

IMAGES Country Study Documentation

India

2011

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KEY OBJECTIVES

The International Men and Gender Equality Survey (IMAGES) is a multi-country study on men's and women's realities, attitudes and behaviors around gender equality, including childhood experiences of violence, gender relations, partner relations and relationship satisfaction, gender-based violence and sexual behavior. IMAGES surveys are conducted together with qualitative research to map masculinities, contextualize survey results, and provide detailed life histories that illuminate quantitative findings. The questionnaire is adapted to country and regional contexts, with approximately two thirds of the questions being standard across settings.

There is a growing understanding of how gender influences men's and women's expectations, attitudes, and behaviors and how gender is a growing determinant of social and economic wellbeing. Sustainable Development Goal #5 includes targets around the elimination of violence and harmful practices, recognizing and valuing unpaid care, ensuring women's participation in leadership and public life, and ensuring universal access to sexual and reproductive health and rights.

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KEY OBJECTIVES

At the root of gender-based violence are gender expectations, norms, and power dynamics which shape behaviors, opportunities, and material realities. Addressing these issues requires interventions that involve men and boys and considers deeply rooted gender dynamics between men and women across multiple dimensions of daily life. The role of men and their own gendered experiences, however, are rarely acknowledged in policies, programs, and public discourse.

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KEY OBJECTIVES

The goal of IMAGES is to provide data and insight to understand how gender and masculinities impact a wide range of well-being and development outcomes. IMAGES is one of the most comprehensive household studies ever carried out on men's and women's attitudes and practices on a wide variety of topics related to gender equality. The study's emphasis on understanding gendered dynamics influencing a wide range of men's and women's behaviors complements existing research and policy initiatives. The data and conclusions generated from IMAGES have also served as the foundation for program development and have informed national-level discussions and the development of new policies.

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DATA COLLECTION

The IMAGES study in India collected data through quantitative surveys. Baseline Survey Surveys were undertaken using the IMAGES survey tool which included questions on:

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DATA COLLECTION

Socio demographic information and status, childhood information (gender relations in childhood household, gendered experiences, discipline, difficult life circumstances), household relations (time use and division of labor in the household, final say in the household, empirical and normative expectations), parenting and relationship with children (antenatal care, time use and caregiving, non-residential biological children, child discipline techniques, empirical and normative expectations), women's participation and public life, laws and policies, violence in relationships (relationship control, violence against women, rape myths, empirical and normative expectations), health and quality of life (general health information, health seeking behavior, substance abuse, life satisfaction and locus of control, depression, sexual and reproductive health, attitudes about family planning, fertility aspirations and family planning, sexually transmitted diseases, abortion), attitudes on relations between men and women, life experiences (neighborhood violence, social cohesion), media exposure, and survey satisfaction.

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DATA COLLECTION

The survey was translated into local languages in which fieldwork took place.

Respondents were selected through multi-stage sampling. First, three districts in Delhi were randomly selected, including Central Delhi, East Delhi, and South Delhi and 15 urban wards from Delhi and five urban wards from Vijayawada were selected using Probability Proportion to Size (PPS) sampling. PPS sampling has the advantage of attributing different probabilities of selection to communities according to their respective size. Second, from these wards, two Census Enumeration Blocks (CEB) were randomly selected from each ward. Third, a complete house listing for each CEB was completed and a list of eligible respondents marked. Using systematic random sampling, 30 households were selected for interviewing eligible men and 10 households were selected for interviewing eligible women in each CEB in Delhi. 34 households were selected for interviewing eligible men and 14 households were selected for interviewing eligible women in each CEB in Vijayawada.

2 DATA COLLECTION

A team of eleven interviewers conducted questionnaires in Delhi and Vijayawada. The research team visited each of the selected sample areas and prepared up-to-date maps of the areas, assigned numbers to structures, recorded addresses of these structures, and identified structures that were residential. A structure was defined as a freestanding building with one or more rooms and which may be used as a residence, establishment (including as a shop, business house, office, factory, etc.), or for multiple purposes (shop and residence combinations, etc.). Structures therefore included apartment buildings, houses, and thatched huts.

There may have been more than one household living within a structure. Household was defined as a person or group of persons who usually live together, eat together, and share a common kitchen. Household was differentiated from family, which only includes people who are related (a household includes people who live together, whether they are related or unrelated).

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DATA COLLECTION

If the selected household had moved away and the structure was vacant, the interviewer considered the structure ineligible. If there were no eligible respondents in a household, no questionnaire was completed. If the eligible respondent was not available, a neighbor or family member was asked when the respondent would return. Interviewers attempted to contact respondents at least three times, visiting at different times of the day. If the respondent refused to participate, the interviewer asked if there was a more convenient time. If the respondent still refused to participate, the interviewer reported it to his/her supervisor, who decided on the action to be taken. If an interview was incomplete, the interviewer arranged an appointment to see the respondent as soon as possible to obtain the missing information.

Given the sensitivity of the topic, male interviewers interviewed male respondents and female interviewers interviewed female respondents. Only one interview was conducted from selected households to ensure that different households were interviewed for men and women.

2 DATA COLLECTION

The Kish method was used if there was more than one eligible respondent in the household which allowed the data collection team to randomly select respondents from a household without bias and provide proper documentation, so the sample can be weighted during data analysis. In the Kish method, selected households receive a unique number, and each number is associated with a specific Kish table. The summary of eight table determines which individual from a household should be selected based on the assigned Kish table number and the number of adults in a household. The household coversheet includes components of the household list and the summary of eight table and is used to rank eligible individuals in the household and select the individual to be interviewed, regardless of presence during the initial contact.

2 DATA COLLECTION

After introducing themselves, the interviewers asked for the age and sex of each eligible participant in a household, listed the household members on the Kish coversheet, ranked the household members by decreasing age, and selected the participant by using the circled Kish table. An example of a ranked household list is provided below.

Sex	Age	Adult Number	Selected Respondent
M	61	1	
F	31	5	
M	27	3	
F	58	4	X
M	35	2	

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DATA COLLECTION

Interviews were conducted privately in order to receive frank and honest answers from respondents. Interviews were conducted with other individuals present as a last resort. An extra effort was made to secure the privacy of interviews if the respondent was a wife and the other individual present was her husband.

Before each interview, respondents were told about the importance of the information being collected to both his/her society and nation. Interviewers explained that the data collected would be used to study men and women's health, family, and relationships, answers would remain confidential, the respondent could choose not to answer any question, the amount of time that the interview would likely take (usually 1 hour), whether the respondent had any questions before starting, and whether the respondent agreed to participate.

2 DATA COLLECTION

Interviewers explained the purpose of the study, how the study occurs, confidentiality, risks to participants (minimal aside from answering questions that may be embarrassing, which were optional), benefits of participating (including helping the researchers understand the problems that men and women face and design appropriate responses), and the respondent's right to refuse or withdraw at any time. A list of health services in the respondent's community was provided to him/her at the end of the interview.

Interviewers used pens with blue ink to complete questionnaires and were instructed not to use pencils, and supervisors used red ink. Questions with pre-coded responses were recorded with a code assigned to each response. Questions permitting only one response were recorded by circling the number (code) that corresponded to the respondent's answer. Questions with pre-coded multiple responses were recorded by circling all responses provided in the respondent's answer. Questions with no code were recorded in verbatim.

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SAMPLE SIZE AND LOCATION

Data from the IMAGES baseline survey was collected from 2,000 respondents from ages 18 to 59, 1,500 of whom were male and 500 who were female. 1,000 male and 300 female respondents were from Delhi (including Central Delhi, East Delhi, and South Delhi), and 500 male and 200 female respondents were from Vijayawada. Allowing for an estimated 10% non-response rate, the target sample group was 2,200 individuals, 1,650 men and 550 women.

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RESPONSE RATE

A total of 2,000 interviews were conducted for the IMAGES survey. The following table shows a summary of the interview results:

Information about the number of partial interviews, non-interviews (including respondents who refused or were unable to complete the interview), and other cases of ineligibility are unknown.

Survey Site	Sex of Respondent	No. Households Visited	Success	Response Rate
Delhi	Men	1,917	1,037	54%
	Women	655	313	48%
Vijayawada	Men	933	497	53%
	Women	496	208	42%

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WEIGHTING PROCEDURE

No additional information available in this section.

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MISSINGNESS ASSESSMENT

No additional information available in this section.

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QUALITY CONTROL

Questionnaires were checked for completeness and accuracy. Interviewers checked completed interviews to make sure that all questions were asked, responses were neatly and legibly recorded, answers were clear and reasonable, and that the skip instructions were followed correctly. Interviewers were allowed to make minor corrections based on an obvious misreporting of a response, but any serious errors were required to be clarified by the respondent. Interviewers reported any problems they experienced in locating addresses or completing interviews to supervisors, who generally instructed interviewers to keep their assignment sheet and pending questionnaires to use when revisiting those households or respondents the next day.

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QUALITY CONTROL

Supervisors observed some interviews to ensure that interviewers were performing interviews, asking questions, and interpreting answers correctly; spot checked addresses and respondents; reviewed questionnaires to make sure they were complete and internally consistent; met with members of the team on a daily basis to discuss performance and provide future work assignments; solved problems that interviewers faced, including finding assigned households, understanding concepts in the questionnaire, or dealing with difficult respondents; and helped interviewers with any physical or emotional problems they faced during fieldwork. Supervisors were able to re-assign a respondent to a different interviewer if necessary.

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INTERVIEWER TRAINING

All interviewers received information and instruction on how to conduct interviews during a 5-day training. The training included information on the objectives of the study and conducting practice interviews, including in local languages. It also provided an overview of different methods of sampling and justification for this study's chosen method (i.e. sample surveys vs. enumeration). Interviewer responsibilities were described as consisting of locating households in the sample that are assigned to them by the supervisor of the team; identifying eligible respondents in selected households; conducting interviews of the eligible respondents; checking completed interviews to make sure that all questions were asked and that responses were neatly and legibly recorded; and return to the household to interview respondents who could not be contacted during the initial visit. The training also included a description of supervisors' responsibilities and the scenarios in which interviewers might be disturbed by household conditions or the respondents they would interview.

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INTERVIEWER TRAINING

Interviewers were also trained on conducting interviews successfully. Information was provided on building rapport with residents, including how the respondent's first impression would influence his/her willingness to participate, maintaining a neat and friendly appearance, and providing a letter or identification card stating that he/she works with the IMAGES field organization. Tips for conducting successful interviews included making a good first impression (opening with a smile and salutation), having a positive approach (rather than adopting an apologetic manner), stressing the confidentiality of responses (individual names would not be used for any purpose and information would be pooled to write a report for policymakers and people who run health and intervention programs), answering respondents' questions frankly (answering questions about the survey and respondent selection at any time, but deferring to answer questions about topics in the questionnaire until after the interview), and interviewing respondents alone.

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INTERVIEWER TRAINING

Additional tips for conducting successful interviews included staying neutral throughout the interview, never suggesting answers to respondents, retaining the wording and sequence of questions as specified in the questionnaire, handling hesitant responses tactfully, and refraining from forming expectations or hurrying the interview. The training further consisted of general procedures for completing the questionnaires, including contacting procedures, identifying eligible respondents, checking completed questionnaires, returning work assignments.

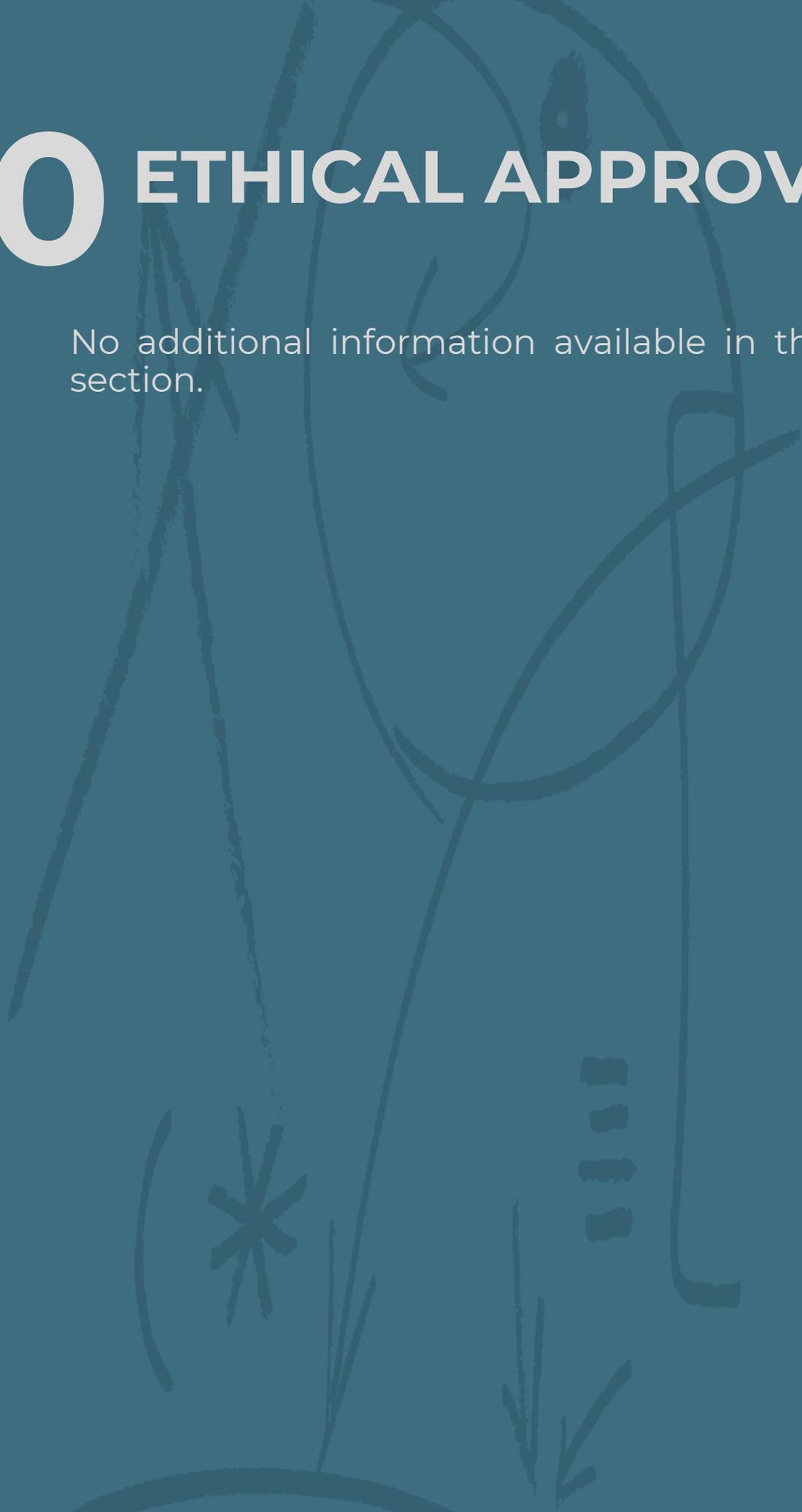
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DATA COLLECTION PARTNER

Data collection was conducted in cooperation with the International Center for Research on Women (ICRW).

10 ETHICAL APPROVAL

No additional information available in this section.



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NOTES ON STUDY

No additional information available in this section.



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