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'Change really does need to start from home': A Qualitative Exploration of Individual and

Relationship Change in Married Couples in Nepal

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2018

Abstract

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By Susi McGhee

Intimate Partner Violence (IPV) is a pervasive public health problem, affecting 30% of women worldwide. In Nepal, approximately 33% of women report lifetime experience of IPV, and this is even more prevalent in rural Nepal, where as many as 54% of women report lifetime physical or sexual violence. Contributing factors include individual, interpersonal, community and societallevel factors, and the interplay between them. Engaging men and couples together to reduce and risk for IPV has been successful in numerous settings. Most effective have been gender transformative interventions which incorporate reinforcing components, such as mass communication, group education and community engagement activities. The Change Starts at Home project is one such intervention which engaged married couples together to reduce and prevent IPV through a social and behavior change communication strategy, Listening Discussion Groups and community engagement and mobilization activities. Within the *Change* project, indepth interviews were conducted with 18 married couples (n=36 individuals) to identify change over time. Through theoretically driven analyses, this study analyzed in-depth interviews conducted at five-months post-baseline. Case- and code-based analysis and thematic summaries were used to assess individual- and relationship-level change, couple concordance and reporting patterns within and among couples. Individual- and relationship-level changes emerged within all couples. Individual changes included alcohol use and roaming tendencies in husbands. Relationship-level changes comprised gendered labor roles, marital communication, marital and sexual decision-making, quarreling and conflict resolution and experience of IPV. Engaging couples in tandem curriculums successfully shifted individual behavior in men and marital dynamics which underpin risk for IPV. More must be done to determine diffusion and sustainability of such change over time.

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CHAPTER I. INTRODUCTION

The Problem

Intimate partner violence (IPV) adversely affects individuals, their families and communities worldwide. Globally, an average of 30% of women experience violence within their intimate partnerships,¹ which is estimated to be higher (33%) in Nepal²⁻⁴ and even greater for women in rural areas of Nepal.^{2,5} IPV has been associated with short and long term health outcomes for victims, including psychological, physical and fatal consequences.^{1,6-12} On a broader scale, IPV costs the world over 5% of the global Gross Domestic Product each year.¹³ Women living in places with significant social and gender inequities and rigid societal norms and expectations, such as Nepal, are at increased risk for experiencing IPV.^{9,14-17}

In an effort to address this pervasive public health concern, public health researchers have implemented and assessed various interventions, which have more recently begun to engage men alongside women, as agents in this effort. Effective approaches include gender-transformative (aiming to shift norms related to gender roles and expectations) interventions which implement multiple components to reinforce the intervention concepts and support behavioral and normative changes. Studies of such interventions have taken place in a variety of settings; however, to my knowledge, no such violence prevention interventions have been assessed in rural Nepal beyond the Change Starts at Home Project (*Change*). *Change* is a mixed-methods, two-armed, single-blinded, randomized trial in three rural districts of Nepal, assessing a multi-component, theoretically-based intervention to reduce and prevent IPV in rural Nepal.²¹

Problem Justification

The breadth of research identifying adverse health outcomes associated with IPV and growing body of evidence for engaging men and couples together encourages the exploration of

intervention impact in high-risk areas, such as rural Nepal. As part of a broader effort to assess the *Change* project, this thesis will explore individual- and relationship-level change reported by participants, their partners and their marriages within the first five months of program participation. In addition to identifying information on change, or lack thereof, in key individual and interpersonal processes, this thesis will also shed light on potential impact at the halfway point of a 9-month intervention.

Theoretical Framework

The theoretical framework for *Change* is an integrated conceptual model comprising four complimentary theories of behavior change; the Social-ecological Model (SEM), Steps to Behavior Change Framework, Integrative Model of Behavior Prediction and the Diffusion of Innovations Theory. By addressing the process of behavior change as a nonlinear process, influenced by factors across the social-ecological model, this integrated approach intended to foster sustainable change in Nepali individuals, families and communities. This thesis employed the SEM to explore reported change among participants after five months of program participation.

Statement of Purpose

This thesis qualitatively explored change among participants and their marriages in the first five months of participation in *Change*. The findings from such exploration increase understanding about engaging couples together to reduce and prevent violence through theoretically-based interventions.

Before delving into the influences and associations of intimate partner violence in Nepal, it is imperative to acknowledge that no society can nor should be reduced to generalized categorizations. While this thesis aims to build on existing understanding of the high prevalence

of violence in Nepal, it further intends to ensure that no reader concludes that the people of Nepal are by any means a monolith.

CHAPTER II. BACKGROUND AND SIGNIFICANCE

Intimate Partner Violence

Intimate Partner Violence (IPV), one of the most common forms of violence against women and girls (VAWG), is defined as one or more acts of violence committed by a current or former partner against a person over the age of fifteen.^{1,7,22,23} IPV includes physical violence, such as pushing or shoving, hitting, kicking, throwing objects at, dragging, strangling, burning, threatening with or using a weapon to harm a partner; sexual violence, including forced, coerced or degrading sexual acts; emotional or psychological abuse, such as intimidation, humiliation or isolation; controlling behavior, such as monitoring the victim's whereabouts at all times or demanding permission before the victim leaves the home, and financial abuse, such as withholding access to income or employment opportunities.^{1,7,22,23}

Global and Regional IPV Prevalence

Previously believed to be an infrequent or rare occurrence, IPV has been revealed as a globally pervasive public health problem with vast consequences. Previous research has found that between 20% and 61% of ever-partnered women have experienced violence at the hands of a partner, with a global average of approximately 30%.^{1,7,22,23} Southeast Asia is consistently among the regions with the highest proportions of reported IPV.^{1,24,25} Previous research in Nepal has determined that over 50% of women have experienced some form of violence in their lives (child maltreatment, sexual assault, IPV, etc.), and approximately 33% of Nepali women reported lifetime experiences of IPV.^{2,4} A study conducted with women in India and Nepal found that on

average, the first experience of violence occurred around age 20, and that among married Nepali and Indian women who reported IPV, over 85% experienced first violence before the age of 24. ¹⁵ Experience of sexual violence within marriage is also common. One qualitative study determined that nearly 75% of their participants had experienced sexual violence at the hands of their husbands ²⁶ and a quantitative study found that 46% of young married women had experienced lifetime sexual violence, 31% of whom reported this within the past 12 months. ²⁷ Further, prevalence in rural Nepal is determined to be even higher, with 54% of women reporting lifetime physical or sexual violence, ^{2,5} and women living in the Terai region, specifically, have been determined to be at greatest risk for IPV. ⁵

Associated Health Outcomes and Costs

Research has revealed significant short and long term health effects of IPV, for both victims and offenders, including physical, psychological and fatal outcomes.^{7-9, 23, 27-31} Non-fatal physical injuries associated with IPV victimization include but are not limited to damage to tissue and musculoskeletal injury.^{1,8, 22, 27, 30, 32-34} Mental health outcomes include depression, anxiety, post-traumatic stress disorder, eating disorders, substance abuse and suicidal ideation.^{1,8, 22, 27, 35-43} Female survivors of IPV often have compromised sexual and reproductive health, such as sexually transmitted infections, including HIV, unwanted pregnancy and unwanted abortion, intended pregnancy loss and low birth weight among other gynecological issues.^{1,8, 22, 24, 43-49} 6, 11, 27, 40, 50-52 IPV has also been associated with non-communicable disease, such as chronic pain, hypertension and cardiovascular problems.^{1,49} Further, victims of IPV are at high risk of fatality by homicide or suicide.^{1, 22, 53-55} Globally, the average prevalence of IPV-related homicide is 13%, with an estimated 38% of female murders committed by current or former intimate partners.^{1,56} Estimated to be one of the costliest forms of violence, IPV costs the world over 5% of the World Gross Domestic Product, amounting to nearly 4,500 billion USD each year.¹³

Contributing Factors to IPV Prevalence

Globally, substantial research has determined that high IPV prevalence is attributable to various factors across the SEM. Rigid societal norms and expectations, marked by male dominance and female submission, compounded by existing gender inequities and individual risk factors, increase women's risk of IPV.^{14,15,17} Previous research has determined that in societies that ascribe to traditional gender roles, such as Nepal, women are at increased risk, vulnerability and acceptability of violence against them.^{9,14,16}

To address inclusion, protection and opportunity for girls and women, the Nepali government has enacted several measures in recent decades.³ Despite these efforts, Nepali society, deeply rooted in male dominance, remains an inequitable place for many women.^{8,17} Numerous norms and expectations, such as early and arranged marriage and lack of education and autonomy for women place Nepali women and girls at high risk for victimization.^{2,5,8,57-59} While the legal age of marriage in Nepal is 20 years, the average age of marriage is 17.5 years, and an estimated 70% of young women marry before they reach the age of 20, which compounds existing deprivation of formal education for girls and increases their vulnerability to violence.^{3,5,59} Research indicates that between 28% and 47% of Nepali women are illiterate, which limits autonomy and opportunities for employment.^{2,5,8,57} Women in Nepal are generally expected to submit to men and often experience limitations in their ability to work, seek education or socialize freely outside the home.^{2,5,8} Multiple studies in Nepal have found relational dynamics, such as marital communication, division of labor and imbalanced decision-making to be predictive of IPV.^{2,5}

As the expected providers and protectors of their families, Nepali men are often the primary decision-makers within marriages, tend to ascribe to traditionally gendered roles and hold significant control over their wives.^{2,5,8,60} As compared to their urban peers, husbands living

In the Terai region of Nepal were found to be less likely to engage in domestic tasks.⁶⁰ Among Nepali men and women, alike, acceptability of VAWG is markedly high,^{5,8,61,62} which increases likelihood of IPV within their own homes.^{17,57,61,63,64} In one study, over 75% of male and female respondents either completely agreed or partially agreed that men are naturally aggressive, and almost a quarter of male respondents and nearly a third of female respondents completely and partially agreed, respectively, that it was a shame if a man did not, or could not beat his spouse.⁶⁰ Another study found that 28% of male adolescent respondents justified wife abuse.⁶⁵

Previous Interventions

Over the past few decades, public health researchers have worked globally to address IPV in various ways. While various interventions have focused on secondary and tertiary prevention specifically with IPV survivors, there is less understanding about effective ways to prevent recidivism, re-victimization or to prevent the violence from occurring in the first place. 16,36 IPV affects all kinds of relationships, transcending boundaries of ethnicity, religion, age, and sexual orientation; however, IPV victimization disproportionately affects women and is predominantly committed by men. 66 Further, non-perpetrating men who do not actively challenge dominant masculinity and VAWG remain actors in the problem's persistence, thus underlining the importance of involving all men to prevent VAWG. 17,20,67,68 Previous studies have determined that men who ascribe to more dominant and rigid ideals of masculinity have worse health outcomes than men who challenge these ideals, and attitudes which endorse male dominance have been associated with compromised health outcomes for men and women, alike. 18,68,71 Engaging men in efforts to liberate men and women from rigid gender roles holds promising potential to impact the health of individuals, their families and communities. 18,68,70 Considering this, primary prevention strategies which include men and couples together have become more

common, and in recent years have begun to further focus on the root issues which underpin VAWG. 19,36,67

The most effective male-engaged initiatives have been gender transformative, integrated, multi-component interventions. ^{18,19,72,73} These interventions have included components such as mass-communication strategies, community engagement and mobilization activities and group education, which provides space for participants to critically reflect on their attitudes and explore new ideas together. ^{16,18,72,78} While not all outcomes have been clear, numerous studies have determined promising evidence of effectively shifted attitudes and behavior among men. Multiple programs have shown a significant increase in gender equitable attitudes. ^{70,74,76,79,80} have led to statistically significant decreases in self-reported use of IPV^{67,76} and have determined a promising trend toward less use of violence within relationships. ^{74,75,79,81,82} Further, engaging men and women together may hold even more potential. ^{67,83} In line with these evidenced and promising engagement strategies, the *Change* program aims to transform gender norms, increase relationship skills and ultimately prevent IPV through an integrated intervention comprising a serial radio drama targeting social norms, group education through Listening Discussion Groups (LDGs), involvement of community leaders and community engagement activities.

Theoretical Framework

The *Change* project is rooted in an integrated conceptual framework comprising components from the Social-ecological Model (SEM), Steps to Behavior Change Framework, Integrative Model of Behavior Prediction and the Diffusion of Innovations theory. The SEM considers the interactive influences on IPV risk at four levels: individual, relationship, community and societal. Taken into account at the individual level are personal biology, history and identifying factors which may place a person at greater risk. While alcohol is not the cause of IPV, multiple studies have identified husband alcohol use as a strong predictor of IPV. 5.8, 27, 84, 85

At the relationship level includes one's relationships, such as partnership dynamics which increase risk, such as marital communication or balance in decision-making.^{2,5} Community and societal levels explore surrounding environments such as norms and policies related to the acceptability of VAWG.^{9,12,14,22} This thesis examined reported change in participants and their marriages within the individual and relationship levels of the SEM to understand their interactive influence on IPV risk.

Study Aim

Considering the high prevalence of IPV in rural Nepal, its reaching ramifications for individual and community health, as well as the growing body of evidence which suggests that engaging men, alongside women, in gender transformative interventions may reduce VAWG, this thesis explored how participants and their marriages have changed in the first five months of participation in the *Change* project.

CHAPTER III. METHODS

Study Context

Due to existing research partnerships and markedly high prevalence of IPV in rural Nepal,³ the Chitwan, Kapilvastu and Nawalparasi districts were purposively selected as the setting for the parent study, *Change*, a mixed-methods, 2-armed, single-blinded, randomized trial.²¹ The study was designed to compare married couples in the control group, exposed solely to a serial radio drama, "*Change Starts at Home*", to intervention couples who were further exposed to the radio drama within a multicomponent, social behavior change communication strategy, which comprised Listening Group Discussions (LDGs) and community engagement activities among other components. The additional intervention components were designed to

reinforce radio drama messaging related to attitudes, behaviors and norms which underpin IPV. Among intervention-arm participants, 360 couples were purposively selected to participate in weekly gender-segregated LDGs, within which they listened to the serial drama together and participated in a curriculum-based group discussion to explore beliefs, attitudes and norms. This thesis explored a sub-sample of LDG participants (n=18 couples), who were selected for in-depth qualitative interviews at five months post-baseline.

Participants

For the parent study, Village Development Committees (VDCs), similar to municipalities or small towns, were the primary unit of randomization (n=36) and were eligible if they were no closer than 30 – 40 kilometers to one another, were socially, economically and demographically similar to another VDC and had separate health centers and village markets. Within each of the VDCs, random selection proportionate to size was used to select two wards, similar to small villages. Eligible study participants included women between 18 and 49 years, married to a man over the age of 18, both partners resided in the study vicinity and lived together. Ten couples within each ward were purposively recruited to participate in LDGs who met the eligibility criteria, in addition to willingness to commit for nine months of weekly participation and residential proximity to location where meetings were held. A sub-sample of the LDG couples were selected (n=18 couples, 36 individuals) to participate in individual in-depth interviews. For the purposes of this thesis, only in-depth interview participants were considered for analysis.

Data Collection

As part of the parent study, qualitative measures within the LDG couple cohort were taken at three time-points, program launch, intervention mid-point (five months post baseline), end-line (12 months post baseline), and will be taken once more at follow-up (24 months post baseline). The interviews were conducted individually with professionally trained facilitators. The

interviews followed a semi-structured interview guide (Appendix A) and consisted of 20 questions. Participants were asked to report change attributable to project participation, including noticed change in oneself, their partner, their marriage, family and community. Midline interview questions focused on perceived changes in these areas, including questions such as "What are the behavioral changes you have found in yourself?" and "Have there been any changes in the management of the fights and disputes that you and your spouse usually have?". Each interview lasted approximately 45-90 minutes. With consent of participants, the interviews were recorded and thereafter translated and transcribed directly from Nepali into English.

IRB approval was obtained for the broader study from the University of Minnesota 1601S82063, Emory University IRB00091115 and the National Health Research Council in Nepal 178/2015.²¹

Data Analysis

Descriptive demographic information was drawn from baseline data of the parent study. These variables included district, wife's current age, wife's age at marriage, type of marriage, duration of marriage and education levels of wife and husband. Case- and code-based analysis were used to examine individual- and relationship-level change reported after five months of program participation. Employing the existing codebook for the parent study, multiple team members in the United States and Nepal coded mid-point transcripts using comments in Microsoft Word. Emergent, deductive codes were discussed by team members and incorporated into the final codebook, which was thereafter utilized by Nepali team members to code all intervention mid-point transcripts in Microsoft Word. Following this, transcripts were imported into NVivo 11 software to be electronically coded. This process entailed coding a transcript while comparing to Nepali member-coded transcripts to assess overall coding consistency. Transcripts

were coded in NVivo; however, all files were converted for final analysis in MAXQDA Software due to change in licensure.

Preliminary case summaries of each couple were compiled and displayed using matrices to determine overall and code-specific change, considering reports from either spouse (see Appendix B). Code-specific information was thereafter entered into a matrix developed along the individual and relationship levels of the SEM. Within these levels, the husband's and the wife's accounts were denoted as positive, slightly positive, lacking change, negative change or not reported. Direct comparisons were drawn within couples to assess overall couple concordance, explore reporting trends within each area of change and to determine gendered patterns. Reports within each couple were categorized into five levels of concordance: 1) Concordant, which demonstrated nearly or fully corroborated reports of change within a couple; 2) Moderately Concordant, in which both spouses reported change, but one spouse reported greater change than was corroborated by their partner; 3) Discordant, in which spousal reports were contradictory or significantly unparalleled; 4) Female report only, wherein the wife reported change which was not discussed by the husband; and conversely 5) Male report only, wherein the husband reported change which was not discussed by the wife (see Appendix C). Thematic summaries were used to explore reporting patterns across and within couples related to each area of change. Emergent information related to a participant with two wives rendered one couple ineligible. This couple was excluded prior to final analysis, resulting in 17 couples (n=34 individuals) in final analysis.

CHAPTER IV. RESULTS

Characteristics of Sample

Results from descriptive analysis can be found in Table 1. Among the 17 couples in final analysis, five (29%) were from the Chitwan region, six (35%) from the Nawalparasi region and

six (35%) from the Kapilvastu region. Wives' current ages ranged between 22 and 46 years, with an average age of 34.24 years (SD=7). Wives' age at marriage ranged between 15 and 24 years, with an average of 18.12 years (SD=2.78). Type of marriage included two (12%) love marriages with family support, 13 (76%) arranged with consent and two (12%) arranged without consent. Duration of marriage ranged between 18 months and 28 years with an average duration of 16.25 years (SD=7.91). Participants' education level ranged between little or no formal education and SLC, comparable to high school graduation or beyond. On average, husbands had higher levels of education than did their wives. Three (18%) of wives had little or no education, seven (41%) had a primary education, five (29%) had a secondary education, one woman (6%) had an intermediate education and one (6%) with SLC or beyond. Husbands' level of education were higher, with 0 (0%) husbands with little or no education, two (12%) with primary education, ten (59%) with secondary education, three (18%) with intermediate and two (12%) with SLC or beyond.

Table 1: Characteristics of Sample

Characteristic	% (n)	
District		
Chitwan	29 (5)	
Kapilvastu	35 (6)	
Nawalparasi	35 (6)	
Type of Marriage		
Love with Family Support	12 (2)	
Arranged with Consent	76 (13)	
Arranged without Consent	12 (2)	
Level of Education	Wife	Husband
Little/No Formal	18 (3)	0 (0)
Primary	41 (7)	12 (2)
Lower Secondary	12(2)	18 (3)
Upper Secondary	18 (3)	41 (7)
SLC	6 (1)	12(2)
Intermediate	6 (1)	18 (3)
	Mean (SD)	
Wife Age	34.24 (7)	
Wife Age at Marriage	18.12 (2.8)	
Duration of Marriage	16.25 (7.9)	

Individual-level Change

Matrices depicting distribution of couple concordance, with example quotes, can be found in Appendix C. Individual-level behavior change among men was reported by one or both spouses within the majority of couples (n=13). These behavioral changes fell in two primary areas: alcohol use and roaming tendencies. "Roaming" was described by participants as spending significant time away from the home, particularly after work or at night, often drinking or wandering about with friends. It is important to note that these themes may not capture behavioral change amongst male participants who neither drank alcohol nor spent significant time away from the home prior to program involvement.

Alcohol Use

Couples were predominantly concordant in their reported change of husbands' alcohol tendencies. Four couples were concordant, one couple was moderately concordant and two wives reported on alcohol use change while it was not explicitly discussed by their respective husbands. All couples, in which husbands previously drank, reported at least some change in husbands' alcohol tendencies, with some husbands quitting entirely. One woman described changes in her husband's alcohol use as positively influencing his smoking habit, and her husband corroborated, "Yes, I quit alcohol, cigarette everything. Yes I quit it completely. Now I only chew tobacco.

Before I used to consume cigarette and other things also, but now I only chew tobacco. I am trying to quit tobacco also" (husband, Chitwan 9008). One husband still drank but had improved his tendencies by spending less time with his "rough" crowd and more time at home with his wife,

Before I used to drink with large group of boys and lose my senses. There used to be fights and she would yell out why I had drunk so much. We realized that if we don't understand each other and if we do whatever we want, the home will not function. So no matter how much the group of boys force me to drink with them for free, instead I go home and drink one bottle or half a bottle quietly. So now I drink while talking with my wife (husband, Kapilvastu 5163).

Reported change impacted couples' time spent together, their level and quality of communication and reduced marital conflict. One woman described, "Yes, it has lessened, but he does not fight after drinking alcohol. After he comes back from work, he tells me that he would go for drinking. Afterwards he asks for food and sleeps. He does not fight" (wife, Kapilvastu 5224). Associated changes were not solely on the part of the husband. For example, within one couple where the her husband had decreased his drinking habit, their reduction in marital quarreling was influenced by changes in herself, "Now I don't speak to my husband when he is drunk. I keep quiet. That is the change that has happened" (wife, Kapilvastu 5163). Within the moderately concordant couple, the husband's sense of such change appeared somewhat inflated compared to the wife, who admitted slight positive change in her husband's behavior.

Husbands largely attributed these changes to increased knowledge about the harmful impact of alcohol on themselves, their marriages and families. While this understanding was scarcely discussed among women, their husbands were particularly influenced by programmatic messaging related to alcohol risks, "Because of this program also I understood that if we drink alcohol then only violence will occur, so I thought [drinking] is worthless" (husband, Chitwan 9008). Some men explained that their wives had tried to convince them to quit drinking, but the program furthered their intention, "Yes, I did. In the house my wife tried a lot to convince me, and in the program I got a lot of information as well" (husband, Chitwan 1982).

Roaming Tendencies

Many couples reported changes in husband "roaming" tendencies, comprising four concordant couples, as well as four wives and three husbands whose respective spouses did not explicitly discuss this change. Many husbands previously spent significant time away from the home, often drinking with friends or roaming about late at night. Couples focused largely on changes in the quantity and quality of time spent at home, as well as communication related to when, where, with whom he was going and when to expect his return. While in the past, they may

have stayed out late at night with friends, husbands were now returning earlier or on time, which allowed them to eat meals together, spend more time with family and contribute to household tasks. One woman recalled frustration with her husband's previous tendencies,

He usually wanted to eat together, so sometimes I used to wait. But while waiting it used to be 9-10 at night, and I used to get angry (laughs). When I used to call him, he didn't used to receive the call, so I used to get more angry. But nowadays he doesn't come home late. He comes home at time (wife, Nawalparasi 6327).

Another woman explained that more time at home allowed her husband to be more helpful, "Before he used to get up and go to work. If he didn't have to work outside he used to help me at home. And he used to roam around much. But now he helps me more" (wife, Nawalparasi 6319), and a husband similarly offered,

Nowadays I usually don't go. At morning I go to work and at the evening I come home. In holidays also I stay at home. We husband and wife together goes to the market. So, compared to before, now I have improved (husband, Nawalparasi 6327).

Previously, husbands often left the home without communicating with whom, to where they were going nor how long they would be gone. One woman recalled, "Yes. Earlier when I asked him where he was going, he would reply why you need to know and just whiz away" (wife, Kapilvastu 5329). As their husbands had started to exhibit more consideration when deciding to leave the home, frustration had decreased among many wives, "If he has to go somewhere then he asks me and leave, he says I'm going here. Before he used to leave without informing, but now he says before leaving and tells the time he will be home" (wife, Chitwan 2099). Multiple husbands acknowledged previous tendencies to disregard their wives and leave the house whenever they felt like it, "Before this, I roamed around, didn't agree to her decisions, did things against her permissions. Now, I listen to her and try to coordinate... I simply don't go if she asks me not to" (husband, Kapilvastu 5224). Husbands largely attributed these changes to program participation, "Now after I participated in this program, I learned that I have to inform my family beforehand, before going anywhere" (husband, Nawalparasi 6327).

Relationship-level Change

Relationship-level change was reported by one or both spouses within all participating couples (n=17). This change comprised an array of marital dynamics, including gendered labor roles, marital communication, decision-making (including overall marital and sexual), quarreling and conflict resolution and reported experience of IPV (physical, sexual and emotional abuse). *Gendered Labor Roles*

Change in gendered labor roles was discussed by nearly all participants, comprising 11 concordant couples, four moderately concordant, one discordant and one in which the wife reported change that was not discussed by her husband. Similar to sole female reports, wives within moderately concordant couples reported more change in their than did their husbands. While these husbands did not necessarily deny change, they were less inclined to admit great change in themselves and instead focused on overall change in spousal collaboration, as well as increased help from their wives. For example, one husband stated "She usually used to help me in some things and didn't help in other things but now she helps me in doing all the works. From household works to all other works she helps me" (husband, Chitwan 2018), and another man explained they simply did whatever needed to be done,

Between the two, both the work within the house and outside are equally important... If there is no outside work then both of us working together; somebody cutting the vegetable the other cooking, washing dishes or cleaning the house (husband, Kapilvastu 5329).

The importance and benefits of spousal collaboration were discussed across couples. While in the past, many tasks were more rigidly divided between partners, participants were now more inclined to work together, "Before I didn't care about the work, but now we both have learned that we should do the works together" (husband, Chitwan 2114), and many discussed a newfound appreciation for the efficient nature of collaboration, including conserved time and effort. One wife explained her favorite part of working together was that tasks were completed more quickly,

That fact I like the most. When both work together then the work will finish fast, when only one works, the work load is on only one person, it will take more time as well as more energy. Then they will feel tired. So when both work together there is division of work, less time will be taken (wife, Nawalparasi 6222).

While some men had previously engaged in non-traditional roles, husband willingness and initiative had increased across most couples. Husbands were engaging more in child caretaking and cooking and many had begun washing dishes and clothing; however, cleaning tasks were more divisive. While not all men were willing to wash and clean, some men readily engaged, especially when their wives were unable to perform the tasks,

Before he used to throw clothes here and there, he didn't care about my hands but now he says – your hand is like that I will wash the clothes. He takes care of me and washes his own and children's clothes also (wife, Chitwan 2099).

Discussed among a few wives, husbands continued to help despite perceptions of other family and community members. One woman explained, "He washes the clothes, takes them to the terrace to dry them, and cooks food. He also washes the dishes despite what the community says" (wife, Chitwan 1982) and another explained,

He even sometimes washes clothes. (Laughingly) [His mother] says that he wasn't like this before but now he cooks food and does other work of his wife. He expresses that whoever can do the work should do it. Our mother sits laughing and says that he has started doing his wife's works (wife, Kapilvastu 5161).

Other couples reported less husband inclination to engage in certain tasks. When asked if he washed his wife's clothes, one man replied, "No, not until now (laughs). I shouldn't lie. But in other things there have been changes" (husband, Kapilvastu 5271), and another wife explained of her husband, "He helps me in everything. In cooking and other things... He does not agree to wash their clothes. He washes his own sometimes. And when I tell him to wash some of the children's clothes, he says that he won't" (wife, Nawalparasi 6215).

Much of the change in labor roles was attributed to program participation, "In doing works, we learned that we have to work together. It is not compulsory that one wife should work

but husband should also work. And we are working according to that. Everything is good" (husband, Nawalparasi 6222), and another stated,

Yes, my opinions are changing. For instance, before we used to do our own work. But my wife used to do most of the work in cooking and other household work. After joining the program, we learned that both of us should work equally (husband, Nawalparasi 6215).

These statements were corroborated by wives who noticed and appreciated this change,

In case of cooking, washing or a lot of other things there used to be... He used to tell that it's not a man's job but a woman's, so do it yourself. It doesn't happen these days. If I say that I feel tired and do not want to cook, then he tells me to say it and he will do it! (wife, Kapilvastu 5161).

Changes in labor roles were reported as positively impacting marriages and families, one woman credited the change as reducing conflict within the marriage, "Now that he helps me, I feel happy. Now when he helps me with work, there isn't a reason for me to get mad. So, there has been change" (wife, Nawalparasi 6215), and another husband focused heavily on the impact these changes had on their children,

We realize we influence the kids, and they learn from us. If I wash my own dishes, they learn to do so too, so the burden of the work is distributed and not only put on a single shoulder. I'm influenced by the program to teach them the dos and don'ts (husband, Kapilvastu 5224).

Among couples who reported less change among husbands, lack of change was largely explained by greater time constraints placed on employed husbands, "Usually now also he doesn't have much time to do household works. Now also he doesn't help much at home but now I have understood that he is usually busy" (wife, Nawalparasi 6327).

Marital Communication

Change in marital communication was discussed by most participants, comprising nine concordant couples, six moderately concordant and two in which only wives remarked on marital communication. Most moderately concordant couples described pre-existing marital communication; however, one partner believed there had been greater improvement than the other. For example, one wife described changes in her husband, "He speaks with me about happy

and sad times. However it was before, he has become good now, he treats me well. He has changed... Before also he was like this, but now he does it more openly" (wife, Chitwan 2099), while her husband stated, "It is still like that. This program has further improving that. So in my life there hasn't been any major change due to this program" (husband, Chitwan 2099). While some reported less change than others, all couples reported at least some improvement in communication, most often focusing on the frequency, depth, and manner of communication. Couples reported more frequent communication, often conversing over meals or reflecting together before bed, "There have been changes than before. We talk before going to sleep at night. We talk about what happened on Saturday and that day's program" (wife, Nawalparasi 6215) and another, "At the evening we share everything with each other. At noon we don't have time, so we talk in the evening... Before also we used to do but now we do it much more" (wife, Nawalparasi 6319).

Many couples, and husbands in particular, reported sharing more openly with their spouses. One man remarked, "We used to have less, but now it has expanded or we have open conversation" (husband, Kapilvastu 5329) and another wife explained of her husband "Yes, now he is more open. Before he used to be a bit awkward. Now he has improved a bit than before" (wife, Chitwan 1982). Many men had begun disclosing feelings and emotions with their wives. One wife shared, "Our husbands also didn't tell their feelings to us. But after listening to the radio program, I share my feelings to him and he does too" (wife, Kapilvastu 5161), and another man explained,

In my case the effort were one sided and I didn't use to share them with my wife earlier, but now I think these things also have to be share, as we are life partners and have to live the whole life together (husband, Kapilvastu 5303).

Another woman explained that her husband previously only shared when prompted but now shared more readily, "Yes. He didn't use to talk that much. But after joining the program, he tells me what he feels. He only used to tell me the things that I asked. But now he tells me

himself"(wife, Nawalparasi 6215). Though they recognized the importance of sharing, not all participants felt fully comfortable sharing everything with their spouses,

There are some things we can't share, maybe due to the imprints from before. But the program is teaching us to share everything... because husband and wife are closest of all. We are taught to have everything between the couples (husband, Kapilvastu 5271).

Among multiple couples, including those with less reported change, husbands were reported to be listening more. One woman, who reported only slight change in marital communication, stated, "Before also he didn't behave with me badly. He only didn't listen to me. But now he obeys and listens to me" (wife, Nawalparasi 6327). Also discussed was change in the manner of speaking to each other. Participants reported changing their tone, "Before umm... I used to talk in a rude and high tone (laughs)...But now I have changed and don't talk in that way" (wife, Chitwan 2018), and another husband explained, "So through this program there have been changes in the ways of communications as well, like how people feel when I talk in soft or stern voice. So, I talk according to the situation, either in soft or stern voice" (husband, Kapilvastu 5303).

For many couples, the program itself, served as common ground for conversation. One man explained, "Now I ask her about the program and what happened in it. She also explains to me about it" (husband, Kapilvastu 5163) and another woman described sharing about the program before going to bed,

When we are going to sleep at night we discuss about the program we listened to. He says—I listened to this program, what program did you listen to? Then I also tell him about the things that I listened to (wife, Nawalparasi 6266).

One woman explained that if she had to miss an LDG meeting, her husband sometimes recorded the radio program so they could listen at home together,

When he goes to the program sometimes he records the program and bring. Then if he has time then he makes me listen to it. If he doesn't have time we listen to it at the evening. We discuss about it and also we listen to the record. I listen to it at morning if he has time, otherwise I listen to it when he gets home (wife, Nawalparasi 6319).

While not pervasively discussed, greater freedom to discuss sexual matters was particularly salient to at least two women. The woman previously quoted discussed this as her favorite aspect of the program,

In this program the best thing that I found is – sometimes we husband and wife didn't used to discuss with each other. We used to discuss about the household matters but we didn't used to discuss about our physical relationship (wife, Nawalparasi 6319),

and another woman explained, "We couldn't talk about it openly before but now we can say – today I don't feel good, today I don't want to have sex, what do you want?" (wife, Kapilvastu 5161).

Marital and Sexual Decision-making

Couples were predominantly concordant in their reports of change in decision-making dynamics. Twelve couples were concordant, two moderately concordant, one discordant, one sole husband report only and another sole wife report. There was disparity in interview quality for the discordant couple, making it difficult to discern level of concordance; however, the wife's report, albeit brief, indicated off-balance decision-making, while her husband reported significant change in his intentions and efforts to consider his wife in the marital decision-making process. Among the two moderately concordant couples, one husband reported that their decision-making process had always been balanced, while his wife reported significant changes in her husband's behavior,

In case of the household problems like bigger money issues, he didn't use to tell me however he managed it. When I asked him he used to reply, why you do need it just shut up! However, nowadays if we have to send money to our son, he does tell me where and from whom he got the money. He didn't use to tell me earlier (wife, Kapilvastu 5271).

The other moderately concordant couple agreed that there was change, but each attributed said change to the other partner without fully acknowledging changes in themselves. The wife explained that her husband now regarded her opinion with more weight when making family decisions, "Yes. It's like this, before he used to give importance to his mother and father, but now he thinks that is something I have to share with my wife also" (wife, Chitwan 2099) while her husband attributed the change to his wife's emergent interest in the decision process, "Before she used to say – it's

enough that you have taken the decision. But now she is interested in what is it and how is it done" (husband, Chitwan 2099). Multiple women had increased their engagement and participation. One woman explained that there were times when she had little interested in involving herself, but she felt able to assert herself if necessary,

He talks about the business nowadays. But I don't show any interest. And when I don't show any interest, he does it on his own. If I did ask about the business, he would tell me... Now, I know what to do. He tells me himself, even if I don't ask (wife, Nawalparasi 6215).

Many men had begun taking wives' opinions into greater consideration. One woman remarked, "My husband used to take decisions himself only. But now he ask everything with me (wife, Chitwan 9008), and another stated, "Before he used to bring and sell himself and sometimes told me about the money he earned, sometimes he didn't. But nowadays he tells me everything" (wife, Nawalparasi 6319). Men largely attributed these changes to project participation, "It has brought change in the decision-making process. It has developed the ability to avoid one-sided decisions and only make decisions together" (husband, Nawalparasi 6215). Shifts in decision-making dynamics were warmly welcomed by men and women, alike. Multiple men felt that increased involvement of wives reduced the burden bore by husbands to make all family-related decisions. One man explained,

Before, I used to make all the decisions by myself and sometimes, it was really difficult for me. For example, in case of loans, I had to manage and pay all of it by myself but now I have my mom, my wife and my two children; a son and a daughter. We all discuss together and managing the loan money and other resources has been easier through it (husband, Kapilvastu 5161).

Many couples, who reported little change, described previously balanced dynamics in their decision-making process, "We have the habit of discussing in the family. I used to do it in the past and now as well. While talking about the issues related to two of us, we discuss and complete it" (husband, Kapilvastu 5329). Other couples appeared content with their existing process, such as this woman who explained that her husband makes certain decisions without her involvement, "No,

he doesn't ask me and I also don't ask him" and then added, "We share everything with each other, we don't hide anything" (wife, Nawalparasi 6222).

Decisions ranged from small to large in scale; however, some held more significant impact on the lives of women and girls. One woman explained that her husband had begun letting her wear whatever she wanted,

Let's say he allows me to wear whatever I like. I don't have any problems. He says – my wife will wear whatever she wants to wear. I don't care what people from outside say to me, when my husband says like that I feel very happy. Before he allowed me to wear only Sari but now he allows me to wear whatever I like (wife, Chitwan 9008).

And another woman described the process of deciding whether or not to marry their daughter to a wealthy man, who requested a dowry they could not afford. Within this process, they considered things they learned through the program,

So that's why we decided not to give our daughter, she is our only daughter... Because there are cases of dowry which we heard in this program. Also, let's say if the guy is rich but if he is a drunkard and makes issue in road, then what is the benefit of having so much property? We discussed and took the decision that we didn't want to marry our daughter to that rich boy. This program has taught us many things. We kept all our children with us and discussed about it and took the decision (wife, Chitwan 2114).

Also significant among many couples were changes in sexual decision-making dynamics. One husband, five additional wives and one concordant couple reported changes in their sexual decision-making process. One man explained, "Let's say if I want to have sex, then I have to take permission from her. If she agrees then we have sex, otherwise we don't" (husband, Chitwan 9008), which he admitted was a change from the past. Another husband stated, "Before, I did not consider if she wanted to do it. The program has taught me to consider whether she wants it or not, if she is tired or not, and if she is stressed or not" (husband, Nawalparasi 6215), which his wife corroborated, "He now thinks that he should also do certain things. He also considers if I want to have sexual relations. He says that we will only do it if I want it. If not, we don't do it" (wife, Nawalparasi 6215). Multiple women positively discussed these changes within their

marriages, "Now, we discuss and have contact if there's sexual desire in both of us" (wife, Kapilvastu 5271) and another stated, "Yes now he asks me first" (wife, Nawalparasi 6319).

Quarreling and Conflict Resolution

Change in quarreling and conflict resolution was reported among all couples, comprising nine concordant couples, seven moderately concordant and one wife whose husband did not explicitly discuss the topic. Since program start, little to no quarreling was reported among all couples, including moderately concordant couples. Within moderately concordant couples, both spouses agreed there was little conflict; however, one spouse claimed this was mostly unchanged since program involvement, while the other spouse saw greater change. For example, one husband stated, "We never had disagreements. Even if we get angry with each other we talk to each other very soon, we don't have any big issues... Yes, before also it was like that" (husband, Chitwan 2099), while his wife explained "Before he used to get angry, in small matters also he used to get angry. He used to tell me to shut up and get angry but now he doesn't get angry and go" (wife, Chitwan 2099). Some couples experienced little conflict prior to program involvement, and so did not feel much change. When asked if there was significant difference in quarreling after participating in the program, one woman stated no, then explained, "The thing is ma'am in having anger issues or talking loudly, these kinds of behavior weren't there...Yes, we didn't have such problems...In our relationship we had things in agreement...Yes it wasn't bad and now it has to be better" (wife, Kapilvastu 5329). Other couples positively reported significant change in their marital conflict. When asked if the program changed their marital conflict, one man explained,

I do feel so, a lot. There have been a lot of changes. Because before there used to be little quarrels with the wife. After joining the program, it has improved. Because we go into discussions. I tell her things that she should do, and she also tells me (husband, Chitwan 1982).

When conflict did arise, couples discussed increased ability to deescalate and resolve disputes within their marriage, including self-management skills, newfound ways to approach

their partner and the manner in which they communicate. Couples, and women in particular, reported previously experiencing frustration and rapid escalation in temperament; however, new skills improved their ability to manage stress and regulate anger. One woman stated, "I used to have anger issues before the program, now it's being lessened" (wife, Kapilvastu 5329) and another woman explained,

Because before I used to get angry easily, I had a bad temper (laughs), but after I started listening to this program I learned that I have to control my anger. I learned that we should work together and shouldn't get angry. Instead of fighting in home, I learned that when we get angry we should go somewhere and calm down and then return home and talk to everyone nicely (wife, Chitwan 2114).

One man shared similar changes,

Through this program, we got to learn how to manage anger. In a fight, both the husband and wife will get mad. So in such a situation, throwing accusations and insults at each other will only make things worse. For this, we learned how to manage anger (husband, Nawalparasi 6215).

Couples who previously engaged in debate too quickly discussed a new regard for taking time apart to cool off before discussing the matter. Taking time apart allowed a period to calm down and also to reflect on their responsibility in the matter,

Now we listen to the program and [the FDG facilitator] says that we should stay away from the house if we are angry. So because of tension, if I start a fight, it will be limited to my mind. After going outside, I might realize that it was my fault (husband, Kapilvastu 5163).

One wife reflected on previous tendencies to convince her husband to discuss the matter and new practices she was trying to use during conflict, "Yes. I used to be stubborn at the beginning but now I don't do that. Now I think that my husband may also have some things in his heart, so I give him time to think" (wife, Nawalparasi 6327), and another man shared, "So, when sometimes there are disputes between us, then we don't take that matter further, or we don't talk on that topic for sometimes and later when we calm down then we talk to each other and find it's solution (husband, Chitwan 2018).

When they finally did engage, participants worked to communicate positively to work through the issues at hand, as one man explained,

When she is angry, you cannot ask her why she is angry all of a sudden. For that, you should keep quiet and leave her alone for 10-15 minutes. Then, you tell her a joke to lighten the mood. After her anger subsides, then you ask her why she got angry. Till then, both of you would have calmed down (husband, Nawalparasi 6215).

Conversely, some couples who previously resorted to the "silent treatment", now understood the importance of communicating with their partners to resolve problems, as one wife explained, "I learned that we have to talk to each other even if we get angry...Yes. (laughs) I didn't used to talk. I didn't want to speak with anyone. But now I have learned that we have to talk" (wife, Nawalparasi 6226), and another woman described changes in her husband,

Yes, before he didn't talk to me for 2-3 days but now he talks to me after sometime. A person becomes intelligent because of this program and feels that I should be good instead of getting angry and not sharing things. It makes a person become more open towards sharing and talking properly. Overall it has a good impact (wife, Chitwan 2099).

Couples discussed the importance of hearing both perspectives, "To manage the fights, husband should ask wife's thoughts and opinions. Both should share what is in their hearts to each other. So both should discuss about it and manage the fights" (husband, Nawalparasi 6327). Many husbands focused on the need to understand the root issues behind the conflict, as well as the role of communication in successfully doing so. One husband explained the need to reach mutual understanding about the underlying problem,

Sometimes we used to fight without understanding each other's thoughts, but we learned that before fighting we have to understand the root cause of the fight... We have to know what is creating the fights, after that we shouldn't take that topic further (husband, Chitwan 2018).

Another husband explained, "We also talked about positive communication and avoiding negative communication. Even when one is saying something good, the other person mishears it and turns it to something bad (husband, Nawalparasi 6215).

Couples attributed de-escalation and resolution skills to program participation, some even expressing that they simply would not have made these changes without the program. One woman explained that when she feels herself begin to escalate, she recalls lessons learned from the radio program and achieves de-escalation, "I remember this. From the program, I learned what to do when you get angry. So, internally I recall those things. And slowly it comes under control itself" (wife, Nawalparasi 6215) and another man explained, "I don't talk for some time, but when I am doing my works, I remember the things taught in the radio program and (laughs) the anger goes away after I remember the things taught in the radio program" (husband, Nawalparasi 6222). Multiple participants found it beneficial not only to recall program lessons to calm themselves, but also to prompt their spouse to recall programmatic elements in the midst of conflict. One wife explained, "And when he gets angry, I ask him if this is how a mutually understanding couple should behave. Then he does not say anything. And the anger dies like that" (wife, Nawalparasi 6215). Referencing radio program examples, common to both husband and wife, helped them to resolve marital conflict more mutually. As one husband explained:

So after that such disputes haven't occurred, because both of us have learned something. If we hadn't learned anything then those disputes may have created fights, but we both have trained together. So when I say – this is what you have learned in this program? She also realizes and the dispute goes away. And when she does the same to me also I understand and the disputes fade away (husband, Chitwan 2114).

Experience of IPV

Experience of physical, emotional or sexual violence in past or present, was discussed explicitly among seven couples. One couple concordantly discussed change in physical violence while three wives and one husband reported alone; two couples concordantly reported change in sexual violence and two wives reported alone, and one couple concordantly reported emotional abuse concordantly, one discordantly and three wives reported alone.

No couples reported experience (perpetration or victimization) of physical violence since program start. While some couples had never experienced violence, this was reported as change

among in five couples, with one or both partners stating that the use of physical violence against wives had decreased. Wives discussed these changes positively, explaining that their husbands no longer hit or slapped them during conflict. One woman stated, "Yes, earlier too he didn't use to confront me, but when he got very angry he used to slap me once or twice. But now after listening to the program there hasn't been any offence" (wife, Kapilvastu 5161) and a man explained described "Sometimes, I used to slap her once or twice... I used to slap her. Sometimes she used to slap me as well... Yes, they don't happen anymore" (husband, Kapilvastu 5163), which was corroborated by his wife, "Before, my husband used to scold me, beat me as well. After joining the program, he doesn't scold. We stay together amiably" (wife, Kapilvastu 5163). Wives explained that these changes reduced their level of fear around their husband,

No, I don't get scared. Earlier I used to feel that if only the night would never come and it would be daytime always. At night time, I always had the fright that when he would come, there may be arguments, he might hit me and where should I run.... These kinds of frights were there... Yes, due to the program most of the fright has gone away (wife, Kapilvastu 5271).

Multiple couples reported reduction in emotional abuse; however, three of the women, who previously experienced physical abuse, explained that while physical violence had decreased, use of emotional abuse remained present in the relationship. One woman explained, "No, he doesn't beat nowadays. Sometimes when he is with friends and has drank a lot, then though he doesn't beat me, he scolds" (wife, Kapilvastu 5271), and another stated, "He does try to scare me. He warns me he will beat me if I go out of line. And I keep quiet (wife, Kapilvastu 5163). Despite persisting intimidating and emotional abuse, women discussed these changes as purely positive. In fact, the women who remained subject to emotional abuse agreed that their husbands' use of verbal abuse and intimidation had decreased, nonetheless. Within the discordant couple, the wife stated,

Earlier he used to scold, speak in loud voices and made eyes at me. At that time, I used to get very scared that he might hit me (laughs). Nowadays he does it sometimes; he doesn't scolds but gives angry looks. Not much, just sometimes (wife, Kapilvastu 5163).

And while her husband did not directly dispute the ongoing intimidation, he focused on purely positive change within their relationship, "Before, I used to yell at her for annoying me when I returned home tired after a hard day's work. I used to threaten her. Now, if she yells and if I get angry, I walk away" (husband, Kapilvastu 5163). Two additional women who experienced emotional abuse in the past explained that their husbands no longer resorted to such behavior,

When I didn't used to obey what he said, I used to think that he will beat me and scold me. So I used to get afraid. But now I don't fear him... Now after he listened to this program, he talks to me nicely. He has understood things now (wife, Nawalparasi 6319),

and her husband corroborated this, "Before I used to drink alcohol sometimes (laughs), and I used to threaten my wife. But now after participating in this program I understood many things and I improved" (husband, Nawalparasi 6319). Wives explained that fear of their husband had decreased, which allowed them to feel at greater ease during conflict, "I used to be afraid that he might hit me. But now the fear has decreased" (wife, Kapilvastu 5163).

No couples reported experience of marital sexual violence since program start, and reduction in sexual violence or coercion was discussed among eight couples, comprising two concordant reports and five wife-only reports. Women explained that both they and their husbands now understood the importance of consent, which improved sexual decision-making, enabled women to express both desires and refusal and increased husbands' respect of those decisions. One woman explained,

Before when I didn't want to have sex, he used to come and have sex with me. And I used to get angry. But now he doesn't force me, we discuss with each other and do it. These changes have come (wife, Nawalparasi 6319).

Two husbands openly discussed these changes, admitting that they had not always obtained consent from their wives in the past. One of them stated, "Before, there used to be sex even if my wife did not want it, forcefully. But through this program, we learned that there shouldn't be sexual relations without mutual agreement between the husband and the wife" (husband, Nawalparasi 6215).

Discussed among multiple couples was knowledge gained from the program which increased understanding about violence against women. While only two men explicitly discussed changes in their own sexual dynamics, multiple men attributed increased knowledge related to violence against women, including sexual abuse and coercion to program involvement,

Before, we didn't have any knowledge and experience about these things, like sex. In a relationship a wife should also have sexual desires right? We also should have desires. But we men force our wives whenever we want to have sex. We should also know about their wants and desires, we have to know if they also want to have sex or not. We shouldn't force anyone. That is a good thing (husband, Nawalparasi 6319).

His wife similarly explained, "Yes. And also I understood that I shouldn't have been dominated like that. I should have told him then. So after listening to the program everything has become good" and she further remarked, "He learned that he shouldn't beat wife, so I think he will not beat me. So I don't feel afraid nowadays" (wife, Nawalparasi 6319). Multiple husbands also discussed types of violence beyond solely physical abuse, "Violence is often assumed as only as fighting and beating, but that only is not violence. We learned that forcing someone and being angry at someone is also violence" (husband, Chitwan 2018). One man demonstrated understanding by discussing the relationship between gendered role expectations and risk of violence.

Like in domestic violence let's say wives are always doing household work we are always out sometimes at the market sometimes at other places. If we help them in doing the household works, then the domestic violence will be controlled (husband, Chitwan 9008),

We both don't want to affect our children with our fighting. If we fight, our two children will see it and it will affect them negatively. We don't want to affect them that way. So that is the change in us (husband, Kapilvastu 5163).

and another husband focused on the impact of fighting in front of their children,

CHAPTER V. DISCUSSION

Findings

This analysis explored individual- and relationship-level change within participants and their marriages. Across the board, couples reported positive changes in husband behavior, as well as shifts in marital dynamics, including gendered labor roles, communication, decision-making, quarreling and conflict resolution and experience of IPV. Considering the high prevalence of IPV and largely rigid gender norms in rural Nepal,^{2,5,8} these findings are encouraging. In line with previous IPV prevention efforts that have engaged men,^{67,70,74,76,79,80} *Change* participants reported positive attitudinal and behavioral changes, including reported elimination of physical and sexual IPV perpetration. While not all participating husbands were abusive nor controlling of their wives to begin with, positive change was reported across couples. Be it willingness to wash the dishes or obtaining their wives' consent before sex, shifting away from rigid ideals of masculinity may be beneficial not only for wives, but for husbands, themselves.^{18,69,71}

Engaging couples in tandem curriculums, a promising intervention strategy, 67,83 proved successful among *Change* couples, and participants discussed couple inclusion as a crucial aspect for fostering change. Gender-segregated LDGs created space for men and women to safely navigate new ideas amongst their peers, and the parallel spousal participation, monthly couple sessions and take-home tasks allowed couples to reflect on ideas and practice new behavior together at home. Further, the parallel radio exposure in combination with LDG curriculum activities served as common ground, from which couples could recall lessons to inspire change in their own lives and communities.

Consistent with the SEM,¹² through which the *Change* intervention was developed and this analysis completed, reported changes transcended bounds of individual social ecological levels. Changes within each level interacted with and influenced one another to improve individual and marital dynamics. Individual change in husbands' behavior spurred positive shifts

within marriages, including reduced quarreling, improved communication and allowed spouses to spend more quality time together. Increased balance in decision-making, gendered labor and marital communication influenced the frequency, intensity and navigation of marital quarreling. Newly gained individual knowledge and skills allowed husbands and wives to engage in new practices which benefited their marriage over all, and in turn, these shifts in marital dynamics positively impacted individuals. Reflective of broader social inequities, individual and relationship dynamics, such as these, underpin the risk of IPV within relationships. 9,14-17 Positive shifts in these dynamics reduce the risk of IPV perpetration and victimization, and in fact, there was a reported reduction in physical, emotional and sexual IPV in this sample. As demonstrated by previous research, reduction in IPV, in turn, improves health outcomes for men, women, their families and their communities. 18,70,71

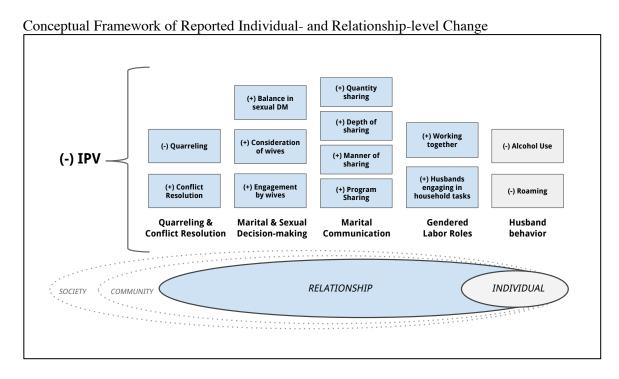


Figure 1. Conceptual Framework of Reported Individual- and Relationship-level Change: Individual changes in husband behavior included reduction in alcohol use and roaming. Relationship-level changes in gendered labor roles included increased husband engagement in household tasks and increased spousal collaboration. Change in marital communication included increased sharing of Change program lessons, positive improvements in their manner of communicating with their

spouse, increased depth of sharing and increased frequency of communication. Change in marital decision making included increased interest and engagement by wives and increased husband consideration of wives. Change in sexual decision-making included improved balance. Couples saw a reduction in marital quarreling and an increase in conflict resolution capabilities. The interplay of these individual and relationship-level changes reduces the risk for IPV among participating couples.

This thesis identified individual- and relationship-level change in numerous areas determined to influence the risk of IPV within marriages, thus evidencing the positive impact that the *Change* intervention, and others like it hold for individuals and families. These findings contribute to existing literature on theoretically-developed, multicomponent interventions to prevent IPV, and furthers the evidence for engaging couples to prevent violence within marriages. Limitations

While the findings may be promising, limitations of this study must be acknowledged. This particular analysis included no comparisons group to identify differences between intervention-arm participants and those who were solely exposed to the radio program. However, the qualitative nature of this data allowed a more nuanced understanding of participant experience of the program. Further, LDGs participants, comprising the frame within which the interview sample was derived, were purposively selected based on geographic location and willingness to commit; therefore, this sample may not be representative of Nepali couples who live further away or who were unable or unwilling to commit to weekly sessions. As with any self-reported measure, social desirability bias may have influenced participant responses. This can be particularly true when disclosing personal and sensitive information, such as IPV. Moreover, underreporting among survivors of IPV may be also be present. However, the inclusion of both spouses and assessing couple concordance may have accounted for bias somewhat. Unfortunately, one couple was eliminated from the study upon discovering the husband had two wives. This was particularly disappointing, because it was one of the few cases in which significant IPV had been reported; therefore, their inclusion may have influenced in the ultimate findings. Lastly, due to the timing of the 12 and 24-month interviews, and lengthy process

of transcription, this analysis was not able to assess change across the duration of the program, nor the diffusion or sustainability of such changes.

Implications and Recommendations

In Nepal and globally, IPV remains a public health problem with vast consequences for individuals and communities. As we aim to address this pervasive problem, more must be understood about the most effective ways to reduce and ultimately prevent IPV from occurring in the first place. This analysis found that within five months of participation in the *Change* program, individuals and couples experienced significant individual and relationship changes which impact their risk for IPV. The interplay of individual- and relationship-level changes reported by participants suggests that several components of the *Change* approach were successful. LDGs and paralleled curriculums for spouses allowed for change to be explored and adopted in safe social environments and thereafter fostered within marriages. These successes suggest that future public health efforts to prevent marital IPV should engage couples as agents of change within their families and communities. While these findings are encouraging, they are only truly beneficial if sustained over time. Because this thesis assessed the first five months of participation, additional analysis should be conducted to determine changes at program completion. Further, the level of diffusion and sustainability of said change should be explored at 12 months follow up. Moreover, IPV research should continue to explore effective approaches for equipping participants and communities to sustain change following program completion.

Conclusion

This thesis explored individual- and relationship-level change after five months of participation in the *Change* project, a theoretically-based intervention to shift norms and prevent IPV in rural Nepal. Findings suggest promising behavioral and social outcomes for the participants and their families, which is encouraging considering the male-dominant norms which characterize these areas. Continued exploration of the *Change* project, as well as other primary

prevention strategies to address IPV will provide additional understanding about further changes which arise, as well as the diffusion and sustainability of those changes.

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APPENDICES

Appendix A: In-depth Interview Instrument

1. What are your overall impressions of the Change Starts at Home program? Probes: Is it meeting your expectations?

2. What about the Change program do you find the most useful?

Probes: What sessions resonated most strongly for you [spoke to you most strongly]? Why?

What sessions were the most interesting for you and why?

3. Was there anything taught or discussed in the sessions that you disagreed with or did not like? Probe: Can you give a specific example of something that you disagreed with, at least when you first heard it?

Have your feelings changed over time, or do you still find this content challenging?

4. Are you aware of any changes in yourself—your ideas, your behavior--since you became involved in the Change program?

Probe: Can you give me some specific examples?

Do you think that this change is specifically because of the program?

5. Has anything changed in your relationship with your spouse?

Probe: Does (s)he treat you any differently? In what way? Do you treat him/her any differently?

6. Has your participation led to any changes in how the two of you communicate?

Probes: Has it led to changes around sharing feelings and concerns with your spouse?

7. Has your participation led to any changes around how you and your spouse make decisions?

Probes: Can you give me an example?

In what areas do you observe changes (e.g. household purchases, raising the children, his work or your work?)

Are there areas of decision making where things haven't changed or have changed less?

8. Has your involvement in the Change program affected how you and your spouse handle disagreements or conflict? In what way?

Probes: Can you give me an example of something you have started doing differently?

9. Has the Change program affected what happens when you and your spouse fight?

[women only] Probes: Has it affected whether your husband hits you or hurts you in some other way?

Of those who said at based that their husband sometimes frightened them, ask:

Are you more or less frightened of your husband now than before you joined the Change program?

10. Has your involvement in the Change program led to any changes in the ways you and your spouse parent your children?

11. Has your involvement in the Change program led to any changes in the way you or your husband interact with your/your husband's family?

Probe for changes in expressing your opinion when it may differ from other household members, control over day to day activities, safety and security.

12. How has your involvement in the Change program changed the role your/your husband's family have in how you and your spouse get along?

Probes: Do they instigate fights between you and your spouse? Do you and your spouse fight over issues related to the family?

- 11. What do you think are your spouses' overall impressions of the Change program? Probes: Does this differ from yours in any way?
- 12. Has your involvement in the program led to any changes in who does what in the household? Probe: For example, cooking or helping with housework?

 Taking care of the children?

 Earning income to support the family?
- 13. Do you think it has affected his expectations of you as a wife? For men: your expectations of her as a wife?

I've asked you a lot of questions and I thank you for your patience. Before I go, is there anything I haven't asked that you think is important for us to know around the topics we have discussed today?

Appendix B: Couple Case Summary Matrix

Couple ID	Summary of Overall Reported Change
1982	Husband quit drinking, positive change in gendered labor roles, increased marital
1702	communication, improved decision-making balance, reduced quarreling/increased conflict
	resolution
2018	Positive change in gendered labor roles, increased marital communication, decision-making,
2010	reduced quarreling/increased conflict resolution
9008	Husband quit drinking, husband roaming less, positive change in gendered labor roles,
	increased marital communication, improved decision-making balance, improved sexual
	decision-making, reduced quarreling/increased conflict resolution
2099	Husband roaming less, moderate change in gendered labor roles, increased marital
	communication, improved decision-making balance, reduced quarreling/increased conflict
	resolution
2114	Husband roaming less, positive change in gendered labor roles, increased marital
	communication, improved decision-making balance, improved sexual decision-making,
	Positive change in roaming tendencies, reduced quarreling/increased conflict resolution
5161	Positive change in gendered labor roles, increased marital communication, improved decision-
	making balance, improved sexual decision-making, reduced quarreling/increased conflict
	resolution, reduction in physical IPV, present but diminished emotional IPV
5163	Husband drinking less, husband roaming less, positive change in gendered labor roles,
	increased marital communication, improved decision-making balance, improved sexual
	decision-making, reduced quarreling/increased conflict resolution, reduction in physical and
	sexual IPV, resent but diminished emotional IPV
5224	Husband drinking less, husband roaming less, positive change in gendered labor roles,
	increased marital communication, improved decision-making balance, reduced
	quarreling/increased conflict resolution, reduction in physical IPV
5271	Husband drinking less, husband roaming less, positive change in gendered labor roles,
	increased marital communication, improved decision-making balance, improved sexual
	decision-making, reduced quarreling/increased conflict resolution, reduction in physical and
5303	sexual IPV, present but diminished emotional IPV Husband roaming less, positive change in gendered labor roles, increased marital
3303	communication, improved decision-making balance, reduced quarreling/increased conflict
	resolution
5329	Husband roaming less, positive change in gendered labor roles, increased marital
3327	communication, improved decision-making balance, reduced quarreling/increased conflict
	resolution
6215	Positive change, positive change in gendered labor roles, increased marital communication,
	improved decision-making balance, improved sexual decision-making, reduced
	quarreling/increased conflict resolution reduction in sexual and emotional IPV
6222	Positive change in gendered labor roles, increased marital communication, improved decision-
	making balance, reduced quarreling/increased conflict resolution
6226	Husband previously quit drinking, husband roaming less, positive change in gendered labor
	roles, increased marital communication, improved decision-making balance, reduced
	quarreling/increased conflict resolution
6314	Husband roaming less, positive change in gendered labor roles, positive change in gendered
	labor roles, increased marital communication, improved decision-making balance, reduced
	quarreling/increased conflict resolution
6319	Husband less aggressive when drunk, husband roaming less, positive change in gendered labor
	roles increased marital communication, improved decision-making balance, improved sexual
	decision-making, reduced quarreling/increased conflict resolution reduction in sexual and
(227	emotional IPV
6327	Husband roaming less, positive change in gendered labor roles, increased marital
	communication, improved decision-making balance, reduced quarreling/increased conflict
	resolution, reduction in physical IPV

Appendix C: Couple Concordance Matrix

Change	Description	Distribution of Couple	Example of Concordant (C)	Example of Moderately Concordant (MC)	Example of Discordant (D)	Example of Male Report	Example of Female Report				
Change	Description	Concordance	Concordant (C)	Concordant (MC)	Discordant (D)	Only (MRO)	Only (FRO)				
	INDIVIDUAL-LEVEL CHANGE										
Husband Alcohol Use Behavior	Report of reduction in alcohol, to include quitting entirely, reducing use or engaging in less risky substance use	4 C 1 MC 0 D 0 MRO 2 FRO 10 NM	"Before I used to drink a bit. But after joining the program, I have quit drinking." - HUSBAND "Nothing like that. It is good. He does not even drink. He does not raise his voice. He does not tell me what to do." - WIFE	"Before I used to drink alcohol sometimes. (laughs) and I used to threaten my wife. But now after participating in this program I understood many things and I improved HUSBAND "He used to drink like before only. He only drinks sometimes, not daily." - WIFE			"Yes, it has lessened but he does not fight after drinking alcohol. After he comes back from work, he tells me that he would go for drinking. Afterwards he asks for food and sleeps. He does not fight." - WIFE				
Husband Alcohol Risk Knowledge	Report of increased knowledge or skills related to effects of alcohol use on individual and family health	0 C 0 MC 0 D 0 FRO 7 MRO 10 NM				"Because of this program also I understood that if we drink alcohol then only violence will occur, so I thought it's worthless."-					
Husband "Roaming" Behavior	Report of change in roaming	4 C 0 MC 0 D	"We also ask if we want to go somewhere. Before if wasn't like			"Before this, I roamed around, didn't agree to	"He used to walk around a lot, even during				

	behavior, to include quantity and quality of time spent at home, consideratio n of wives, communicat ion related to departure, destination, and time of return	4 FRO 3 MRO 6 NM	that I straightly went out but now I inform her that for what work I am going and at what time I will be back." - HUSBAND "He used to go anywhere without telling me Yes. I used to inform him but he didn't inform me anything."-WIFE			her decisions, did things against her permissions. Now, I listen to her and try to coordinate I simply don't go if she asks me not to."- HUSBAND	evening. Now he doesn't. Though he goes just around for 15-20 minutes, he would say where he is going and goes Yes. Earlier when I asked him where he was going, he would reply why you need to know and just whiz away. He has that kind do behaviour and now there's change from his side as well."-
			RELATIONSH	IP-LEVEL CHANGE			
Gendered Labor	Report of	11 C	"For instance, before	"Between the two both	"NoUmm		R : "But my
Roles	increased	4 MC	we used to do our own	the work within the	usually there isn't		husband also
	collaboratio	1 D	work. But my wife used	house and outside are	any such change.		says – don't
	n,	0 MRO	to do most of the work	equally important.	(laughs) it same like		work and just
	willingness	1 FRO	in cooking and other	Household works like; as	beforeSo our		stay in bed."
	to engage in	0 NM	household work. After	eating food is essential	family is like this		
	non-		joining the program, we	and that's equally vital	from the beginning		I: "Was it like
	traditional		learned that both of us	as well as bringing food	only." -HUSBAND		this before or
	roles and		should work equally. If	from working outside is			not?"
	helping one		someone is working	important too. If there is	"Before he used to		
	another with		outside, the other	no outside work then	throw clothes here		R: "NoIf I
			person should work	both of us working	and there, he didn't		cook my

	gendered tasks		inside. When the wife is not able to cook, the husband should."- HUSBAND "But since joining this program, my husband helps me around the house. He understands my problems, and he helps me more than before He helps me in everything. In cooking and other things. If he looks after the cattle, I look after the house."- WIFE	together; somebody cutting the vegetable the other So, in this manner we move forward."-HUSBAND "I have weak back and can't get up early in the morning. I can't even bend sometimes in the morning. I ask him to broom so that I can wipe the floor clean. He does this too He didn't use to do it before? R: No, he didn't use to do it before. Even when I have my periods he wakes up, cleans the house and performs puja." -WIFE	care about my hands but now he says – your hand is like that I will wash the clothes. He takes care of me and washes his own and children's clothes also."-WIFE	husband does other works like watering the vegetables, burning fire to cook, cuts vegetables" - WIFE
Marital Communication	Report of increased marital communicat ion	9 C 6 MC 2 FRO 0 MRO 0 NM	"Before I didn't discuss things with family in doing some works. I used to think they will not understand this so I didn't discuss with them but now I do discuss with me for small matters also."-HUSBAND "In talks, changes have occurred. It's like this,	"It is still like that. This program has further improving that. So in my life there hasn't been any major change due to this program." -HUSBAND R: He speaks with me about happy and sad times. However it was before he has become good now, he treats me well. He has changed		"He shares with me. Sometimes he tells me about what he ate, sometimes he tells me where did he gets hurt, he tells me everything. At the evening we share everything with

			firstly we never had bad relationship at beginning also, but also now we sit together and discuss about different matters About feelings and thoughts, there are some things which we can't share openly right?So, we are able to talk about it openly nowadays." - WIFE	Before also he was like this but now he does it more openly." - WIFE			each other. At noon we don't have time, so we talk in the evening Before also we used to do but now we do it much more Yes, I used to tell him from the beginning only. He didn't used to talk much but now after listening to this program he also shares everything with me." -WIFE
Marital Decision-making	Report of increased balance in decision-making process, to include small and large scale decisions	12 C 2 MC 1 D 1 MRO 1 FRO 0 NM	"Before, I used to make the decisions mostly. Now, the decisions are from both of us, after having discussions."-HUSBAND "Before, some things used to happen without me knowing about it. I used to do a few things without telling him. And he used to do a few things without telling me. Now we take each		"Whether in the past or now, we both discuss seriously about these matters and take a coordinated decision." - HUSBAND I: After that in the matter of the households decisions like for buying things, has he started asking you these days?	"Before also we used to take the decisions but mainly the men in the family took the decisions according to their wish. (laughs) then the wives had to obey them because they had the fear that men will beat them.	"He asks me before doing anything. Like he says let's do this and that toda.y" -WIFE

Sexual Decision-making	Report of shifted balance in sexual decision-making	1 C 0 MC 0 D 1 MRO 5 FRO 0 NM	"Before, there used to be sex even if my wife did not want it, forcefully. But through this program, we learned that there shouldn't be sexual relations without mutual agreement between the husband and the wife." - HUSBAND "He now thinks that he should also do certain things. He also considers if I want to have sexual relations. He says that we will only do it if I want it. If not, we don't do it." - WIFE		R: No - WIFE	(laughs) but now it isn't like that I listen to her decisions and also she listens to my decisions. We understand each other's decisions." - HUSBAND "Let's say if I want to have sex then, I have to take permission from her. If she agrees then we have sex otherwise we don't." - HUSBAND	"In case of sexual contact, he used to do forcefully even though I didn't want it. Now, we discuss and have contact if there's sexual desire in both of us." -WIFE
Quarreling and Conflict Resolution	Report of reduced quarreling or improved	9 C 7 MC 0 D 0 MRO	"Because before there used to be little quarrels with the wife. After joining the	"We never had disagreements. Even if we get angry with each other we talk to each			"Even if he gets angry then he goes out of the house to the

	conflict resolution	1 FRO 0 NM	program, it has improved." - HUSBAND "We used to fight before, but it doesn't happen now." - WIFE	other very soon, we don't have any big issues Yes, before also it was like that." - HUSBAND "Before he used to get angry, in small matters also he used to get angry. He used to tell me to shut up and get angry but now he doesn't get angry and go." - WIFE		grocery or somewhere and comes back after a while Yes, after he controls his anger." - WIFE
Experience of IPV Physical	Report of	1 C	"Sometimes, I used to		<i>I:</i> Were there	"Yes, earlier
Пузил	reduced perpetration or victimizatio n of physical abuse	0 MC 0 D 1 MRO 3 FRO 11 NM	slap her once or twiceI used to slap her. Sometimes she used to slap me as well Yes, they don't happen anymore." - HUSBAND "Before, my husband used to scold me, beat me as well. After joining the program, he doesn't scold. We stay together amiably." - WIFE		fights, domestic violence before? R: Yes, a little. Now that we're a little old, matured, a little learned, we try to work in coordination. We fear, feel shy, know how respect is gained there has been a time where you were particularly influenced by the program to not jump into a fight." - HUSBAND	too he didn't use to confront me but when he got very angry he used to slap me once or twice. But now after listening to the program there hasn't been any offence." - WIFE

Emotional	Report of reduced perpetration or victimizatio n of emotional abuse, threats or fear inducing behavior	1 C 0 MC 1 D 0 MRO 3 FRO 12 NM	"Before I used to drink alcohol sometimes. (laughs) and I used to threaten my wife. But now after participating in this program I understood many things and I improved." – HUSBAND "When I didn't used to obey what he said, I used to think that he will beat me and scold me. So I used to get afraid. But now I don't fear him Now after he listened to this program, he talks to me nicely. He has understood things now." -WIFE	"Before, I used to yell at her for annoying me when I returned home tired after a hard day's work. I used to threaten her. Now, if she yells and if I get angry, I walk away." -HUSBAND "He does try to scare me. He warns me he will beat me if I go out of line. And I keep quiet." - WIFE	"Yes At times he used to reprimand me but it has lessened these days." - WIFE
Sexual	Report of reduced perpetration or victimizatio n of sexual abuse, to include coercion	2 C 0 MC 0 D 0 MRO 2 FRO 13 NM	"Before, there used to be sex even if my wife did not want it, forcefully." - HUSBAND "He also considers if I want to have sexual relations. He says that we will only do it if I want it. If not, we don't do it." -WIFE		"Yes, when he wanted to have sex I used to do it even if I didn't want to. I used to think that he will go somewhere else. But now after listening to this program he also have started

				understanding Yes. Now he
				doesn't force
				me." - WIFE