Mingaladon Township where the intervention had to be restarted as all the original participants left the area due to a lack of work and security concerns amidst the escalating violence. In Dawbon Township, the retention of older women was difficult due to the security concerns which displaced some of the women. The remaining older women were able to mobilise their friends, families and neighbours to find replacement project participants. Several participants missed sessions due to security fears, especially the younger men of diverse SOGIESC who feared being targeted at security checkpoints. Other challenges experienced in Mingaladon and Dawbon Townships relate to the project venues. In Mingaladon, the trainings were organised in a monastery where the head monk was reluctant to allow new participants to join the trainings. In Dawbon, the original hotel venue could not be used due to a missing Ministry of Health certificate. An alternative hotel was found but this was located far from the participants.

7 These included three men openly identifying as gay and five cross-dressing men/trans women

In Rakhine State, where there had been few prior community interventions of any kind, there were fewer challenges around participation. Village leaders were eager to support their community's development and encouraged the villagers to attend the dialogue meetings.

Adapting Stepping Stones, Zindagii Shoista and Pyaw Gya Meh

The approach used in the Pyaw Gya Meh project draws on the Stepping Stones model, originally an HIV/AIDS intervention programme in Uganda which has subsequently been adapted and implemented into a variety of contexts, including preventing GBV.

In Tajikistan, International Alert successfully implemented an adapted version of Stepping Stones called Zindagii Shoista (Living with Dignity)⁸ which included the Stepping Stones components on changing gender norms and economic empowerment. Rolled out over a period of 15 months, that intervention was able to reduce GBV by approximately 50% and severe intimate partner violence (IPV) by an even larger factor, thereby greatly improving family dynamics, markedly reducing financial and food insecurity, and leading to much higher levels of life satisfaction and mental wellbeing. The follow-up evaluation conducted 15 months after the end of the intervention revealed that the project gains had largely been sustained and that the intervention had also achieved the unexpected positive impact of increasing community social cohesion.⁹

The Pyaw Gya Meh project was modelled on the first part of Zindagii Shoista, which focuses on changing gender norms, balancing unequal power dynamics and improving interpersonal communication skills. In addition, the Myanmar project included sessions on diverse SOGIESC, people living with disabilities, as well as breaking down taboos around menstruation and sexual and reproductive health (SRH) issues. These sessions were delivered to both men and women. Two further exercises were also added to the Myanmar intervention; one on everyday peace indicators¹⁰ and another charting how women and men use the 24 hours in their days. These extra issues and exercises were not part of Zindagii Shoista and, to the best of our knowledge, have also not been included in Stepping Stones interventions or adaptations anywhere else, thus being unique Myanmar contributions and innovations.

The intervention in Myanmar consisted of 12 sessions. The first six sessions contained more information and the latter six sessions were more interactive. According to the implementing partners, the participants found the interactive sessions far more enjoyable. As in the Tajikistan intervention, the women and men were subdivided into discussion groups of older and younger men and women, in order to give more space to the younger women who might otherwise be expected to defer to the opinions of the older participants.

The Myanmar intervention was also structured in such a way that it created safe spaces for members of the same sex, of similar age groups but of different backgrounds, to be able to discuss the issues. There were also mixed sessions that crossed age and gender boundaries. These sessions were also designed to foster reflection on the privileges of the older male group and to strengthen the confidence and self-expression of the

8 Mastonshoeva et al, 2019

9 S. Mastonshoeva et al, *Evaluation of Zindagii Shoista (Living with Dignity), an intervention to prevent violence against women in Tajikistan: impact after 30 months*. Pretoria: South African Medical Research Council, 2020

10 This was seen by the implementing partners as the most challenging session, but received little mention by the interviewed beneficiaries. Everyday peace indicators, <https://www.everydaypeaceindicators.org/>



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Mingalardon young women's group working through an exercise designed to encourage discussion around reducing placing blame on single mothers

younger women who, in the current gendered structures, have not been encouraged to share their views and concerns in public. The two-hour sessions, usually in the afternoons, sometimes lasted two-and-a-half hours when participants desired further discussion.

In Rakhine State, the Pyaw Gya Meh intervention developed materials with more graphics and less text, in response to that state's low literacy levels.

Donor restrictions meant the Pyaw Gya Meh intervention did not include the economic empowerment component which featured in the Zindagii Shoista project. The original Pyaw Gya Meh project concept also proposed exchange visits between communities, as a way of giving back to the participants for their engagement with the project. However, these visits were not possible due to Covid-19 and security concerns.

The high dropout rate in some Yangon groups, especially among male participants in Mingaladon Township, meant that late-joining replacement participants experienced a more compressed "catch-up" version of the programme, to cover all the topics.

Pyaw Gya Meh recruited participants through a variety of pathways, especially in Yangon, and did not necessarily include members of the same family or couples, unlike Zindagii Shoista, which recruited participants through family units.

For each session, participants received a small transportation compensation and refreshments. Participants in Mingaladon Township received 5000 Myanmar kyat (MMK) or approximately 3 US dollars in compensation for travel costs. Dawbon Township participants were paid 7000 MMK or approximately 4 US dollars, slightly more due to longer distances. Participants in Rakhine State received 3000 MMK or approximately 1.70 US dollars.

Monitoring and evaluating the Pyaw Gya Meh project used questions about participant attitudes to domestic and intimate partner violence (DV/IPV). Data about the prevalence of different forms of GBV in the target communities was not collected. The project data that was gathered is a snapshot taken close to the end of the

intervention, therefore only limited conclusions can be drawn about the long-term and sustainable impacts, in terms of participant attitudes and behaviours. Furthermore, the sample size is not large enough to be able to extrapolate and draw broader conclusions about gender relations and attitudes in either the target communities or Myanmar society more broadly.

The aim of this evaluation report is to share the lessons learnt in Myanmar about the value of the gender-transformative approach, as modelled in the Stepping Stones and Zindagii Shoista projects.

Gender norm change in literature

There is a significant body of global evidence on gender-transformative approaches to GBV prevention and the promotion of gender equality through engaging with women and men in low- and middle-income countries, gathered from programmes such as SASA!, Stepping Stones and others.¹¹

The key findings from this literature are, as follows:

- The most promising approaches involve long-term engagement on norms change, tailored to particular contexts, not only focusing on the root causes of GBV but also working to reduce the other factors that may contribute to GBV, such as economic stress, structural constraints and negative emotional/psychological factors, e.g. anger management.
- Positive messaging around GBV prevention, such as offering positive masculinity role models and practical advice, is helpful in engaging men and boys around the issues and balances the negative messaging, e.g. that violence is not condoned.
- Emphasising male agency, putting men in the centre as agents of change, is important, but there is also the risk of overlooking women's concerns and needs, and men may benefit more from these programmes than women.
- Programmes must engage with both women and men, and ideally, promote discussions on diverse SOGIESC, and hold men accountable, to ensure there is real change.
- Engage seriously and over the long term with potential resistance to change and its drivers.

The most successful approaches thus are explicitly gender-transformational, engage with both women and men, take into account the relational nature of gender, are contextualised and participatory, and enhance critical reflection.

In the light of these international studies, this evaluation finds that the Pyaw Gya Meh project meets most of these criteria for success. It could potentially, under different circumstances and with more funding, have

¹¹ These include S. Dworkin et al, *The promises and limitations of gender-transformative health programming with men: critical reflections from the field*, *Culture, Health & Sexuality*, 17 (2), 2015, pp. 128-143; M. Flood, *Work with men to end violence against women: a critical stocktake*, *Culture, Health & Sexuality*, 14 (2), 2015, pp. 159-176; E. Fulu and L. Heise, *State of the field of research on violence against women and girls - What works to prevent violence against women and girls evidence reviews*, Pretoria/London: SAMRC/ DfID, 2015; A. Gibbs et al, *Constructing, reproducing and challenging masculinities in a participatory intervention in urban informal settlements in South Africa*, *Culture, Health & Sexuality*, 22 (5), 2020, pp. 535-550; A. Kerr-Wilson et al, *A rigorous global evidence review of interventions to prevent violence against women and girls*, What works to prevent violence against women and girls programme, Pretoria, 2020; S. Namy et al, *Changing what it means to 'become a man': participants' reflections on a school-based programme to redefine masculinity in the Balkans*, *Culture, Health & Sexuality*, 17 (2), 2015, pp. 206-222; R. S. Pierotti, M. Lake and C. Lewis, *Equality on his terms: Doing and undoing gender through men's discussion groups*, *Gender & Society*, 32 (4), 2018, pp. 540-562; K. Ratele, *Working through resistance in engaging boys and men towards gender equality and progressive masculinities*, *Culture, Health & Sexuality*, 17 (2), 2015, pp. 144-158; UN Women, *Working with men and boys for gender equality: State of play and future directions*, Policy Brief 23, 2021

been further enhanced by implementing the project over a longer period of time and including an economic empowerment component.

3. Evaluation questions and research

The key evaluation questions outlined in the Terms of Reference are, as follows:

- How relevant is the Stepping Stones model to transforming masculinities expectations in Myanmar?
- What are the community-level impacts of this project in Yangon and Rakhine?
- What are the lessons learnt in implementing this project for other gender equality/GBV prevention-focused actors in Myanmar?

These questions were used as a basis for the interview guide which is attached in the Annex.

The process of this evaluation has involved analysis of Pyaw Gya Meh project data, participation in outcome harvesting workshops, a review of the relevant background literature, interviews with key project implementers, and semi-structured interviews and focus group discussions (FGDs) with 29 beneficiaries in Yangon and Rakhine State. The beneficiary interviews and FGDs were conducted in Bamar and Rakhine languages, remotely by phone due to Covid-19 restrictions and security concerns.

The Pyaw Gya Meh project data was gathered and analysed to investigate to what degree there were similarities or differences between respondents of different genders including diverse SOGIESC, different age groups, different ethno-religious backgrounds and those residing in urban or rural settings.

There is a risk of social desirability bias; that some beneficiaries' answers may be overly positive in terms of how much they had changed their attitudes and practices for the better as a result of the intervention. However, during the interviews many respondents reflected openly on their past actions and attitudes, at length and in depth, so we do believe their answers were sincere. Our confidence in the truthfulness of their answers was further strengthened by some quite frank admissions by respondents of how they have been trying to change their behaviours but have not always succeeded.

There is also a risk of selection bias in the sample; that the beneficiaries who participated for the full length of the intervention, in spite of practical and security challenges, and who were furthermore willing to be interviewed for this evaluation, were arguably the people most likely to agree with the intervention's aims. Nonetheless, given that we were able to interview a significant number of the project beneficiaries and that their responses were not contradictory and were in line with the quantitative monitoring and evaluation data, we are confident of the findings.

A more fundamental form of selection bias common to this type of work on shifting gender norms is that the people who are more willing to participate in and continue with such an intervention in the first place tend to be

the people who are more open to change. Nevertheless, these initial engagements with people open to change can help to build the basis for broader societal change.

4. Evaluation findings

Across the board, the participants in the Pyaw Gya Meh intervention interviewed for this evaluation consistently saw the intervention as a positive contribution to their lives.

The main criticisms of the project, mentioned by respondents and discussed further below, related to difficulties understanding terminology, the breadth of issues and logistical challenges caused by Covid-19 counter-measures and the political crisis.

Despite these challenges, respondents felt that the intervention had been relevant and had pushed them to think differently about issues. Based on the interviews and FGDs, this was most evident in terms of increased self reflection on how they interacted with family members, as well as in questioning previous attitudes towards persons of diverse SOGIESC and, to a lesser extent, people living with disabilities.

For many of the older participants, the sessions on communication in the family and DV/IPV prompted moments of introspection. They reported that previously they had not often reflected on the impacts that their words and actions might have on family members, nor seen certain actions as abusive. The discussions on menstruation and SRH were seen by many, both women and men, as being completely new information. The impacts were somewhat different for the various categories of participants, as explored further below.

This section on the evaluation findings covers participant reflections on personal change, participant changes around notions of male superiority/female inferiority especially with respect to menstrual health, shifts in gender relations and changes in perceptions of persons of diverse SOGIESC. Finally, it discusses the approaches which seemed to resonate most with participants and the differences between the target beneficiaries.

Personal change

Many participants highlighted that the interpersonal communication skills training, including using 'I statements' to express emotions, helped them to improve their relationships at work and in the family. This was especially reflected among the younger participants in Yangon, and to a lesser extent among participants in Rakhine State. The differences are possibly due to the diverse lifestyles; the more individualistic, urban lifestyles of the young Yangon participants compared to the more rural, community-oriented lifestyles of the participants in Rakhine State.

"The biggest change I have found from the training is in my relationship with my colleague. Our relationship used to be very sour. Since I started using the 'I statements' to share my frustrations and communicate my feelings, our relationship has improved significantly." –Young man, Yangon

“My relationship with my dad has improved dramatically. Our rooms are next to each other, yet we rarely spoke to one another. From this training, I’m using the tips to mend my broken relationship. It has slightly improved. We have started talking to each other.” –Young man, Yangon

Several respondents, particularly those in couple relationships or with children, stressed how the sessions on anger management had helped them, at least partially.

“My children say that there has been a slight improvement in terms of my patience and anger management. I am also aware of the improvement. I am more patient and more understanding towards other people.” –Young woman, Yangon

“The domestic violence session opened my eyes. It made me reflect on my behaviour. Now that I am careful in my reactions with my wife, I have found that she seems happier with me. She is also more attentive to my mother. Before, we used to quarrel a lot, we didn't get along.” –Older man, Yangon

“The sessions on domestic violence and violence in the community were memorable to me. They made me think about my past actions. Because we were not doing well economically, there were times when I would take out my stress on my wives and family members. That’s why I was interested to learn more about peace within the family.” –Older man, Rakhine State

Participant experiences: Improved communication in the family

W is a participant from the group of younger women in Mingaladon Township:

“I used to be quiet. I didn’t engage much with my friends because I didn’t have the confidence and was afraid that I might say the wrong things. After attending this meeting, I gained confidence and am now more engaged with my friends”.

W had a strained relationship with her family:

“I never saw or thought about my family positively. Whatever they said and did, I always thought of them negatively. But now I understand them better and can see them positively. I can understand my siblings and don’t try to fight them as an elder sister. I try not to control and dominate the conversation. I let my siblings talk about their feelings and thoughts, listen to them more, pay them more attention.”

She talked with her father, who used to be financially abusive of her mother, but has since changed his ways. Her communication with her mother has improved as well:

“I used to like pointing out to my mother that she was wrong, whenever she made mistakes. She would never accept her mistakes. So now, I wait until her anger calms down and I explain to her why something is wrong, referring to what I learned from the meeting. My mother has started accepting what I tell her. By doing this little by little, my mother has started changing her behaviour with us and now we can talk openly like friends and share our feelings and thoughts.”

Some respondents also claimed less perpetration of violence in the domestic sphere.

"I used to beat my teenage son because we didn't get along. I was negligent about his puberty changes and forced him to do things out of my ego. I regret my past behaviours." –Older man, Rakhine

"I have a daughter and I'm often harsh towards her. Since the end of the training, I don't beat my daughter anymore. I try to contain my anger, although the change is not a 100%." –Older man, Yangon

For some participants, past experiences of being exposed to domestic violence were part of the motivation to join the programme.

"I was very, very enthusiastic to learn about domestic violence. As a person who has experience of growing up in an abusive home, I am so invested in this issue. Our home was poor, my father had alcohol abuse issues and he was so violent." –Older man, Yangon

The bystander intervention sessions encouraged participants to step in to stop any violence that they witnessed.

"There is a family near my house. Their home is always violent because the father is an alcoholic and one of the sons is a troubled teenager. One day, the violence was greater than usual and the teenage son became aggressive. He attempted to hit his father. My old self couldn't care less about the violence. However, I couldn't stand still that time and interfered to stop the fight. This was my biggest change." –Young man, Rakhine

"To be honest, we were very nosy when families or couples quarrelled in the community. We would pry into people's private lives. However, this project has brought about some good changes with regards to this matter. We are now more interested in preventing domestic violence in the community." –Young woman, Rakhine

The sessions also increased some participants' awareness of harassment.

"The violence spectrum is the one thing that caught my attention. Honestly, we did not feel that teasing the girls or making jokes in front of them could be seen as harassment. This is the first time we have learned this. Very eye-opening indeed." –Older man, Rakhine

"We learned how to respect the other gender. In the past, we used to tease the girls, for fun. We no longer do this because we now realise it is inappropriate." –Younger man, Rakhine

Respondents were also open about the difficulties they faced in changing their attitudes and behaviours.

"It is still hard for me to apply anger management. I react too quickly to the problem. I am aware of my short temper. I am still trying. My relationship in the family has improved." –Older woman, Yangon

"I am not yet comfortable dealing with LGBT people. Although my understanding has improved, I don't know how I will interact with them in real life." –Younger man, Yangon

"I have found that in general my relationships with my family members have improved. I try to contain my emotions and anger, although it's not 100%. I would say it's a 30% change in my attitude and behaviour." –Young woman, Yangon

The older urban women and younger rural women, in particular, noted how participation in the intervention had expanded their social circles, which are usually more limited than those of men. The intervention was also seen as a relief from the combined stress factors of Covid-19 and the political crisis that were impacting their lives

“We housewives are stressed out too, though we don’t work outside the house. In the trainings, we could share our feelings and ideas. We could make more friends and find comfort during the two hours together. It relieved our stress.” –Older woman, Yangon

“We women spend most of our time at home. We wanted to get involved in social activities, so we joined this training.” –Younger woman, Rakhine

Several older men also testified to drinking less – or giving up alcohol altogether – after the intervention, mostly in order to help with anger management issues.¹²

“I used to drink alcohol all day, regardless of the time. I didn’t have any peaceful days because of my alcohol abuse. I always quarrelled with my family members because of it. Since I joined the training, I kept thinking about my relationships with family members and about what went wrong. The dialogue gave me insights into ways to unlock peace inside me. So, I have given up drinking. Isn’t that a positive development?” –Older man, Rakhine

This particular case of personal change was corroborated by several other participants.

Shifting norms around gendered superiority/inferiority

One session which led to strong, mostly positive reactions across genders and age groups in both Rakhine State and Yangon, discussed the taboo topics of menstrual health and SRH issues. In Myanmar, there are widespread deeply-entrenched myths about menstruation; that menstruating women are ‘dirty’ and that menstrual blood has the potential to cause spiritual damage or reduce ‘hpon’, which is the concept of masculine power in Myanmar. These myths are one way in which the assumptions around ‘male superiority’ and ‘female inferiority’ get anchored in people’s minds and reflected in everyday social practices. Scientific and SRH-based discussions on these issues are rare.

“The myths and taboos around menstrual blood... We had a hard time to unlearn some of these beliefs. Our public life is very limited when we have our periods. We have been taught not to do certain things because we are “dirty” at that time. When the facilitators explained the menstrual cycle scientifically, we felt so enlightened and relieved to learn about the importance of menstruation, for future human offspring.” –Young woman, Rakhine State

“The menstrual health discussions were also very good. My daughter had just had her first period so I could apply the knowledge from the training. When we were growing up, no one told us about these things. I can also apply the listening skills we learned in my marriage. They are all very applicable.” –Young woman, Yangon

¹² These changes were confirmed by others in the community

“The topic of menstrual health was shocking for us. Even a married woman like me has never heard this discussed before...We have a small, private shop and some female customers are shy about buying the sanitary pads. Now I tell them that there is no need to be ashamed about menstrual blood and that they don't need to hide the pads to avoid being seen... Regarding pregnancy, our society blames the woman for the inability to conceive children. Now we realise that the partner of either sex can be responsible. Women shouldn't be burdened with the blame. I told my father about this. We learned so many useful things. This is new for us. We believed that menstrual blood was dirty, but we realise from the dialogue that this is wrong. We women are not inferior because we menstruate. Menstrual blood is important for human beings.”
 –Younger woman, Yangon

The issues around menstrual health and SRH are rarely discussed publicly and there is no sex education in Myanmar schools. The openness of the discussions during the Pyaw Gya Meh intervention were a first for many participants, taking some people outside their comfort zones.

“Talking about sex and menstrual health was so difficult and uncomfortable for me, at first, because I have never discussed sex openly in my entire life. However, I overcame this, with the support of my fellow participants.” –Older man, Yangon

At least one participant from the group of older women shared the menstrual health booklets distributed during the training to other people, more widely in the community. The menstruation and SRH sessions were clearly memorable and eye opening for many participants. However, given the relatively small sample of respondents and the short time period between the sessions and this evaluation, it is not possible to gauge whether previous existing prejudices and taboos had actually been overcome.

Questioning gender relations

The intervention addressed the dominant notions of masculinity and femininity, including the concept of ‘hpon’, or masculine power in Myanmar. Several respondents highlighted changes in their outlook on men’s and women’s contributions to the household.

“Men’s jobs are seen as ‘real work’, while women’s domestic work is not valued and is trivialised. Women tend to be treated unfairly by their husbands who are often the breadwinners. The lessons we discussed in this training were thought provoking. We have never been taught to value women’s domestic work and we take it for granted. Therefore, I was also intrigued by these new concepts.” –Older man, Rakhine State

“Although women actually do more work, they are called dependents. Every gender should be equal and work should be recognised and valued, regardless of the paid or unpaid nature of the job.” –Young man, Rakhine State

Setting boundaries, reducing the double burden

N is an older woman from the Dawbon Township group:

"I applied what I learnt from the discussions to help me get on top of my workload. I found it very useful. I used to do all the household chores, take care of the children and manage all the other activities related to the family. I thought I had to do all the work and take responsibility for everything around the home because I am a mother and a wife. I never expressed to anyone how very tired I was of doing the household chores and taking care of the children. I never asked for help or complained about my exhaustion or shared my feelings. However, after I learned some negotiation skills and ways to communicate with others using the 'I statement', I found I could express my feelings more openly and directly and ask for what I want and how I want it."

Following N's participation in the Pyaw Gya Meh project, she now shares her workload among her family, with her husband and children. N discussed with her husband what she had learnt in the dialogue sessions and was able to convince him to help taking care of the children and doing more of the household chores, by himself or together with the children:

"My husband has never cooked or done any household chores, since we got married. But now he has changed. He cooks and does all the household chores, together with the children. He assigns the work to the children and gets them to do things for themselves. If I am tired from working, he and the children are willing to help me and let me rest."

N also shared with her neighbour the things she had learnt in the trainings. That has apparently helped to improve the relationship between that neighbour and her sister. According to N, the two sisters always used to quarrel about their workloads. The younger sister felt exploited because she had to do all the household chores and take care of the children. The older sister argued that it was she who was working hard to support the family through her work outside the home. Ma N talked with both the women and helped them to see and value their own and each other's' contributions to supporting the family. The two sisters now have a good relationship

For many of the women, and younger women in particular, the training sessions helped to overcome their feelings of inferiority vis-à-vis men, which are partly related to engrained social beliefs about women's impurity linked to menstruation (see above) and the celebration of men's 'hpon', which was also addressed directly in the trainings:

"The biggest change for me is that I have gained confidence. I always felt inferior as a woman, but I have learned that women and men are equal." –Young woman, Rakhine State

Yet not all participants felt fully comfortable with letting go of the traditional notions of male supremacy, according to interviews with the project implementing staff. This has to be understood within the lifetime of gender conditioning that has shaped the participants, and which can take more than a 12-week programme to overcome.

Several male respondents from both Yangon and Rakhine State stated that the intervention had helped them to improve their communications with their family members, including their wives and daughters-in-law, and this has further helped to reduce the tensions within their families.

Diverse SOGIESC

The sessions on diverse SOGIESC and LGBTIQ+ were seen by participants as the most difficult and challenging, mainly due to difficulties in understanding the terminology. Though the trainings were conducted in Myanmar language, key terms relating to diverse SOGIESC in Myanmar are expressed in English or using English acronyms, for example LGBTI or SOGI, making them difficult to access for many of the participants, particularly those not fluent in English or exposed to terminology commonly used by NGOs.¹³ This was especially the case for the more rural participants in Rakhine State and for those who had had less formal education.

“The only difficulty I found was the session about LGBT terminology. Those terminologies are too confusing for me, so I don’t really feel comfortable discussing this topic.” –Young woman, Yangon

In spite of the challenges, these sessions were clearly memorable and stimulated many participants to reflect on their past attitudes.

“I admit that I see the LGBT people differently now. In the past, I never understood how people could behave this way. I didn’t find them natural.” –Younger woman, Yangon

“The LGBT session was so shocking for me. I realised that I resented LGBT for no reason. I thought they were faking their identity. I was so afraid that members of my family would become like them. I learnt that this is their existence and I regret that I looked down on them in the past.” –Older man, Yangon

“To be honest, I used to be prejudiced against LGBT. This topic was an eye-opener for me.” –Younger woman, Yangon

“Some surprising things for me included SOGI. This was really a new topic for me. I realise more about human dignity, value and respect. Rather than just accepting, I think I should be more understanding about their existence.” –Older man, Yangon

Shifts in attitudes towards persons of diverse SOGIESC were reportedly more prominent among the respondents in Yangon, compared to those in Rakhine State. This may be due, in part, to the fact that the Yangon participants reported being able to access more easily the terminology used in the sessions because they had had previous exposure to awareness-raising programmes run by NGOs. Furthermore, in the Dawbon Township group of younger men were seven openly gay or trans participants who were willing and able to share their own personal experiences. All the participants in the Dawbon group were able to interact and have open face-to-face conversations. Nonetheless, respondents from Rakhine State also reported increased openness to diverse SOGIESC, a partial debunking of some traditional prejudices and participant willingness to share with and educate others.

“I used to discriminate against the LGBT community in the past. I’ve become aware that I shouldn’t speak in this manner and I’m striving to understand them, as well.” –Older woman, Rakhine State

¹³ Myanmar diverse SOGIESC rights activists and many members of the community prefer using English terminology as it is seen as less pejorative than Myanmar language terms

"I used to make fun of LGBT people for their way of life. Now I'm beginning to understand and accept them for who they are. They act the way they do because it is natural for them to do so. I have been sharing these ideas with my relatives and neighbours." –Younger woman, Rakhine State

"Many participants said they believed that being LGBT indicated that those people had done horrible things in their past lives. The facilitator was able to address these misconceptions, calmly and thoroughly." –Younger man, Rakhine State

However, not all the participants were ready to go beyond receiving knowledge on the topic.

"I just want them to like the opposite sex. Although I understand their existence, being heterosexual is normal and should be pursued. Life would be easier that way." –Older woman, Yangon

Such negative attitudes reflect the broader discrimination that people with diverse SOGIESC continue to face in Myanmar society, as shared by the LGBTQ+ members of the Yangon groups.

"As I'm a LGBT, my partner's family do not like me. The skills from this dialogue have helped me to improve my relationships with his family members. In the past they ignored me."

"My family does not accept me. I shared what I learnt with my family members. There is discrimination against the LGBT community. I try to build stronger relationships using what I have learnt."

"It is really hard for me to communicate with my family. They don't really recognise transgender. For them, I have been an error all my life. I don't know how to change that, so I stay distant from them and only talk to them when I need to."

Persons of diverse SOGIESC reported that the chances to learn new communication skills and speak openly with others, including straight members of their communities, had been helpful, to an extent. This is reflected in the following quotes from a FGD with participants of diverse SOGIESC in Yangon.

"I feel I have better relationships with my colleagues now. However, my relationship with my family members remains the same."

"I shared the pamphlet with my family members and I feel that some of my family members are now showing me more warmth than before. They don't isolate me as much as they used to in the past. But we still have a long way to go."

"My partner used to be very abusive to me. Since I shared with him what I learned from the dialogue, the frequency of abuse has decreased. I told everyone in the training about this too."

"The topics on disability, empathy, relationship between fathers and sons, family members, expectations and reality were important for me. We discussed the acceptance of LGBT in our communities and I especially liked the plenary session where we were able to exchange our ideas, views and expectations. We got to discover the ways that conventional ideas often limit the potential of socially vulnerable people like us."

Assessment of types of activities

The most popular activities of the intervention were the interactive roleplay sessions, particularly the one where participants played two scenarios: first, a dysfunctional, unhappy family, and then, a happy family.¹⁴ This roleplay was mentioned particularly by the Yangon respondents.

“We loved all the roleplay activities and performances. They were so lively and engaging.” –Younger woman, Yangon

“When you do roleplay, it’s hard to forget.” –Older woman, Yangon

“I really liked the roleplay session about domestic violence and bystander intervention, that we performed on the last day. I based our performance on my close friend’s actual experiences. I have learned ways to intervene in domestic violence situations and how to treat the survivors with respect and dignity. I feel like I’ve picked up some useful tips that I can use in real life. I’m really proud and happy that I’ve had the chance to participate in this project.” –Older man, Yangon

The participants also appreciated the plenary discussions which provided opportunities for people to share their ideas and feelings, and explore different viewpoints.

“I also liked the plenary session. It allowed us to learn more about generational gaps and misunderstandings.” –Young man, Yangon

The ‘I statement’ activity was popular, particularly among the younger, urban women in Yangon. This exercise was initially seen as foreign and unfamiliar. It asked participants to voice their opinions and statements clearly, in ways which are different from the norms for younger women in Myanmar, which prioritise obedience and self-sacrifice.¹⁵

Another exercise which resonated among participants compared gendered and age-based social expectations and lived realities, and explored the frustrations – including the potential for emotional or even physical violence – that arise between individuals and other family members when people are unable to live up to these expectations.

“Expectation and reality. This resonates with real life.” –Young woman, Rakhine State

The intervention activities that related to real life problems, such as domestic violence, were highlighted and endorsed by many participants who said they felt that these sessions gave them valuable tools to implement in everyday life.

“I pay attention to the topics that relate directly to my life. For example, I remember performing the roleplays of domestic violence case scenarios, the happy and healthy family, and others, because they described real life situations. I was really eager to participate.” –Young woman, Yangon

¹⁴ This echoes one of the evaluator’s personal observations of the Zindagii Shoista intervention as well

¹⁵ Interview with project facilitator. “I” statements are a way of communication that focuses on the feelings or beliefs of the speaker rather than thoughts and characteristics that the speaker attributes to the listener (“you” statements), and often begin with “I”, such as “I feel that...”

“The training sessions that used real life scenarios taught us many important things. They helped us reflect on our lived experiences, such as being discriminated. We LGBT are treated as inferiors, compared to men and women., My partner’s family don’t like me because I’m an LGBT. The skills I learned from these sessions have helped me improve my relationships with my partner’s family. Before, they just used to ignore me.”
 –Young LGBT man, Yangon

Differential impacts

The themes and sessions which resonated most with the participants obviously depended on each person’s own life situations.

The older women and men in relationships and the younger Rakhine participants (who were more likely to be in relationships than the younger Yangon participants), most appreciated the sessions which focused on communication in relationships, anger management, DV/IPV and parenting tips. According to the key informant interviews (KII) and FGD responses, the sessions on communication skills were popular and the skills learnt by the participants were quickly applied in their daily lives. The ‘I statements’ were also popular and adopted, especially by the younger, Yangon-based participants, perhaps reflecting different communication styles in urban and rural settings.

Overall, the greater differences between respondents’ answers and experiences tended to be between age groups, between the urban and rural experiences, and between ‘straight’ and diverse SOGIESC participants. The variations in responses from people of different ethno-religious backgrounds were less apparent than those based on location. This is evidenced in the fact that the Kaman Muslim and Rakhine Buddhist responses from Rakhine State were more similar to each other than to the responses from the Yangon participants.

The older men, in particular, were very appreciative of being asked to participate in this intervention. They said that they felt often excluded from civil society campaigns, especially those focused on gender.

For the rural women, participation in the Pyaw Gya Meh intervention was a novel opportunity to discuss issues that were usually left unspoken. They appreciated the invitation to embrace new ways of thinking. In general, women in the rural areas of Myanmar do not usually have much access to gender-focused programming.

However, the actual participant personal change processes were restricted, in terms of how far the participants themselves wanted to go with the ideas. A young woman from Yangon noted:

“Of course, there were some topics that were unfamiliar, uncomfortable for us. We chose not to say anything and the facilitators also didn’t force us.”

Somewhat surprisingly, the participants, including those in Yangon, did not appear to reflect very much about the political crisis escalating around them, apart from practical considerations about how it was impacting their participation in the intervention. A few participants did mention the increasing tensions in their neighbourhoods and that their participation in the intervention had made them more open to accepting different points of view. The dearth of discussion on the political conflict may have been a reflection of people’s general wariness of raising potentially-sensitive issues, given the tense situations, particularly in Yangon.

5. Conclusion

This evaluation of Pyaw Gya Meh shows that the project has been largely successful in meeting its goals, at least in the short-term, with participants seeing it as a useful and relevant intervention.

As this evaluation was conducted soon after the completion of the intervention, it is difficult to gauge just how much this project was able to fundamentally shift attitudes, especially as there is likely to be a degree of social desirability bias in some respondent answers. Nonetheless, based on the interviews, the intervention clearly did introduce people to some important life skills and set thinking processes in motion, particularly around menstrual health, diverse SOGIESC and communicating with others.

The performance of the project facilitators was a major factor in the project's success, according to the participant respondents, who felt that they had been treated with respect and listened to, and that issues had been explained clearly to them. Participants appreciated that the sessions had been contextualised and were relatable. Roleplays and other interactive elements were highly appreciated and should be a central part of future interventions. The egalitarian, inclusive and non-didactic approach was a central part of the project design and it is also a key tenet of the Stepping Stones-based approaches, on which the Pyaw Gya Meh project is based.

The innovations added to the Pyaw Gya Meh curriculum worked successfully, to varying degrees. The menstrual health and SRH sessions were, based on responses, both important and impactful, and should be retained. The diverse SOGIESC sessions, especially if and when diverse SOGIESC participants themselves could share their own experiences, were also viewed as a very positive additions to the curriculum. However, feedback suggests that the diverse SOGIESC sessions and the disabilities sessions should have used terminology which was more accessible for the participants. This is, however, somewhat challenging in Myanmar, because much of the non-discriminatory terminology on LGBTIQ+ and diverse SOGIESC that is preferred and used by rights organisations is applied in English, rather than Myanmar language.¹⁶ In general, the language and conceptual frameworks need to be simplified.

The anger management and communication skills sessions were highly appreciated and seem to have worked well, though they did not necessarily address the issues around the root causes of GBV and inequality. These were explored partly in the discussions questioning notions of male supremacy. Deep-seated gender norms are hard to dislodge and require longer-term engagement with the beneficiaries, which unfortunately was not possible in this project. Ideally, the longer-term engagement could be in the form of an economic empowerment component.

In the case of the Zindagii Shoista project in Tajikistan, the intervention was carried out over a longer period and included an economic empowerment component which allowed for both a longer, sustained engagement with the beneficiaries as well as a means of tackling the socio-economic stress factors contributing to DV/IPV.

The Pyaw Gya Meh project was not able to include an economic empowerment component. The timing of the implementation was also heavily affected by both the pandemic and the political crisis, leading to delays, the

¹⁶ See also L. Chua, *The vernacular mobilisation of human rights in Myanmar's sexual orientation and gender identity movement*, *Law & Society Review*. 49 (2) 2015, pp.299-332; V. Skeie, *A Passion for Change: An ethnographic study of non-conforming gender identities in Buddhist Myanmar*, 2020, M.A. thesis, Department of Social Anthropology, University of Bergen

need to compress sessions and high dropout rates. All of these factors, which were beyond the control of the implementers, had a negative impact on the effectiveness of the intervention and therefore, most likely, on the sustainability of transformative changes it was able to produce. It was neither feasible to compress the sessions any further, nor possible to extend the implementation timeframe.

Future iterations of this project should include the economic empowerment component, for a more comprehensive approach. Consideration should also be given to lengthening the intervention period, to allow more time to cover the breadth of topics and some spacing between the sessions. Alternatively, design a shorter, less thematically-ambitious curriculum with fewer topics or implement the longer curriculum in stages, which would give the added advantage of a more sustained engagement with the beneficiaries.

What should not be underestimated is the unintended positive impact that the intervention had by giving people a space to talk during very stressful, challenging times and to engage with issues beyond the pandemic and the political crisis. Even though the root causes of GBV were not always tackled in the discussions, the intervention encouraged people to question harmful norms, attitudes and behaviours, enabled participants to reflect on the various dynamics affecting their everyday lives and gave participants skills to help make their own changes. This was especially valuable for people who do not usually have much opportunity in their everyday lives to take time for self-reflection, to engage with others or to learn new life skills.

One measure of the project's success was that many of the respondents requested more interventions of this type and for these interventions to be made available to more people in their communities.

Annex: Interview questionnaire and breakdown of interviews

Interview questionnaire

The interviews were semi-structured and the following questions were used as a general guide and adapted in the individual interview and FGD situations.

- How and why did you come to join this intervention?
- What was your impression of the intervention overall? (*probe for positive and negative impressions*)
- Did the intervention meet your expectations? (*probe for met/unmet expectations*)
- Which parts of the intervention did you enjoy/ not enjoy?
- Which parts of the intervention were most meaningful for you?
- What impact did the intervention have in your life? What changes came about?
- Will you take these changes forward, will you share the lessons with anyone else in your family or neighbourhood?
- Any other issues that you would want to raise?

Breakdown of interviews

Number of interviews conducted 31

Interviews unable to be used 2

Total number of interviews transcribed and analysed 29

KII interviews with 1 or 2 persons

FGD minimum 3 persons, maximum 5 persons

Dawbon, Yangon		
KII 1	young women	complete
KII 2	old men	complete
KII 3	young man	complete
KII 4	old women	complete
KII 5	young women	complete
KII 6	young women	complete
Mingaladon, Yangon		
KII 7 & 8	young women	complete
KII 9	old women	complete
KII 10 & 11	old women	complete
KII 12 & 13	young women	complete
KII 14	old men	complete
KII 15	young men	complete
KII 16	young men	complete
Mingaladon, Yangon		
FGD1	older men	complete
FGD 2	young men	complete
Dawbon, Yangon		
FGD 3	old men	complete
FGD 4	young men (LGBT)	complete
FGD 5	old women	complete
Rakhine (Kaman)		
FGD 6	young women	complete
FGD 7	young men	complete
FGD 8	old women	complete
FGD 9	old men	complete
Rakhine (Rakhine)		
FGD 10	young women	complete
FGD 11	young men	complete
FGD 12	old women	complete
FGD 13	old men	complete

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