



Celebrating 21 years of *Stepping Stones*

1995-2016

## Stepping Stones Stories from *The Gambia*.....



**SUSAN PAXTON**

**Organisation:** I am now retired. I was involved in APN+ for twenty years, 1995-2016.

**Country:** I am talking about The Gambia; but I come from Australia



**When did you first come across Stepping Stones?**

The Gambia, 2001. I was a World Bank Consultant as part of a Rapid Response Team.



I feel *Stepping Stones* is the most effective grassroots tool for behaviour change.

Villagers had lived with high level of spousal abuse before the program. When I spoke to them the men said that they understood their wives much better, and embraced condom use as a way to have safe sex with their wives rather than to seek sex outside the relationship. The women confirmed that the men treated them with much greater understanding and respect, that violence from their husbands had stopped and that men are now more willing to help them with domestic tasks.



**Do you have a positive message you would like to share with the Stepping Stones Community of Practice?**

I think that if we could have *Stepping Stones* in every village and a positive speaker in every school the HIV epidemic could be stopped.

**Thank you Susan!**



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### ★ **Stepping Stones in the Gambia**

*Stepping Stones* was adapted for use in the Gambia, in West Africa, from 1997 by the UK Medical Research Council, together with the Gambia Department of State for Health, the Gambian Family Planning Association, ActionAid the Gambia and UNDP.

### ★ **Stepping Stones adaptation for the Gambia**

This was led by Dr Matthew Shaw for the MRC. It went through 2 pilot phases. Instead of focusing on condom use to protect against HIV, condoms were promoted to men as a means of ensuring continued fertility. This use of condoms was valued by community members. The focus on alcohol in the original *Stepping Stones* was considered of little relevance in the Gambian context, because alcohol is not used. Sessions on reproductive health were added to the manual. Otherwise, it kept its overall length and format of working with four separate peer groups, separately and together. In later phases, four Gambian organisations, Gambia Red Crescent Society, TARUD, and Worldview The Gambia, joined the programme, together with 2 CBOs.



The programme was scaled up across 4 Administrative Divisions (NBD,WD, LRD and CRD).



### ★ **Stakeholder involvement: innovative work with imams by Momadou Conteh**

*Momadou Conteh of Worldview the Gambia knew that it was crucial for imams to be on board with the programme, since they are such highly respected leaders. Conteh, a trainer and film-maker, invited a group of imams to come and talk about condoms amongst themselves, in the context of the Quran. He filmed their discussion, which eventually led to an agreement that condoms in the context of prevention of STIs and HIV were to be welcomed and encouraged. The trainer then invited individual imams to go with him to meet village elders, so that they could show the film, and create space for the elders to discuss the issues raised in the film with the imam. In this way, the community elders grew to accept and promote the use of condoms in their communities.*

(Momadou Conteh interview, 2010)



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### ★ What has changed?

The programme in the Gambia is one of the few contexts around the world that has both formal evaluation results and participatory community-based evaluation results.

First, here are some findings from a formal research study of two intervention and two control villages [1]. This study combined participatory evaluation techniques, in-depth interviews, focus group discussions, a Knowledge, Attitudes and Practices questionnaire at baseline and immediately after the intervention; and monitoring of condom supplies. Below is a chart highlighting the issues identified by different peer groups and their prioritization of these as part of the first session:

**Table 1:** Prioritisation of urgency of sexual reproductive health problems by peer group

	NOW	SOON	LATER
Old Women	Grandchildren are awake when wanted by husband Wife beating STIs AIDS Unwanted pregnancy	Husband looking for a new wife Wife tired when husband wants sex Tiredness after delivery No money	Jealousy Menopause pains Husband wants sex when wife unwell or pregnant Headaches
Young Women	Too many children Husband wanted sex by force AIDS STIs Unwanted pregnancy Wife beating	Sex during menses Husband refusing condom Deflowering of young girls	Pain during sex Sex after delivery when woman tired
Old Men	Too many wives Malaria Epi-gastric problems	Having casual sex Headache General body pain	Jealousy STIs Sexual weakness High blood pressure
Young Men	Unsafe sex Spread of STI AIDS	Infertility Unplanned family Stomach ache Joint pains	TB Headache Worms Boils

The study stated:

*“In this study it seemed that the women were empowered by their new knowledge to insist that the men with whom they have casual sexual contact should use condoms, or seek sexual gratification elsewhere. Stepping Stones has as an explicit goal the empowerment of women in relation to male partners, and the condom issue is one example of where this is evident. The intervention also appears to have an impact on non-sexual aspects of gendered power within relationships: some participants aspired to have more equitable relationships, including improved financial arrangements between husbands and wives. We have shown how improvements in dialogue within relationships (between partners, peers and parents/ children) were considered by participants to have been one of the benefits of the programme, and in many instances this was related specifically to issues of STI transmission. This is because marital discord is seen by men and women as directly connected to extramarital relations, either as a cause or a consequence, and therefore to increased risk of STIs. Stepping Stones, in achieving these changes, is therefore realising one of its key aims, by helping women gain greater control over their lives.” [1]*



In a different community that was part of the same programme, a wholly participatory evaluation was conducted. For this evaluation, there were not enough female staff available, so while there were two age-based groups for the men (YM and OM), there was only one women’s group for all ages (W). Below is a chart of responses from an exercise where the peer groups were asked in 3 separate but simultaneous meetings: “what positive things have changed in this community since the *Stepping Stones* programme?” [2]. The chart compares the responses of the three different groups.

**POSITIVE CHANGES SEEN NOW IN THE VILLAGE, February 2000**

GOOD CHANGES	W	YM	OM
More DIALOGUE in the home	#	#	#
Less quarrelling amongst couples (violence)	#	#	#
More trust and confidence between couples and the community	#		
Fewer sex partners		#	
*Practise safer sex	#	#	
**Stay with husbands during breastfeeding	#	#	
Husbands provide more fish money	#	#	#
More understanding and respect in the home	#	#	#
Husbands buying presents for wife and children	#		
Husbands helping wives with difficult jobs at household level	#	#	#
Husbands granting permission for wives to visit relatives	#	#	
Talking to children about sex	#		#
Safer sex even outside marriage	#	#	#
Awareness		#	#
Safe drinking water <sup>4</sup>		#	

\*By this, participants meant that they used condoms

\*\*Normally, women leave their husbands while they are breastfeeding and go to their parents' houses as a contraceptive method. Now due to knowledge gained from *Stepping Stones* programme, they can remain with their husbands and have normal sexual relations with them without the fear of getting pregnant because they have access to contraceptive methods like condoms.

<sup>4</sup> A well is now being constructed in the village with funding from another donor

The chart enabled comparison of the answers to this open question and showed considerable overlap in the responses from the three different groups.

Below appear some quotes from the three different groups.

### Young men

- ★ We now help our parents with domestic work
- ★ The group embarks on formal Kafo (peer group) meetings twice a month and



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*sometimes have informal meetings with non-participants*

★ *'Slowly, Slowly catch the Monkey in the forest': You have to be smart, you have to be cautious and intelligent in order to protect yourself from AIDS and STDs.*

### Women

★ *If our husbands go out with other women we will not know but we prefer it now that the husbands go out with condoms rather than without*

★ *Condoms do not reduce pleasure*

★ *We do not have to give favours to our husbands in order for them to use condoms*

★ *After the workshop we learnt about STIs and we discussed this with our husbands and they agreed to use condoms with us.*

★ *Before the programme we only advised our daughters on teenage pregnancy and the dangers of early sex. Now we can also talk to them about STIs and AIDS*

★ *The programme has helped us a lot, especially the dramas which taught us how to unite and have happy families*

★ *When going to initiation ceremonies we take condoms with us. For example we might meet exboyfriends and may not be able to control ourselves so we will have condoms to use.*

### Old Men

★ *We now help our wives with jobs around the home*

★ *If we receive a complaint from a peer's wife about his refusal to buy rice for the household, the whole group would put pressure on the individual and insist that he buys the rice. ' You have to put your house in order first before you think of going to share with outsiders'.*

1. Paine K, Hart G, Jawo M, Ceesay S, Jallow M, Morison L et al. 'Before we were sleeping, now we are awake': Preliminary evaluation of the Stepping Stones sexual health programme in The Gambia. African Journal of AIDS Research. 2002;1(1):39-50. DOI: [10.2989/16085906.2002.9626543](https://doi.org/10.2989/16085906.2002.9626543)

2. Jarjue MS, Badgie K, Jobarteh A, Bojang L, Gibba L, Bojang F, Drammeh B, Jawo M, Ofori-Ata N, Paine K, Shaw M, Kassama L, Welbourn A. Participatory Review of changes after a Stepping Stones workshop in an Islamic context, the Gambia, 2000 ms [http://salamandertrust.net/wp-content/uploads/2016/07/StStgamparticipatory\\_review2000.pdf](http://salamandertrust.net/wp-content/uploads/2016/07/StStgamparticipatory_review2000.pdf)

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