

# Men's adverse experiences during childhood/lifetime and their effects

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GLOBAL MEN AND HIV TECHNICAL WORKING GROUP  
WEBINAR SERIES

10 November 2021

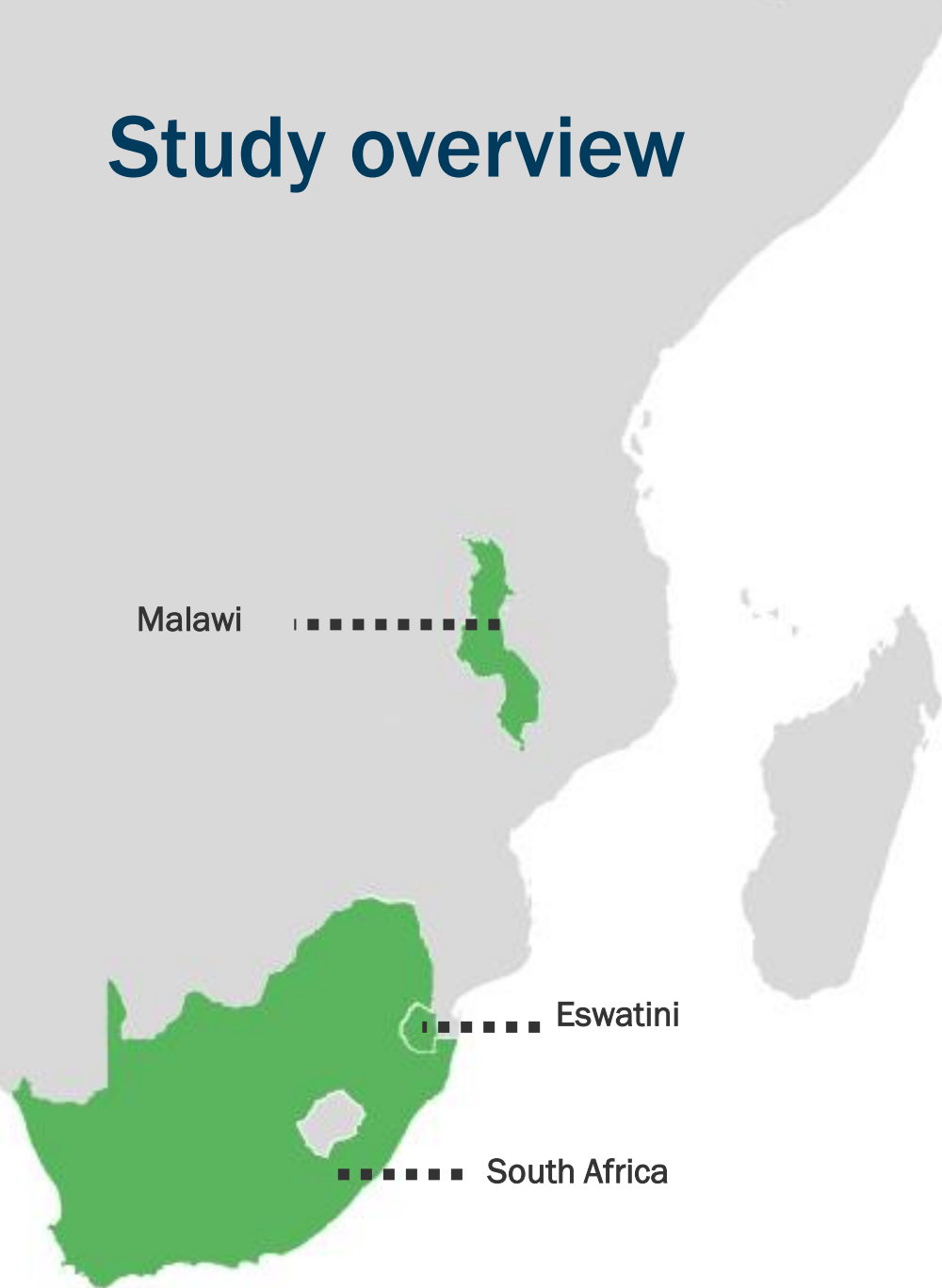


# Background

- Trauma: Emotional response to a deeply distressing/disturbing event ('adverse experiences')<sup>1</sup>
  - For children, often referred to as 'ACES' (adverse childhood experiences)
- Increasing global recognition of pervasiveness and effects of adverse experiences on range of negative outcomes<sup>2-4</sup>
  - Effects on both own health/well-being and their partners/families
- Some of the gaps in evidence:
  - Effects experienced in both childhood and adulthood
  - Cumulative effects, including on different outcomes
  - Documenting across multiple contexts, particularly lower resource settings

<sup>1</sup>American Psychological Association. *Trauma*. Available at: <https://www.apa.org/topics/trauma>; <sup>2</sup>UNICEF. Hidden in plain sight: A statistical analysis of violence against children. 2014; <sup>3</sup>Jewkes RK, et al. Associations between childhood adversity and depression, substance abuse and HIV and HSV2 incident infections in rural South African youth. *Child Abuse & Neglect*. 2010; 34(11):833-41; <sup>4</sup>Gibbs A, et al. Associations between lifetime traumatic experiences and HIV-risk behaviors among young men living in informal settlements in South Africa: a cross-sectional analysis and structural equation model. *JAIDS*. 2019; 81(2):193-201

# Study overview



- Three-country implementation science study with male partners of adolescent girls and young women (AGYW) in the context of HIV prevention program
- Multi-sectoral DREAMS program to reach AGYW directly, support risk reduction among partners, and influence community and structural context that lead to HIV vulnerabilities

# Methods

- Cross-sectional surveys with men, 2017–2018
  - Eswatini (n=1,091): ages 20–34, 19 districts across country
  - South Africa (n=932): ages 20–40, 2 informal settlements in Durban
  - Malawi (n=611): ages 18+, 2 rural districts
- Systematic random sampling at venues where men socialize and meet new partners, and at HIV service sites
- Data analysis
  - Prevalence of adverse experiences during childhood and adulthood
  - Multivariate log binomial regression to assess associations between types and cumulative effects of these experiences on health outcomes

# Measures used

**Childhood** (never/sometimes/often/very often)<sup>1</sup>

“Before I reached 18...”

- I saw or heard my mother being beaten by her husband or boyfriend
- I was beaten at home with a belt, stick, whip, or something else which was hard
- I had sex with someone because I was threatened or frightened or forced
- One or both of my biological parents passed away [orphanhood—yes/no]

**Adulthood/lifetime** (yes/no responses)<sup>2</sup>

- Have you ever witnessed an armed attack on someone?
- Have you ever been robbed at gunpoint or knifepoint?
- Have you ever been or felt that you were close to death?
- Have you ever witnessed someone being raped?

<sup>1</sup>Gibbs A et al. Childhood traumas as a risk factor for HIV-risk behaviours amongst young women and men living in urban informal settlements in South Africa: A cross-sectional study. *PLoS ONE* 2018; 13(4):e0195369; <sup>2</sup>Gibbs A et al. Associations between lifetime traumatic experiences and HIV-risk behaviors among young men living in informal settlements in South Africa: a cross-sectional analysis and structural equation model. *JAIDS* 2019; 81(2):193-201

# Sociodemographic characteristics



Mean age was **~26 years** in all 3 countries



Most were **employed** (51–74%)



Most had **completed secondary school** in South Africa (78%) and Eswatini (62%), while **~1/4** had in **Malawi** (27%)

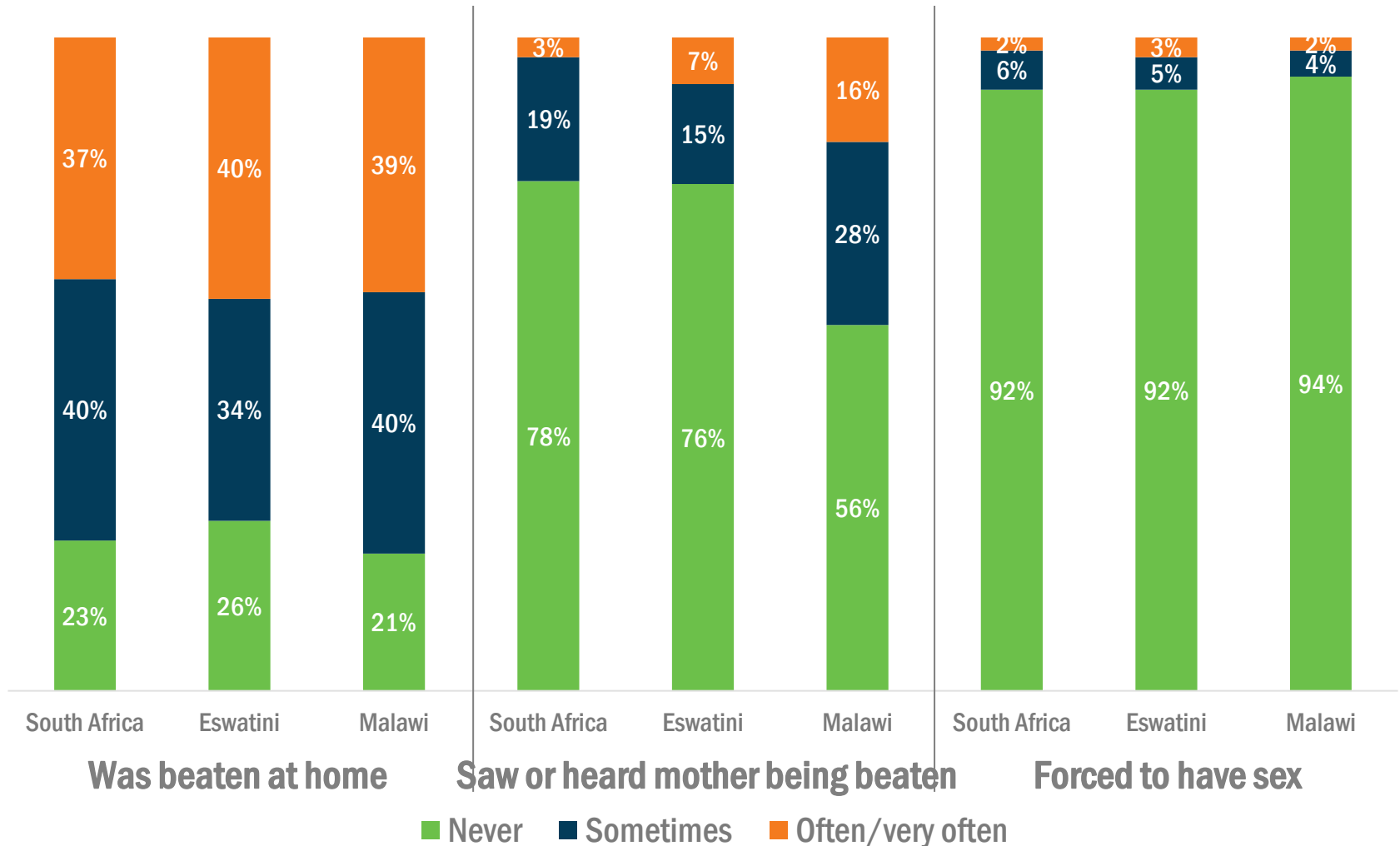


**<1/5** in South Africa (15%) and Eswatini (14%) were **married or cohabiting**, while **1/2** were in **Malawi** (50%)



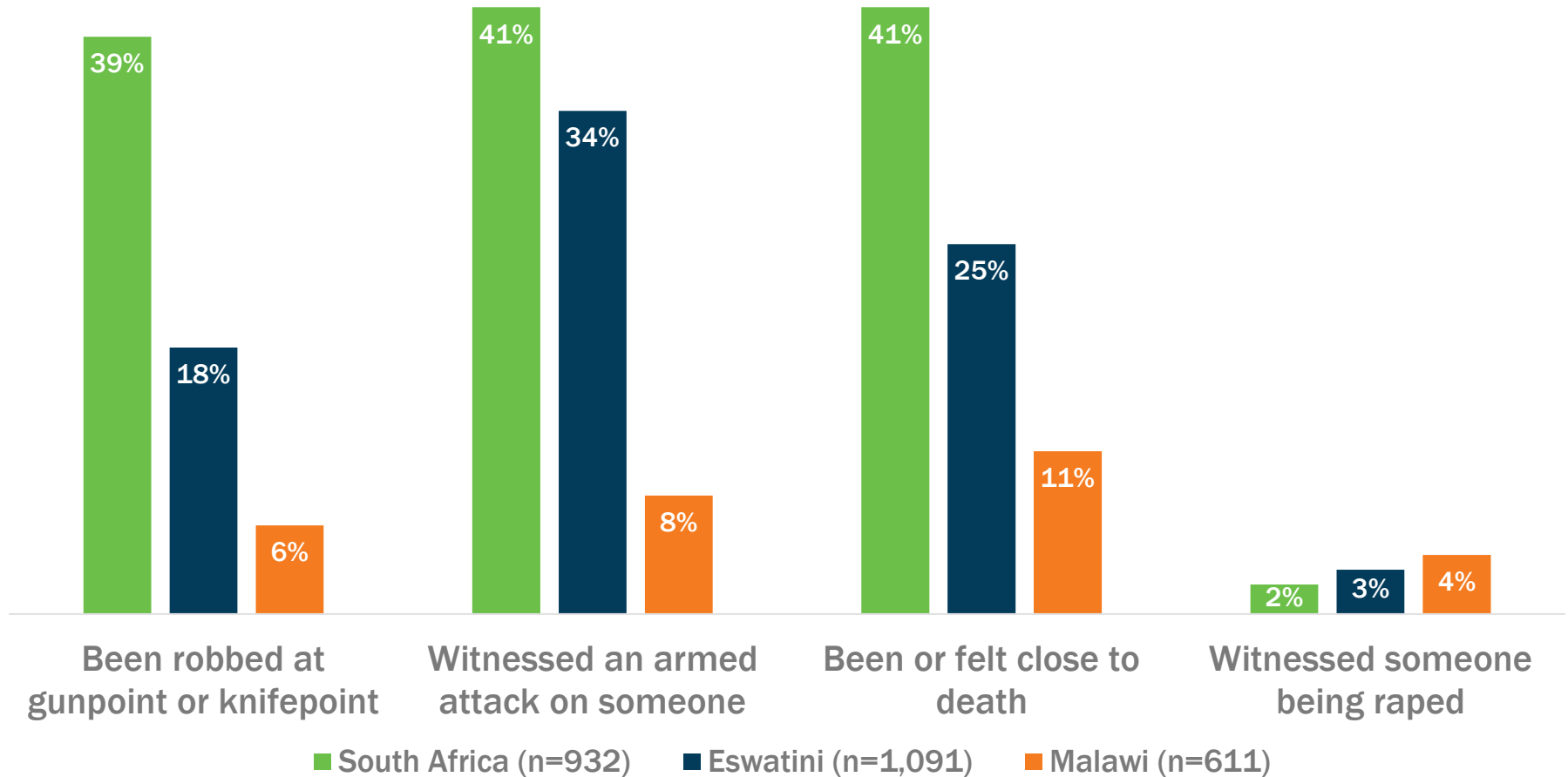
**>1/3** experienced **orphanhood**:  
37% South Africa  
45% Eswatini  
41% Malawi

# Adverse childhood experiences



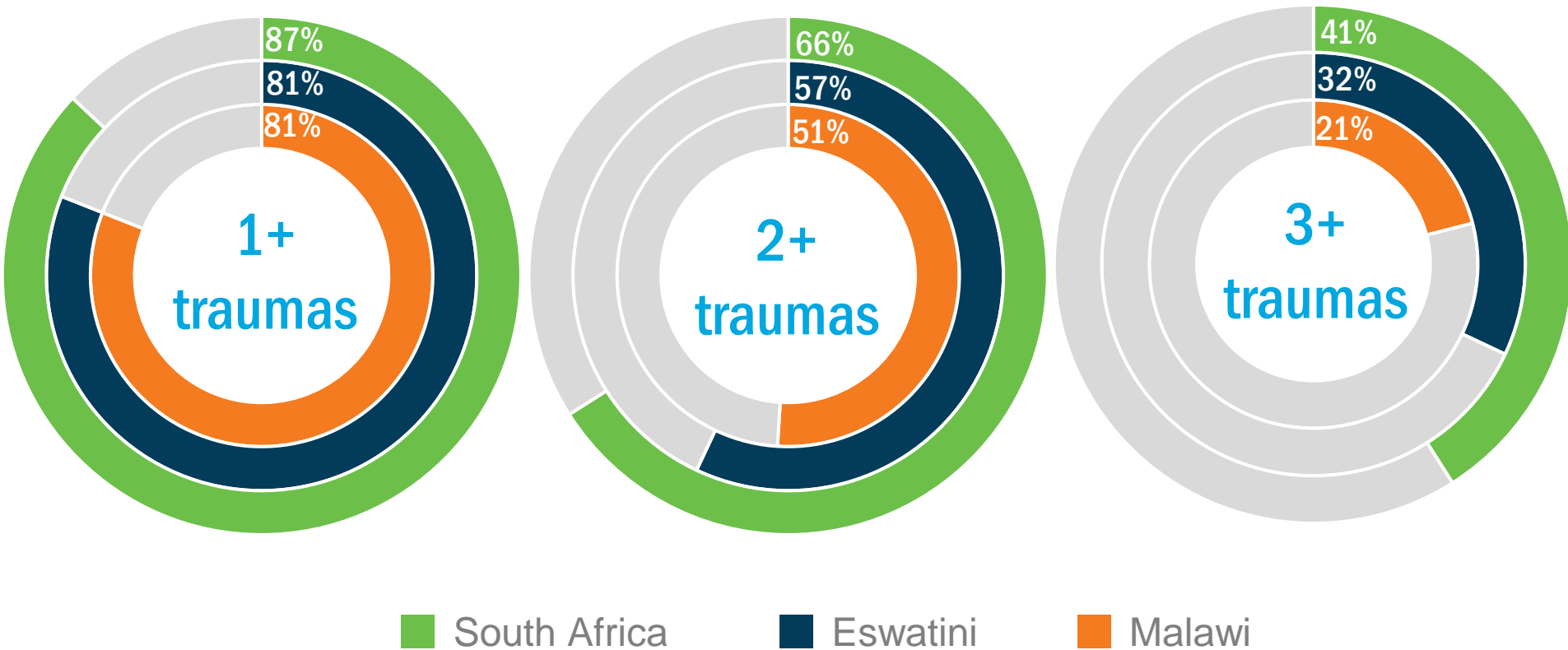
South Africa (n=932), Eswatini (n=1,091), Malawi (n=611)

# Adverse experiences in adulthood/lifetime





# Cumulative adverse experiences across childhood and adulthood



# Prevalence of health outcomes

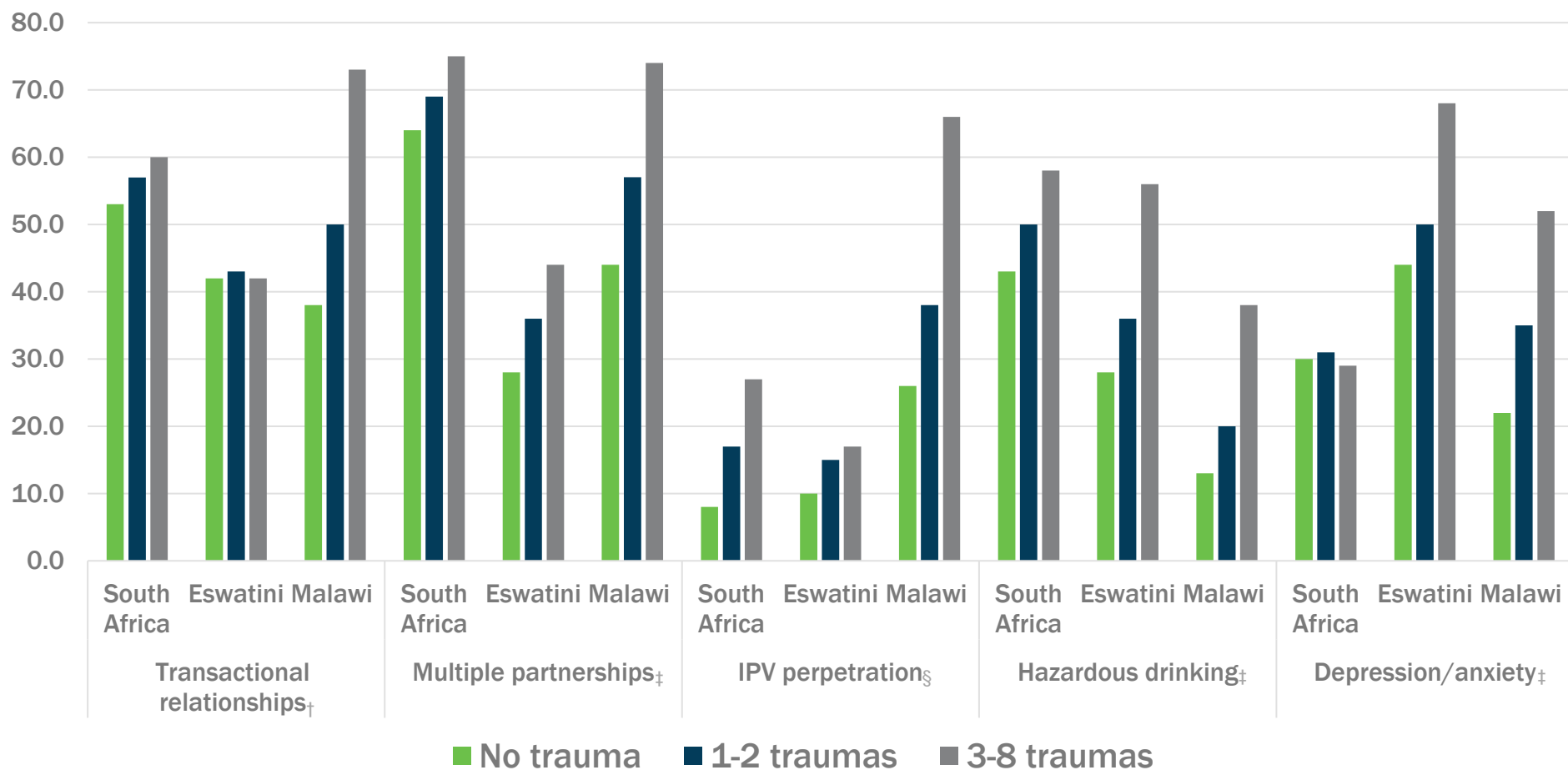
	<b>SOUTH AFRICA (n=932)</b>	<b>ESWATINI (n=1,091)</b>	<b>MALAWI (n=611)</b>
<b>Transactional sexual relationships<sup>a</sup> (<i>giving</i> money/gifts; adapted from STRIVE)</b>	<b>58%</b>	<b>42%</b>	<b>52%</b>
<b>Multiple sexual partners</b>	<b>71%</b>	<b>36%</b>	<b>58%</b>
<b>IPV perpetration<sup>b</sup> (WHO)</b>	<b>20%</b>	<b>15%</b>	<b>41%</b>
<b>Hazardous drinking (AUDIT-C)</b>	<b>52%</b>	<b>38%</b>	<b>22%</b>
<b>Depression/anxiety (PHQ-4)</b>	<b>30%</b>	<b>19%</b>	<b>36%</b>

<sup>a</sup> Among all data available: men who had sex in the last 12 months (n=741, n=922, and n=603 in Eswatini, South Africa, and Malawi, respectively).

<sup>b</sup> Among all data available: men who had sex in the last 12 months in Eswatini and South Africa (n=741 and n=922, respectively).

# Strong dose-response relationship

*Frequency*



■ No trauma ■ 1-2 traumas ■ 3-8 traumas

<sup>†</sup>Eswatini (n=741), South Africa (n=922), Malawi (n=603)

<sup>‡</sup>Eswatini (n=1,091), South Africa (n=932), Malawi (n=611)

<sup>§</sup>Eswatini (n=741), South Africa (n=922), Malawi (n=611)

# Health effects of adverse experiences

	South Africa	Eswatini	Malawi
<b>Any adverse childhood experiences</b>			
Transactional sexual relationships <sup>†</sup>	1.95***	1.13	2.04***
Multiple sexual relationships <sup>‡</sup>	1.30	1.41*	2.15***
IPV perpetration <sup>§</sup>	2.03***	1.79*	1.95**
Hazardous drinking <sup>‡</sup>	1.08	1.16	2.18**
Depression/anxiety <sup>‡</sup>	2.39***	1.30	1.88**
<b>Any adverse experiences as adults</b>			
Transactional sexual relationships <sup>†</sup>	1.14	0.96	1.34
Multiple sexual relationships <sup>‡</sup>	1.21	1.66***	1.13
IPV perpetration <sup>§</sup>	2.37***	1.40	1.78**
Hazardous drinking <sup>‡</sup>	1.50**	2.35***	1.01
Depression/anxiety <sup>‡</sup>	0.56***	1.81***	1.31

\*p<0.05; \*\*p<0.01; \*\*\*p<0.001

Values presented are Odds Ratios from multivariate analyses adjusted for age, education, marital status, and site.

<sup>†</sup>Eswatini (n=741), South Africa (n=922), Malawi (n=603); <sup>‡</sup>Eswatini (n=1,091), South Africa (n=932), Malawi (n=611); <sup>§</sup>Eswatini (n=741), South Africa (n=922), Malawi (n=611)

# Compounding effect of experiencing both childhood and adult adverse experiences

	South Africa			Eswatini			Malawi		
	(ref= <i>none</i> )	Any child	Any adult	Both	Any child	Any adult	Both	Any child	Any adult
Transactional sexual relationships <sup>†</sup>	1.07	0.79	1.24*	1.12	1.01	1.05	1.43**	1.14	1.57**
Multiple sexual partners <sup>‡</sup>	1.13	1.09	1.13	1.19	1.38	1.55**	1.86**	0.63	2.40**
IPV perpetration <sup>§</sup>	1.81	2.07*	3.59***	2.46*	2.48	2.77**	1.50*	1.36	2.06***
Hazardous drinking <sup>‡</sup>	1.05	1.25	1.28*	0.95	1.56**	1.53**	1.49	0.43	1.67
Depression/anxiety <sup>‡</sup>	1.36	0.33***	1.03	1.01	1.14	1.37***	1.70**	1.63	1.84**

\*p<0.05; \*\*p<0.01; \*\*\*p<0.001

Values presented are Risk Ratios from multivariate analyses adjusted for age, education, marital status, and site. For multiple partners outcome in Eswatini, odds ratios are presented instead of risk ratios.

<sup>†</sup>Eswatini (n=741), South Africa (n=922), Malawi (n=603); <sup>‡</sup>Eswatini (n=1,091), South Africa (n=932), Malawi (n=611);

<sup>§</sup>Eswatini (n=741), South Africa (n=922), Malawi (n=611)

# Summary of findings

- Men's adverse experiences are very common in each country
  - Half reported 2 or more adverse experiences; up to one-third 3 or more
  - Adverse childhood experiences more consistent than adulthood
- Adverse experiences associated with range of negative health outcomes
  - True whether the experiences took place in childhood or adulthood; worse if both
  - Strong dose-response relationship
- Affects both men and their partners/families

# Implications

- Clear need for programming and policy to:
  - Prevent interpersonal violence within families and violence within communities
  - Support adaptive coping with past adverse experiences and related trauma
- Options exist to do both<sup>1-5</sup>
  - Community-based norm change; couples interventions
  - Psycho-social and psychiatric support
- Learnings required around:
  - Contextual specificity and refinement
  - Scale-up and sustainability/institutionalization

<sup>1</sup>American Psychological Association. Clinical practice guideline for the treatment of posttraumatic stress disorder (PTSD) in adults. Washington, DC; 2017; <sup>2</sup>Murray LK et al. A common elements treatment approach for adult mental health problems in low-and middle-income countries. *Cognitive and behavioral practice*. 2014;21(2):111-23. <sup>3</sup>Abramsky T. et al. Findings from the SASA! Study: a cluster randomized controlled trial to assess the impact of a community mobilization intervention to prevent violence against women and reduce HIV risk in Kampala, Uganda. *BMC medicine*. 2014;12(1):122. <sup>4</sup>Knerr W, Gardner F, Cluver L. Improving positive parenting skills and reducing harsh and abusive parenting in low-and middle-income countries: A systematic review. *Prev Sci* 2013; 14(4):352–63; <sup>5</sup>Doyle K et al. Gender transformative Bandedereho couples' intervention to promote male engagement in reproductive and maternal health and violence prevention in Rwanda: Findings from a randomized controlled trial. *PLoS ONE* 2018; 13(4):e0192756.

# Additional findings/selected publications

Pulerwitz, J., Gottert, A., Siu, G., Shabangu, P., Mathur, S. “A man without money getting a sexual partner? It doesn’t exist in our community”: Male partners’ perspectives on transactional sexual relationships in Uganda and Eswatini. *Culture, Health and Sexuality* 2021. Apr 6:1-16. doi: 10.1080/13691058.2021.1904521.

Project SOAR. “Characteristics and relationship dynamics of male partners of adolescent girls and young women in Malawi,” Project SOAR Results Brief. Washington, DC: Population Council 2021.

Gottert A, Pulerwitz J, Heck CJ, Cawood C, Mathur S. Creating HIV risk profiles for men in South Africa: a latent class approach using cross-sectional survey data. *Journal of the International AIDS Society* 2020; 23(Suppl 2): e25518. doi: 10.1002/jia2.25518

Reynolds Z, Gottert A, Luben E, Mamba B, Shabangu P, Dlamini N et al. Who are the male partners of adolescent girls and young women in Swaziland? Analysis of survey data from community venues across 19 DREAMS districts. *PLoS ONE* 2018; 13(9): e0203208.

Gottert A, Pulerwitz J, Siu G, Katahoire A, Okal J, Ayebare F et al. Male partners of young women in Uganda: Understanding their relationships and use of HIV testing. *PLoS ONE* 2018; 13(8): e0200920. doi: 10.1371/journal.pone.0200920

Mathur S, Okal J, Musheke M, Pilgrim N, Patel SK, Bhattacharya R et al. High rates of sexual violence by both intimate and non-intimate partners experienced by adolescent girls and young women in Kenya and Zambia. *PLoS ONE* 2018; 13(9): e0203929. 10.1371/journal.pone.0203929

Pulerwitz, J, Mathur S, Woznica D. How empowered are girls/young women in their sexual relationships? Relationship power, HIV risk, and partner violence in Kenya. *PLoS ONE* 2018; 13(7): e0199733. doi: 10.1371/journal.pone.0199733



# Acknowledgements

**Population Council:** Tracy McClair, Sanyukta Mathur, Nanlesta Pilgrim, Louis Apicella, Lyson Tenthani, Kasoda Kondwani, Sherry Hutchinson

**Epicentre (South Africa research partner):** Cherie Cawood, Elsa Marshall, David Khanyile, Dominique O'Donnell, Research assistants. *In collaboration with:* South African DOH, SANAC, eThekweni Municipality, PEPFAR-South Africa, DREAMS implementing partners

**Institute for Health Measurement (Eswatini research partner):** Patrick Shabangu, Kelvin Sikwibele, Bhekumusa Lukhele, Feziwe Makhubu, Vimbai Tsododo, Bheki Mamba, Research assistants; Muhle Dlamini (SNAP); Muziwethu Nkhambule (NERCHA). *In collaboration with:* Ministry of Health, NERCHA, SNAP, PEPFAR-Eswatini, DREAMS implementing partners

**University of Malawi, College of Medicine (Malawi research partner):** Effie Chipeta, Wanangwa Chimwaza, Vincent Samuel, Victor Mwapasa

**Study participants**

With funding support from the **Bill & Melinda Gates Foundation**

PEPFAR and USAID through **Project SOAR (Cooperative Agreement AID-OAA-A-14-00060)**



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The following full source citation must be included:**

Julie Pulerwitz, Tracy McClair, Ann Gottert, Patrick Shabangu, Cherie Cawood, Effie Chipeta, Sanyukta Mathur. 2021. “Traumas experienced by men in childhood and adulthood: Prevalence and effects on health and HIV risk in three countries.” Presented at Global Men and HIV Technical Working Group Webinar Series; 10 November.

A paper related to this presentation is currently under review at *AIDS*.

**Population Council DREAMS IS resources available at:**

**[https://knowledgecommons.popcouncil.org/series\\_dreams\\_is/](https://knowledgecommons.popcouncil.org/series_dreams_is/)**

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