

ORIGINAL RESEARCH ARTICLE

Positive masculinity programmes and attitudes towards nonconforming gender identities among young males in urban Democratic Republic of Congo, Nigeria, and Rwanda

DOI: 10.29063/ajrh2024/v28i8s.3

Kelechi Okpara^{1*}, Christian Ngomenzey^{2,3}, Aloysius Odi¹, Chiemezie Atama¹, Jacques Emina², Ilaria Busgacalia⁴, Fidèle Rutayisire⁴, Chidi Ugwu¹, Ike Ernest Onyishi⁵ and Chimaraoke Izugbara⁶

Department of Sociology and Anthropology, University of Nigeria, Nsukka¹; Population and Health Research Institute, Kinshasa, DRC²; National Office of Statistic, Kinshasa, DRC³; The Rwanda Men's Resource Centre, Kigali, Rwanda⁴; Department of Psychology, University of Nigeria, Nsukka⁵; International Center for Research on Women, Washington DC, USA⁶

*For Correspondence: Email: kelechi.okpara@unn.edu.ng

Abstract

Implementing programmes on sexual and reproductive health and rights (SRHR) in sub-Saharan Africa often involves promoting inclusive sexual identity/orientation. However, whether and how the programmes are changing gender norms in the target populations have not been established. This study was designed to determine whether participation in Positive Masculinity (PM) programmes can change attitudes associated with prevailing gender norms. We explored attitudes towards nonconforming sexual identity/orientation among young males in selected informal settlements in Democratic Republic of the Congo (DRC), Nigeria and Rwanda. The key variables we tested included “country of participation” and other socio-demographics such as “education”, “marital status” and “prior residential location” (rural or urban). We found no significant association between participation in PM programmes with attitudes towards nonconforming sexual identities/orientations across our target populations irrespective of educational qualification, marital status, and previous location of residence. By contrast, religious teachings showed up in the qualitative responses as a significant factor influencing young people's resistance to PM programmes' advocating for inclusive sexuality. Additionally, negative masculinity attributes had significant negative association with attitudes towards nonconforming sexual identity, while respondents with violent tendencies showed significant positive attitudes. We conclude that current PM interventions do not significantly contribute to positive attitudes towards inclusive sexuality in DRC, Nigeria, and Rwanda. (*Afr J Reprod Health* 2024; 28 [8s]: 21-31).

Keywords: Gender norms; inclusive sexuality; positive masculinity; sexual and reproductive health and rights, sexual identity/orientation

Résumé

La mise en œuvre de programmes sur la santé et les droits sexuels et reproductifs (SDSR) en Afrique subsaharienne implique souvent la promotion d'une identité/orientation sexuelle inclusive. Cependant, il n'a pas été établi si et comment les programmes modifient les normes de genre dans les populations cibles. Cette étude a été conçue pour déterminer si la participation à des programmes de masculinité positive (PM) peut changer les attitudes associées aux normes de genre dominantes. Nous avons exploré les attitudes à l'égard de l'identité/orientation sexuelle non conforme chez les jeunes hommes dans des quartiers informels sélectionnés en République démocratique du Congo (RDC), au Nigeria et au Rwanda. Les variables clés que nous avons testées comprenaient le « pays de participation » et d'autres données sociodémographiques telles que « l'éducation », « l'état civil » et « le lieu de résidence antérieur » (rural ou urbain). Nous n'avons trouvé aucune association significative entre la participation à des programmes de PM et les attitudes à l'égard des identités/orientations sexuelles non conformes au sein de nos populations cibles, indépendamment du diplôme, de l'état civil et du lieu de résidence précédent. En revanche, les enseignements religieux sont apparus dans les réponses qualitatives comme un facteur important influençant la résistance des jeunes aux programmes PM prônant une sexualité inclusive. De plus, les attributs négatifs de la masculinité présentaient une association négative significative avec les attitudes à l'égard d'une identité sexuelle non conforme, tandis que les répondants ayant des tendances violentes montraient des attitudes positives significatives. Nous concluons que les interventions actuelles de PM ne contribuent pas de manière significative à des attitudes positives envers une sexualité inclusive en RDC, au Nigeria et au Rwanda. (*Afr J Reprod Health* 2024; 28 [8s]: 21-31).

Mots-clés: Normes de genre; une sexualité inclusive; masculinité positive; santé et droits sexuels et reproductifs, identité/orientation sexuelle

Introduction

In this study covering selected informal settlements in Congo, Democratic Republic, Nigeria and Rwanda, we examined attitude towards nonconforming gender identities and orientations among young males who have participated in positive masculinity (PM) training programmes against that of young males who have not participated in such programmes. Our aim was to provide empirical evidence as to whether current PM programmes, as framed and implemented, were affecting gender norms, which may have implications for the trends of sexual and reproductive health and rights in the region. The masculinity training programmes are designed to, among other things, promote inclusive gender and sexual orientations while challenging traditional gender norms, especially those that promote exclusion based on sexual identity or orientation¹⁻².

Reports on gender-based discrimination have mostly highlighted violence perpetrated against women, while structurally enabled violence against gender nonconforming individuals is rarely considered. In Nigeria, physical violence against nonconforming sexual identities is common with the country's anti-homosexuality law³; whereas in Rwanda and DRC, cases of discrimination are as well widespread even without such laws⁴⁻⁵. Gender-related programmes in sub-Saharan Africa are focused on, among other things, challenging traditional gender norms and eradicating forms of gender/sexuality-based violence. But understanding how participating in PM programmes could inform positive young males' attitudes towards gender nonconforming identities and behaviours will help determine whether PM programmes as framed and implemented can guarantee sexual and reproductive health and rights in these (and other comparable) settings. Furthermore, we also attempt to determine whether reaction to inclusive sexual identities and orientations would be the same in all three countries. We hypothesized that individual-level factors such as religious persuasion, education, masculinity conceptions, and socio-environmental factors (such as prior place of residence) would be positively associated with attitudes towards gender nonconforming behaviours in the study populations. In the discussion we contemplate on implications of the resistance reactions we uncovered, for the

capacity of PM programmes in the region to achieve desirable levels of sexual and reproductive health and rights for all genders. Notably, programmes targeting sexual and reproductive health and rights have sought to, through education and socialization, promote sexual and gender inclusiveness, since the state of sexual and reproductive health is inseparable from dominant sexual orientations and gender norms⁶⁻⁷. In any case, reports on such interventions targeting reduction in gender-based violence did not reveal any significant effect, because it does not set out to address the root cause of the violence⁸. PM programmes, such as MenEngage (one of the ones we assessed), are rooted in the Yogyakarta Principle, which is a guideline for the application of international human rights laws in relation to sexual orientation and gender identity⁹⁻¹⁰. The principle is about the realization of "freedom to be full selves in all our diversity of sexual orientation and gender identity"^{9,11}. Though the Yogyakarta Principle is not legally binding on member states, it has been invoked in different instances by local and international actors to defend the rights of sexual minorities or nonconforming sexual identities¹². It also provides the basis for arguing that gender identity should be treated beyond sex at birth, to include personal sense of the body and other expressions like "dressing", "speech", "mannerism"; and even for neutralization of state control over people's gender^{10,13-14}. Therefore, the literature in favour of this idea often engage in deconstructing both essentialist and naturalist positions on gender and sexuality because both are conservative and oppose liberal gender values and sexual orientations¹⁵⁻¹⁶. In essentialism or naturalism, sexual orientation is regarded as innate and fixed identities which suggests that men and women are inherently different¹⁷⁻¹⁸. It is driven by biological determinism which only recognizes sex as male and female rather than the social categories constructed around them^{14,19}.

PM implementers are in opposition to essentialism and naturalism because both ideas have the tendency to encourage fixation in masculine ideals notwithstanding whether these are seen to undermine even males themselves¹. They also identify and criticize the employment of state machineries towards what Foucault described as "repression and modern policing of sex"²⁰. Both in design and practice, the programmes are subtle

confrontations of most traditional gender norms that are against nonconforming sexual orientation and identity²⁶. In Africa, the notion is that the region generally, and sub-Saharan Africa in particular, is a place where people with nonconforming sexual identities are at risk, due to upsurge of homophobic laws, violence, and arrests of people with nonconforming sexual orientations²¹⁻²³. Therefore, this programmes by working with men and boys, hopes to promote inclusive sexual and reproductive health rights. But on the other hand, it also seems that the discrimination is rooted in external religious influences²⁴, which has the capacity to shape social attitudes in general²⁵. Consequently, this study sought to determine whether and to what extent participation in PM programmes was associated with positive attitudes towards nonconforming sexual orientations and identities across the target populations. The importance of this study derives from the fact that prevailing gender norms in any human group may have far-reaching implications for sexual and reproductive health and rights among them²⁶.

Methods

We studied three purposively selected informal settlements in Enugu, Nigeria; Kigali, Rwanda; and Kinshasa, Democratic Republic of the Congo (DRC), using mixed methods research design that integrated quantitative and qualitative approaches. The settlements we studied have notable structural inhibitors negatively affecting residents' participation in lifestyle modification programmes.

The locations are also notorious for vulnerability of gender minority groups, making them likely to experience adverse sexual discrimination, reproductive health rights violations and gender-based violence²⁶. The quantitative data was drawn from a survey of 411 boys of 18-24 years, selected through a three-stage random sampling procedure. Adapted from the International Men and Gender Equality Survey (IMAGES)²⁶, the instrument was targeted at determining the connection between participation in PM programmes and the young people's attitudes and responses to nonconforming sexual identities. Prior to the actual fieldwork, a list of all households and their locations (structure number) was prepared to randomly select households (mapping

and numbering) from areas where PM programmes were executed (Clusters). In selecting respondents, households were distributed evenly across the enumerated area, while three-stage sampling procedure was adopted. Initially, 25 clusters were chosen at random. Secondly, 20 households from each sampled cluster were selected. Finally, all men aged 18-59 were interviewed, while analysis was based on those between 18 to 24 years. Socio-demographic information of the respondents, such as age, education, religion, and prior place of residence are variables the instrument was designed to be correlated with participation in PM programmes. For the qualitative data, boys (16 - 24) who have participated in PM programmes were purposively selected from the three settlements with the help of the Programme implementers. In-depth interviews (IDI) and focus group discussions (FGDs) were held with boys (aged 18-24 years) and men (aged 25-50 years). These include 30 IDIs (10 per country) and 12 FGDs (4 per country). The interview and discussions were based on what was learnt during the positive masculinity programmes attended and its attitudinal effect. IBM SPSS was used in analyzing the quantitative data. This ranged from descriptive analysis of the socio-demographic information of the respondents to hierarchical regression model predicting attitudes towards nonconforming sexual identities. From the qualitative data, which was analyzed using NVivo 12, insightful quotes were teased out and used to explain and clarify the quantitative information, aspects of which might ordinarily appear contradictory.

The conceptual framework illustrates the hierarchical regression model applied in the study, to predict young males' attitude towards nonconforming sexual identities. The interest is to ascertain the effect of participation in PM programmes, and how it varies when country of residence, socio-demographic characteristics, and gender norms are included at different levels. Attitude towards nonconforming sexual identities were determined using seven items that measure attitude towards homosexual men. It included questions about "associating with homosexuals"; "allowing homosexuals to work with children"; "allowing homosexuals to adopt children"; "shame about having a homosexual child"; "regard to homosexuality as natural"; "allowing homosexuals

to legally marry”; and “public display of homosexual romance such as kissing”. Each positive response to the items were coded as 1, while negative response was coded as 0. The standardized value of the total score was used to measure positive attitude towards nonconforming sexual identity. Gender norms includes “negative masculinity” and “violent tendency”. Negative masculinity was measured as standardized score of two-point responses (disagree = 0; agree = 1) on seven items that indicate, “occasional beating of women”; “that men should have the final say”; “outrage with partner over demand to use condom”; “readiness to fight over insults”; “conviction to be tough always”; “embarrassed over erectile condition”; and “feeling of inferiority with friends”. Violent tendency includes “involvement in robbery”; “fighting with knife, gun or other weapon”; “participating in gang activities”; and “having been arrested in the past”.

Ethical considerations

The study received ethical approval from the ICRW’s Office of Human Research Protection, Rwanda’s National Ethics Commission, Nigeria’s National Institutional Review Board, the University of Kinshasa Research Ethics Committee, and the University of Nigeria Research Ethics Board. The project was guided by the Tri-Council Policy Statement on Research Ethics and related principles. Participants and organizations involved in the study were given unique study identifiers and their identities were anonymized in the study data.

Results

Information on the socio-demographic characteristics of the respondents presented in Table 1 shows that across the three countries, more than half of the respondents had a minimum of secondary education or have attended a vocational school. However, in terms of tertiary education, the observation was higher in Nigeria (21.5%), followed by Rwanda (13.3%) while 11.4% of the respondents from DRC also had tertiary education. As expected, majority of the respondents have never been married (94.4%), while 5.6% had marriage experience, with more of the married young boys traceable to Rwanda. In terms of religion, Catholic was the most reported religious denomination (38.9%) in Nigeria (64.6%) and Rwanda (54.2%), while the

denomination was minorly represented in DRC at 12.8%. DRC has more of Christians from other denominations except Catholic and Protestant (50%). We also considered the places where the respondents lived before moving to the informal settlement as likely influence on their behaviour and attitude towards gender norms and nonconforming sexual identities. It shows that majority of the respondents from DRC (81%) previously resided in towns and cities before moving to the informal settlements where we met them. But in Nigeria and Rwanda, majority of the respondents moved to the informal settlements from rural areas or different locations that are not urban.

Effect of participation on attitude towards gender nonconforming identities (quantitative evidence)

Participating in PM programmes is expected to improve young males’ knowledge of SRHR and their attitude towards others sexual rights. To test this, participation was compared with attitude towards nonconforming sexual identities. The result as presented in Table 2, indicates that participation does not have any significant effect on positive attitude towards nonconforming sexual identities; rather suggests tendencies for negative response ($p > 0.05$; $\beta = -.006$). In the second step, “country of residence” was added to “participation in PM programmes” to predict attitude.

The result further shows that participation at country level had significant effect on the model, although only 4% of the variance in positive attitude could be explained. Using DRC as a dummy category, young males from Nigeria were found to have significant negative coefficient ($\beta = -.124$; $p < .05$) outcome of positive attitude towards nonconforming sexual identity, while Rwanda had significant positive effect ($\beta = .120$; $p < .05$), yet participation remained insignificant. This suggests that young males in Rwanda had more positive attitudes towards nonconforming sexual identities than their peers in Nigeria and DRC, even when participation does not significantly correlate with the attitude.

When we combined participation in PM programmes, country and socio-demographics in the third model, we found that the model failed to explain any significant variations in the attitude.

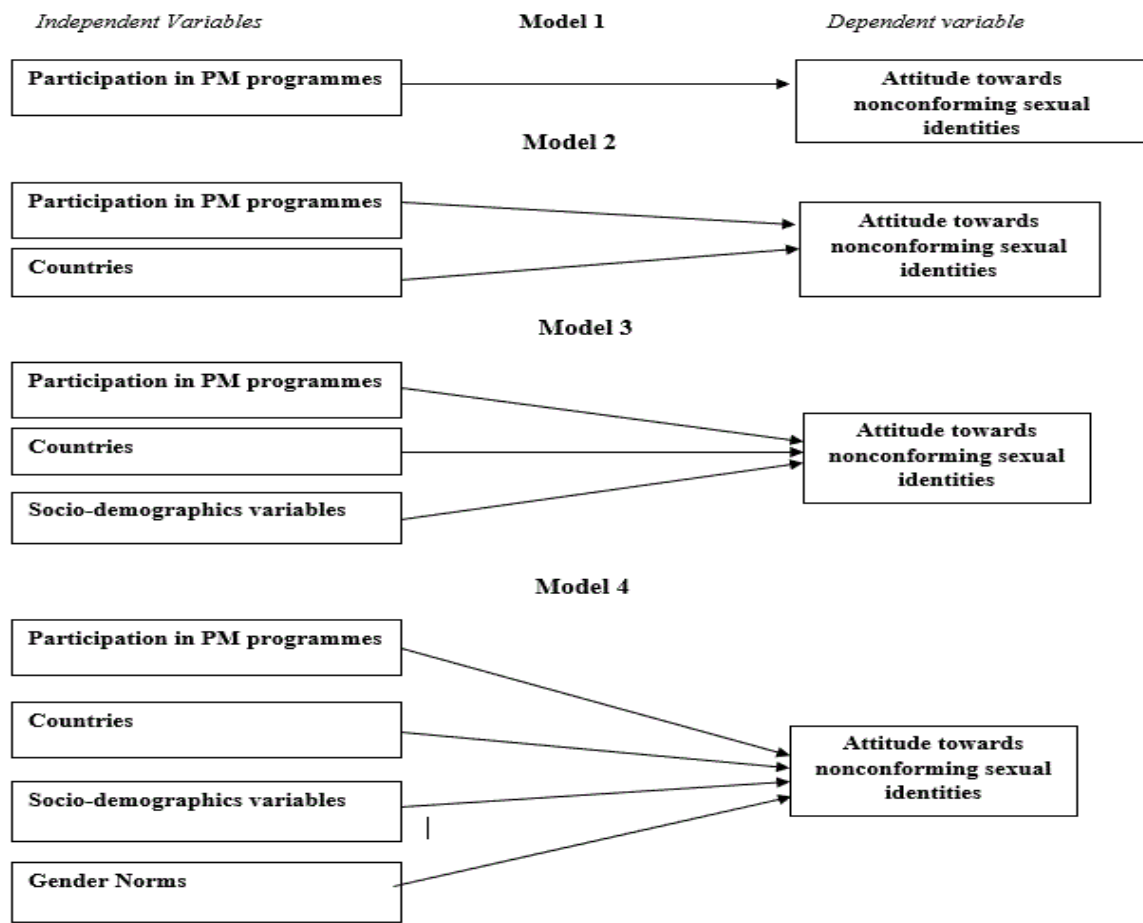


Figure 1: Conceptual framework

Table 1: Description of sample (socio-demographics)

| Variables | Countries | | | Total (%) |
|---------------------------------|------------|-------------|------------|------------|
| | DRC (%) | Nigeria (%) | Rwanda (%) | |
| Education | | | | |
| Primary | 11 (6.0) | 3 (2.1) | 25 (30.1) | 39 (9.5) |
| Secondary/Vocation | 152 (82.6) | 110 (76.4) | 47 (56.6) | 309 (75.2) |
| Tertiary | 21 (11.4) | 31 (21.5) | 11 (13.3) | 63 (15.3) |
| Marital Status | | | | |
| Never in Union | 177 (96.2) | 138 (95.8) | 73 (88.0) | 388 (94.4) |
| Ever in Union | 7 (3.8) | 6 (4.2) | 10 (12.0) | 23 (5.6) |
| Religion | | | | |
| Catholics | 22 (12.8) | 93 (64.6) | 45 (54.2) | 160 (38.9) |
| Protestants | 42 (22.8) | 33 (22.9) | 16 (19.3) | 91 (22.1) |
| Other Christians | 92 (50.0) | 13 (9.0) | 10 (12.0) | 115 (28.0) |
| Others | 28 (15.2) | 5 (3.5) | 12 (14.5) | 45 (10.9) |
| Prior Place of Residence | | | | |
| Towns/Cities | 149 (81.0) | 49 (34.0) | 31 (37.3) | 229 (55.7) |
| Others | 35 (19.0) | 95 (66.0) | 52 (62.7) | 182 (44.3) |

Table 2: Hierarchical regression model predicting positive attitude towards nonconforming gender identities/orientations

| Variables | Model 1 | Model 2 | Model 3 | Model 4 | 95% C. I. | | P |
|-------------------------------------------------------|---------|---------|---------|---------|-----------|-------|------|
| | B | β | β | β | Lower | Upper | |
| Participated in PMP | | | | | | | |
| (Constant) | | | | | -.217 | -.034 | .007 |
| Participated | -.006 | | | | -.206 | .184 | .911 |
| Participation/Country of residence | | | | | | | |
| (Constant) | | | | | -.207 | .033 | .156 |
| Participation | | -.035 | | | -.272 | .132 | .494 |
| Nigeria | | -.124 | | | -.397 | -.036 | .019 |
| Rwanda | | .120 | | | .025 | .473 | .029 |
| Participation/Country/Socio-demographics | | | | | | | |
| (Constant) | | | | | -.503 | .356 | .737 |
| Participation | | | -.046 | | -.301 | .118 | .391 |
| Nigeria | | | -.188 | | -.562 | -.094 | .006 |
| Rwanda | | | .084 | | -.088 | .434 | .193 |
| Education | | | .048 | | -.090 | .252 | .351 |
| Prior residence | | | -.035 | | -.243 | .126 | .533 |
| Marital Status | | | .019 | | -.290 | .424 | .713 |
| Protestant | | | -.089 | | -.401 | .045 | .117 |
| Other Religion | | | -.021 | | -.348 | .237 | .710 |
| Other Christians | | | -.090 | | -.405 | .070 | .167 |
| Participation/Country/Socio-demographics/Gender Norms | | | | | | | |
| (Constant) | | | | | -.454 | .427 | .951 |
| Participation | | | | -.017 | -.244 | .177 | .755 |
| Nigeria | | | | -.162 | -.516 | -.049 | .018 |
| Rwanda | | | | .034 | -.231 | .372 | .647 |
| Education | | | | .041 | -.103 | .242 | .429 |
| Prior residence | | | | -.046 | -.260 | .106 | .410 |
| Marital Status | | | | -.002 | -.364 | .351 | .971 |
| Protestant | | | | -.070 | -.362 | .081 | .214 |
| Other Religion | | | | -.027 | -.361 | .217 | .622 |
| Other Christians | | | | -.101 | -.423 | .049 | .120 |
| Violence tendency | | | | .133 | .031 | .220 | .010 |
| Negative masculinity | | | | -.151 | -.239 | -.026 | .015 |
| Adjusted R ² | -.002 | .033 | .030 | .054 | | | |
| ΔR^2 | .000 | .040 | .051 | .079 | | | |
| ΔF | .013 | 8.507 | .770 | 6.142 | | | |
| P | .911 | .000 | .594 | .002 | | | |

Also, no single socio-demographic variable yielded significant positive effect on attitude towards nonconforming sexual identities.

Like the first model, it shows that socio-demographics such as education, prior place of residence, marital status and religious affiliations do not predict attitude towards nonconforming gender identities. But in the fourth model, we included dominant masculine gender norms like violent tendency and negative masculinity, to see how inclusion of traditional masculine values. The model

was found to have significant association with attitude ($p < .005$), keeping participation, country of residence, and socio-demographic factors constant. The distribution shows that negative masculinity has significant negative effect on attitude towards nonconforming sexual identities ($\beta = -.151$; $p < .05$). This implies that young males who subscribe to negative masculine practices against themselves and women, are significantly more likely to negatively respond to nonconforming sexual orientation and identities. Surprisingly, this was not the case with

violent tendency because having a history of violence, positively predicted attitude towards nonconforming sexual identities ($\beta = .133$; $p < .05$).

Participation and attitude towards nonconforming gender identities (qualitative evidence)

PM programmes have as their denominator, the application of gender lens to mobilize supports against all forms of gender-based violence and to promote sexual and reproductive health rights. However, implementation approach in aspects of nonconforming gender identities differs. The impact of participation is considered across countries, and we found that participating in PM programmes alone, does not translate to positive attitudes towards nonconforming sexual identities. Rather, there were resistance in some cases, and mixed reactions in other instances. In Rwanda, some of the younger males interviewed maintained that the PM programmes they attended did not capture inclusive sexuality teachings. However, even among those who affirmed to have been exposed to such training, there were affirmative resistance towards nonconforming sexual identities. One of the beneficiaries of PM programmes said:

“I thought that such kind of things never existed. I was surprised to realize from the training that homosexual people in foreign countries have sex together. After the training, I never liked such kinds of acts” (IDI: Rwanda, young male, Participant).

In DRC, attitude remained negative, while PM trainings on inclusive SRHR was seen by some as imposition. For example, a respondent from Mayala in DRC, who has participated in PM programmes that included teachings on inclusive SRHR maintained that:

“Homosexual is a curse, but since the training is forcing us to be close to homosexuals, I will make effort” (IDI: DRC, young male, participant).

When asked how the training has changed his relationship with individuals of nonconforming sexual identities, he said; “I cannot bring them together despite the training” (IDI: DRC, young

male, participant). But in Nigeria, we observed a subtle form of agency among the young males who participated, as they decide parts of the PM contents acceptable to them, and the ones they are not willing to accommodate. During a group discussion with boys, a participant said:

I learnt that there is a need to accord respect to each person's sexuality. But personally, this practice is not acceptable, and I do not believe that it should be allowed to thrive (FGD: Nigeria, Boys, Participants).

Again, a 22-year-old artisan who participated in PM programmes in Nigeria said:

“It is hard for me to believe that a man will overlook the attractive nature of women and rather be attracted to a fellow man sexually...men who have intercourse with fellow men ...are not men at all” (IDI: Nigeria, young male, Participant).

Other factors affecting attitudes towards nonconforming sexual identities

Participating in PM programmes alone does not explain the totality of young males' attitude towards SRHR, nor responses to nonconforming sexual identities. Rather, in all three countries, it was common for resistance to inclusive sexuality to be rooted in factors such as religious teachings. For example, the message of the priest, was a reference point to why some contents of the program were resisted. A young beneficiary of PM programmes said,

“I was acquiring knowledge from the program before I got baptized. Then the priest told us that such an act was unforgivable... I was sure afterwards not to be associated with that kind of behaviour” (IDI: Rwanda, young male, Participant).

Other socio-demographic variables implicated in the qualitative data as likely predictors of attitude towards nonconforming sexual identities include “prior place of residence”, “nature of school attended” and “peer influence”. In some areas, a high level of segregation and abuse is maintained against nonconforming gender identity, which could instigate resistance among younger males to sexual

inclusive teachings. Also, schools were identified as providing grounds for or against nonconforming sexual orientations, especially same sex boarding schools. But when peer influence is based on occupational based interaction, it could lead to acceptance. For example, a 21-year-old instrumentalist in Nigeria, was able to develop positive attitude towards individuals with nonconforming gender identities after PM training, because he had worked with people of nonconforming sexual identities as dancers in their music group. According to him,

“I belong to a musical group, and some of ‘them’ are our dancers. So, I associate with them... that they behave like women doesn’t mean they are different”. (IDI: Nigeria, young male, Participant).

Also, in the qualitative data, gender norms were constantly cited as basis for resistance against nonconforming sexual identities. Mostly in Nigeria, the mere label of gay reaps the person off, of all forms of social recognition as a man. A 22-year-old boy from Nigeria, while expressing this cultural norm, said:

“Men who have intercourse with fellow men are not real men. They are not men at all but are rather possessed by evil spirits”. (IDI: Nigeria, young male, Participant).

However, such barrier is not exhaustive. In one of the focus group discussions with boys in Nigeria, one of the participants who appeared to be a lone voice towards inclusive sexuality, confirmed learning about different sexual identities from PM programmes, and how that helped him to respect diverse views.

Discussion

This study is founded on a conceptual framework that predicts young males’ attitude to nonconforming sexual identities using participation in PM programmes, country of residence, socio-demographics, and gender norms. Findings from the first model indicated that participation does not predict attitude, rather have a tendency of igniting resistance when PM programme content or approach

is perceived by the locals as opposed to religious beliefs and gender norms.

In another report from this project, we isolated individual indicators of positive attitude towards nonconforming sexual identities and reported significant relationship in a few of them²⁶. We argued that PM programmes participants have more positive attitude towards nonconforming sexual identities/practices. However, having isolated data that focuses only on boys and summed all response indicators, the current finding shows that participation does not significantly shape attitude towards nonconforming sexual identities among boys. In a different study, similar selective impact was observed in how most slum men responds to masculinity intervention, such as failing to conceive of gender equality and justice as important for the development²⁷. Although literature on effectiveness of PM programmes have not narrowed their emphasis on how interventions shape inclusive sexual identities outside male-female gender relation²⁸, resistance against such trainings has been discussed through the lens of patriarchal backlash with unintended consequences in Malawi²⁹.

While there are few who developed positive orientations towards inclusive sexuality, the proportion of those resisting the teaching was significant. This affirms previous report of 91% rejection of same-sex sexuality in Nigeria³⁰. Such variations existing within the same country limits the argument that structural barriers are responsible for resistance against nonconforming sexual orientation, such as outright criminalization of nonconforming sexual practice²⁴. Even, in countries where there are constitutional provisions for nonracialism and non-sexism, multiple discrimination and limited access to justice still exist³¹⁻³³. A cross-country study has also revealed that increase in non-religiosity has significant association with acceptance rate of homosexuality³⁴. This was also common in Rwanda and Nigeria, where most program beneficiaries maintained that nonconforming sexual orientations were antagonistic to their religious beliefs. Some even referred to such sexual identity as an outcome of evil spirit. The common nature of such resistance also explains why, in the second model, residing in Nigeria indicated significant negative coefficient on positive attitude. In previous studies, ethnic group, religious background and sexual orientation

significantly influenced tolerance towards nonconforming sexual identities^{35,36}.

Similar expressions against nonconforming sexual identities even in Rwanda indicates the likelihood that religious teachings are instrumental in framing of what is often represented as cultural gender norms^{37,38}, since literary belief in religious teachings is over 50% in some part of the region³⁹. Studies have argued against the attempt to present resistance to inclusive sexuality as indigenously African, by using precolonial examples of dynamic gender roles and identities in the region, while showing how non-indigenous religious teachings may be responsible for the 'recent' phobia against nonconforming sexual orientation⁴⁰. In any case, we cannot argue that instrumentalization of traditional masculine values against inclusive gender or sexuality ideas is a sub-Saharan African phenomenon. It has even been reported in South Africa⁴¹ and was previously common in Europe and America⁴²⁻⁴³. But it is inadequate to ignore its existence when designing interventions to improve sexual and reproductive health and rights in the region. Even in the education system, the role of trainers and learners' social and cultural affiliations are recognized in shaping comprehensive sexuality learning⁴⁴. Also, while violence among men is attributed to traditional masculinity^{45,46}, we observed a significant positive coefficient between violent tendency or record, and positive attitude towards nonconforming sexual identities ($\beta = .133$; $p < .05$). Violent tendencies are often attributed to masculine values^{47,48}, and are expected to be instrumentalized in opposing nonconforming sexual identities. But its inability to translate to such resistance in the three regions among younger male, suggests the need to apply caution in generalizing negative role of masculine values against inclusive sexual health. Even reported gender-based distinctions in the region is regarded more as a product of colonial and external religious teachings and not necessarily an indigenous cultural practice^{49,50}. In all, our study provides early national and comparative cross-country insight on how PM interventions are association with attitudes towards nonconforming sexual identities and orientation. We focused on a critical issue associated with advocating for sexual and reproductive health rights in Sub-Saharan Africa, to address the question of how effective are PM interventions as implemented for inclusive

SRHR? Particularly, how attempt to replicate training model subtly or otherwise, without considering local peculiarities could jeopardize the entire intervention and future contacts with the community. Nevertheless, our findings here are limited in two key areas. First, our focus on this report is boys in poor urban neighbourhoods. Therefore, we did not provide the overall image of the PM programmes as implemented, particularly those that target older men. Secondly, focusing on poor neighbourhood, the findings could not account for the role of class in young males' attitude towards nonconforming sexual orientations.

Conclusion and recommendations

In this study, we investigated positive attitude towards nonconforming sexual identities as an aspect of sexual, reproductive health and rights issues targeted by PM implementers. Our aim was to ascertain the effect of the interventions on young adult males of 16-24 years. Using four steps hierarchical model, our study shows that participation in PM programmes had no significant association with younger males' attitude towards nonconforming sexual identities and orientations. Rather, resistance to PM teachings on positive masculinity were found to be rooted more in religious sentiments, which defines gender-based behavioral expectations, and attribute any contrary inclusivity to spiritual manipulations. On the contrary, PM interventions were based on the assumptions that resistance to SRHR such as inclusive sexuality, are attributes of culturally based masculinity in the region, while neglecting the role of religion in shaping these values. Therefore, the interventions do not seem to be precisely addressed to the fundamental channels through which sexual and reproductive health practices are shaped. Indeed, implementers appear careful not to teach contents that contradict relevant religious beliefs. This suggests the need to interrogate how, and the extent, to which, gender inclusiveness should be part of sexual and reproductive health intervention. This interrogation is important because if resistance is exhibited by young people towards some aspects of PM programmes (such as those targeted at acceptance to gender nonconforming identities/orientations); their disposition to accept other aspects of the training may also be negatively

affected. In extreme cases, the resistance could lead to total community rejection of any gender-based interventions. And this will negatively affect SRHRs in the region.

Contributions of authors

All authors participated in the design and data collection; while the manuscript was prepared by KO, CU, and CI. All authors read and approved the manuscript.

Acknowledgement

The research is funded by the International Development Research Centre (IDRC), Project ID: 109092.

References

- Izugbara C. 'We are the real men': Masculinity, poverty, health, and community development in the slums of Nairobi, Kenya. Department of Social Work, University of Gothenburg, Sweden, 2015.
- Pérez-Martínez V, Marcos-Marcos J, Cerdán-Torregrosa J, Briones-Vozmediano E, Sanz-Barbero B, Davó-Blanes M, Daoud N, Edwards C, Salazar M, La Parra-Casado, D, Vives-Cases C and Ogbu OG. Positive masculinities and gender-based violence educational interventions among young people: A systematic review. *Trauma, Violence, & Abuse*. 2021; 20(10): 1-19.
- Ogbu OG. Gender, sexuality, and violence intervention: sexual minorities in Nigeria. *Peace Studies Journal*. 2020; 13(2): 105-115.
- Johnson K, Scott J, Rughita B, Kisielewski M, Asher J, Ong R and Lawry L. Association of sexual violence and human rights violations with physical and mental health in territories of the Eastern Democratic Republic of the Congo. *JAMA*. 2010; 304(5): 553-562.
- Paszat E. The limits of LGBT rights in Rwanda: International action and domestic erasure. *New Political Science*. 2022; 44(3): 424 – 438.
- Gowen K and Wings-Yanez N. Lesbian, Gay, Bisexual, Transgender, Queer, and Questioning youths' perspectives of inclusive school-based sexuality education. *The Journal of Sex Research*. 2013; 51(7): 788-800.
- Mule NJ, Boss LE, Deeprose B, Jackson BE, Daley A, Travers A and Moore D. Promoting LGBT health and wellbeing through inclusive policy development. *International Journal of Equity in Health*. 2009; 8(19): 1-11.
- Graaff K. Reassessing masculinities-focused interventions: Room and reasons for improvement. *Social and Health Sciences*. 2021; 103 – 123.
- Crone T and Stevenson J. Sexual and reproductive health and rights (SRHR) and sexual orientation, gender, identity and expression and sex characteristics. Summary Report of 3rd MenEngage Global Symposium, 2021; <https://menengage.org/wp-content/uploads/2022/02/SRHR-MenEngage-Ubuntu-Symposium-Discussion-Paper-EN.pdf>
- De Jesus DSV. Imploding the mirage: The Yogyakarta principles and the new era of globalization. *Philosophy Study*. 2022; 12(3): 162-166.
- Park A. Yogyakarta Plus 10: A demand for recognition of SOGIESC. *NC Journal of International Law*. 2019; 44(2): 223 – 272.
- Thoreson RR. Queering human rights: The Yogyakarta Principles and the norm that dare not speak its name. *Journal of Human Rights*. 2009; 8(4): 323-339.
- Holzer L. Smashing the binary? A new era of legal gender registration in the Yogyakarta principles plus 10. *International Journal of Gender, Sexuality and Law*. 2020; 98: 98-133.
- Fabris L, Patch H and Schubert K. Liberalism and the construction of gender (non-) normative bodies and queer identities. *Global contestations of gender rights*. Bielefeld University Press, 2022: 269-286.
- Kuhar R and Paternotte D. Anti-gender campaigns in Europe. Mobilising against equality. London; New York: Rowman & Littlefield; 2017.
- Vida B. New waves of anti-sexual and reproductive health and rights strategies in the European union: the anti-gender discourse in Hungary. *Sexual and reproductive health matters*. 2019; 27(2): 13-16.
- Bem SL. The lenses of gender: Transforming the debate on sexual inequality. New Haven, CT: Yale University Press, 1993.
- Crompton R and Lyonette C. The new gender essentialism—domestic and family 'choices and their relation to attitudes. *The British journal of sociology*. 2005; 56(4): 601-620.
- Delphy C. Rethinking sex and gender. *Women's Studies In Forum*. 1993; 16(1): 1-9.
- Gammel I. Sexualizing power in naturalism: Theodore Dreiser and Frederick Philip Grove. Alberta: University of Calgary Press, 1994.
- Downie R. Revitalizing the fight against homophobia in Africa. Washington: Center for Strategic & International Studies, 2014.
- Gloppen S and Rakner L. LGBT rights in Africa. In Ashford C and Maine, A (Eds.). *Research handbook on gender, sexuality and the law*. Norway: Centre on Law and Social Transformation, 2020: 194-209.
- Müller A, Daskilewicz K, Kabwe ML, Mmolai-Chalmers A, Morroni C, Muparamoto N, Muula AS, Odira V and Zimba M SEARCH. Experience of and factors associated with violence against sexual and gender minorities in nine African countries: a cross-sectional study. *BMC Public Health*. 2021; 21: 357.
- Ibrahim AM. LGBT rights in Africa and the discursive role of international human rights law. *African Human Rights Law Journal*, 2015; 15(2): 263-281.
- Dreier SK, Long JD and Winkler S. African, religious, and tolerant? How religious diversity shapes attitudes towards sexual minorities in Africa. *Politics and Religion*. 2019; 13(2): 1-31.
- Izugbara C, Emina J, Ugwu C, Busgacalia I, Rutayisire F, Atama C, Odii A, Okpara K, Ngomenzey C and

- Onyishi I. Positive masculinity programmes, gender attitudes and practices, and health behaviours among men and boys in poor urban settlements in Democratic Republic of Congo, Nigeria, and Rwanda. International Center for Research on Women, Washing DC, USA; Population and Health Research Institute, Kinshasa, DRC; Gender & Development Studies Research Group, Department of Sociology/Anthropology, University of Nigeria, Nsukka, Nigeria; and The Rwanda Men's Resource Centre, Kigali, Rwanda, 2022.
27. Izugbara C, Tikkanen R and Barron K. Men, masculinity, and community development in Kenya slums. *Community Dev.* 2014; 45: 32-44.
 28. Edström J, Izugbara C, Nesbitt-Ahmed Z, Otieno PE, Granvik M and Matindi S. Men in collective action on SGBV in Kenya: A case study. Evidence Report 70, Brighton: IDS, 2014.
 29. Angotti N, McKay T and Robinson RS. LGBT visibility and anti-gay backlash. *Sociology of Development.* 2019; 5(1): 71-90
 30. Poushter J and Kent N. The global divide on homosexuality persists. Pew Research Center, 2020. <https://www.pewresearch.org/global/2020/06/25/global-divide-on-homosexuality-persists/>
 31. Badewa AS and Dinbabo MF. South Africa's political commitment to the promotion and protection of the rights of vulnerable groups. In: I Ile and O Fagbadebo (Eds.). *Democracy and political governance in South Africa: The African Peer Review Mechanism*, Springer, 2023: 99-112.
 32. Laurah A. Margins within the marginalized: Violence and access to justice of Lesbians, Bisexual and queer women in Africa. In Budoo-Scholtz A and Lubaale EC. *Violence against women and criminal justice in Africa II*. Palgrave Macmillan: Springer, 2021.
 33. Higa D, Hoppe, MJ, Lindhorst T, Mincer S, Beadnell B, Morrison DM, Wells EA, Todd A and Mount S. Negative and positive factors associated with the wellbeing of lesbian, gay, bisexual, transgender, queers, and questioning (LGBTQ) youth. *Youth Soc.* 2014; 46(5): 663-687.
 34. Souza TC and Cribari-Neto F. Intelligence, religiosity and homosexuality non-acceptance: Empirical evidence. *Intelligence.* 2015; 52: 63-70.
 35. Ling HN and Ting SH. Demographic factors influencing tolerance towards LGBT individuals among Malaysians. *Human Behaviour, Development and Society.* 2022; 23(1).
 36. Kozloski MJ. *Assessing the demographics of homosexual tolerance.* (Department of Sociology, University of Chicago). 2012
 37. Palm S. Religion, gender norms and campus rape culture: Building resistance from below. *Politeia.* 2018; 37(2): 1-19.
 38. Piper KN, Fuller TJ, Ayers AA, Lambert DN, Sales JM and Wingood GM. A qualitative exploration of religion, gender norms, and sexual decision-making within African American faith-based communities. *Sex Roles.* 2019; 82: 189-205.
 39. Rule S and Mncwango B. "Christianity in South Africa: Theory and practice." In B Roberts, M waKivilu, YD Davies (Eds.). *South African social attitudes: The 2nd Report. Reflections on the Age of Hope.* Cape Town: HSRC Press, 2010: 185-98.
 40. Brimmer J. "Un-African" African sexualities: Post-colonial nation building and the conditioning of citizenship in sub-Saharan Africa with Analysis of Uganda and Kenya. Central European University. 2010. In https://www.etd.ceu.edu/2020/brimmer_jesse.pdf
 41. Adams LA and Govender K. "Making a perfect man": Traditional masculine ideology and perfectionism among adolescent boys. *South African Journal of Psychology.* 2008; 38(3): 551-562
 42. Baker G and Ricardo C. Young men and the construction of masculinity in Sub-Saharan Africa: Implications for HIV/AIDS, conflict, and violence. Washington, DC: World Bank. 2005: p.27
 43. Council of Europe. *Discrimination on the grounds of sexual orientation and gender identity in Europe (2nd Eds).* Jouve, Paris: Council of Europe Publishing. 2011
 44. Chavaula MP, Zulu JM and Hurtig AK. Factors influencing the integration of comprehensive sexuality education into educational systems in low-and middle-income countries: a systematic review. *Reproductive Health.* 2022; 19(1):196
 45. Malonda E, Llorca A, Zarco A, Samper P and Mestre MV. Linking traditional masculinity, aggression, and violence. In Martin C (Eds.). *Handbook of anger, aggression and violence.* Switzerland: Springer Nature, 2022: 2-26
 46. Malonda-Vidal E, Samper-Garcia P, Llorca-Mestre A, Munoz-Navarro R and Mestre-Escriva V. Traditional masculinity and aggression in adolescence: Its relationship with emotional processes. *International Journal of Environmental Research and Public Health.* 2021;18: 9802, <https://jdoi.org/10.3390/ijerph18189802>
 47. Jewkes R, Jordan E, Myrntinen H and Gibbs A. Masculinities and violence: using latent class analysis to investigate the origins and correlates of differences between men in the cross-sectional UN multi-country study on men and violence in Asia and the Pacific. *Journal of global health.* 2020;10(2): 1-16
 48. Dier A and Baldwin G. *Masculinities and violent extremism.* International Peace Institute and UN security council counter-terrorism Committee Executive (CTED). <https://www.ipinst.org/wp-content/uploads/2022/06/Masculinities-and-VE-Web.pdf>
 49. Ademuson AO. Women domination and oppression in Nigerian society: Implications for sustainable development. *African Journal for the psychological study of social issues.* 2016; 19(1): 24-36.
 50. Uduma DO. Igbo women and political development in Nigeria: Historical perspective. *Journal of Research in Education and Society.* 2015; 6(1): 66-72.