

“Change Really Does Need to Start From Home”: Impact of an Intimate Partner Violence Prevention Strategy Among Married Couples in Nepal

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Abstract

Approximately 54% of women in rural Nepal report lifetime physical or sexual violence. The *Change Starts at Home* project is a primary prevention strategy to reduce and prevent marital intimate partner violence (IPV). This study analyzed in-depth interviews with 17 married couples ($n = 34$ individuals) at intervention midline and end line. Case-based analysis and thematic summaries were used to assess change, couple concordance, and gendered reporting patterns at midline. Individual changes included husband's alcohol use and roaming tendencies. Relationship-level changes comprised labor roles, communication, decision making, conflict resolution, and experience of IPV. End line interviews were analyzed to understand sustenance of change within these same individual and relationship dynamics. Results indicate promising shifts in men's individual behavior and marital dynamics, which underpin IPV risk.

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Introduction

Intimate partner violence (IPV) is as a pervasive public health problem, with approximately 30% of ever-partnered women reporting experiences of violence at the hands of a partner (García-Moreno et al., 2013; Heise, Ellsberg, & Gottemoeller, 1999). Adverse health associations include physical, psychological, and fatal outcomes (García-Moreno et al., 2013; Heise et al., 1999; Stöckl et al., 2013), and estimated costs amount to over 5% of the world gross domestic product (GDP; Fearon & Hoeffler, 2014). High IPV prevalence is attributable to various factors across the social-ecological model (SEM), from individual to societal levels. Alcohol use (Atteraya, Gnawali, & Song, 2015; Puri, Frost, Tamang, Lamichhane, & Shah, 2012; Sharma, 2007), marital communication, division of labor, imbalanced decision making (Atteraya et al., 2015; Lamichhane, Puri, Tamang, & Dulal, 2011), and rigid societal norms marked by male dominance and female submission, compounded by existing societal inequities, increase risk of IPV (Jewkes, 2002; Uprety, 2016; Watts & Zimmerman, 2002).

Intervention strategies to reduce and prevent IPV have begun to include men more often (Ellsberg, Jansen, Heise, Watts, & Garcia-Moreno, 2008; García-Moreno et al., 2015; Jewkes, Flood, & Lang, 2015). The most effective male-engaged initiatives have been gender transformative, multicomponent interventions (Barker, Ricardo, Nascimento, Olukoya, & Santos, 2010; Barker, Ricardo, Nascimento, & Organization, 2007; Ellsberg et al., 2015; García-Moreno et al., 2015) with elements that provide space for participants to critically reflect and explore new ideas together, such as community engagement activities and group education (Abramsky et al., 2014; Barker et al., 2010; Barker et al., 2007; Carlson et al., 2015; Ellsberg et al., 2015; Heise, 2011; Hossain et al., 2014; Pulerwitz et al., 2015; Ricardo, Nascimento, Fonseca, & Segundo, 2010). These strategies have brought about change in gender equitable attitudes (Abramsky et al., 2014; Dworkin, Hatcher, Colvin, & Peacock, 2013; Gurman et al., 2014; Miller, Jaime, & McCauley, 2016; Pulerwitz et al., 2015) and self-reported use of IPV (Jewkes et al., 2015; Pulerwitz et al., 2015) and have shown trends toward less violence within relationships (Abramsky et al., 2014; Foshee et al., 1998; Gurman et al., 2014; Hossain et al., 2014; Verma et al., 2008). Furthermore, engaging men and women together may hold even more potential (Cislaghi, 2018; Jewkes et al., 2015). Although research assessments of couple-engaged strategies are limited, some indicate promising outcomes, including increase in communication and conflict resolution skills,

and reduction in violence (Bradley, Friend, & Gottman, 2011; Cislighi, 2018; Stith, Rosen, McCollum, & Thomsen, 2004). Less is known about primary prevention strategies with couples in low- and middle-income countries (LMICs). Emerging interest in the couple approach and persisting need to understand effective strategies in LMICs warrant further exploration of these approaches in high-risk areas.

Previous research in Nepal has determined that more than 50% of women have experienced some form of violence in their lives, and approximately one third of reproductive-age women report lifetime experiences of IPV (Dalal, Wang, & Svanström, 2014; Lamichhane et al., 2011; Ministry of Health and Population [MOHP], 2011). Prevalence in rural Nepal is even higher, with 54% of women reporting lifetime physical or sexual violence (Atteraya et al., 2015; Lamichhane et al., 2011), and women living in the Terai region, specifically, have been determined to be at greatest risk of IPV (Atteraya et al., 2015). Despite progress in recent decades (MOHP, 2011), Nepal remains an inequitable place for many women (Sharma, 2007; Uprety, 2016). Numerous norms and expectations, such as early and arranged marriage place women and girls at high risk (Atteraya et al., 2015; Boyle, Georgiades, Cullen, & Racine, 2009; Lamichhane et al., 2011; Sharma, 2007). Women in Nepal often experience limitations in their ability to seek education, work, or socialize freely outside the home (Atteraya et al., 2015; Lamichhane et al., 2011; Sharma, 2007), and Nepali men tend to be dominant within decision making, ascribe to traditionally gendered roles, and hold significant control over their wives (Atteraya et al., 2015; Lamichhane et al., 2011; Sharma, 2007; United Nations Development Program, 2014). Among Nepali men and women, alike, acceptability of violence against women and girls (VAWG) is markedly high (Atteraya et al., 2015; Sharma, 2007), which increases their own risk of IPV (Abramsky et al., 2011; Boyle et al., 2009; Uprety, 2016).

The *Change Starts at Home* program (*Change*)—a 9-month social and behavior change communication intervention involving a radio drama, radio listening and discussion groups (LDGs), and broader community engagement—was designed to transform gender norms, increase relationship skills, and ultimately prevent IPV (Clark et al., 2017). The *Change* curriculum (Ferguson & Shrestha, 2017) comprises three phases: (a) critical reflection of norms that perpetuate IPV, (b) development of life skills to make behavior changes and shift norms, and (c) community action. This program was tested through a two-armed cluster randomized trial in rural Nepal (Clark et al., 2017). This article explored individual- and relationship-level changes reported by participants and their partners at five and nine months of program participation.

Ethical Considerations

Institutional review board approval was obtained for the broader study from Emory University (IRB00091115) and the National Health Research Council in Nepal (178/2015; Clark et al., 2017). Furthermore, permission to conduct the study was obtained from the District Development Committees representing the study sites. All participants provided written, informed consent.

Method

Study Context and Participants

Due to existing research partnerships and high prevalence of IPV (MOHP, 2011), 36 Village Development Committees (VDCs) within Chitwan, Kapilvastu, and Nawalparasi districts were purposively selected and pair-matched based on social, economic, and demographic features. Within each VDC, the probability proportionate to size methodology was used to select two wards. Eligible study participants included Nepali-speaking women, without an easily detectable impairment that would preclude study participation, between 18 and 49 years, married to a man above the age of 18 years, and both partners resided together in the study ward. Within intervention wards, 10 eligible couples (360 total couples) were purposively recruited to participate in weekly gender-segregated LDGs, with an emphasis on willingness to commit for 9 months and residential proximity to the LDG location. A subsample of the LDG couples was selected ($n = 18$ couples, 36 individuals) to participate in individual in-depth interviews. The LDG members were recruited by a well-respected local implementing partner organization, which would have created some immediate rapport. Information relayed through the recruitment scripts included the nature of the project, general ethical protections, and incentives. Incentives included a small 100 Nepali rupees travel allowance, and all meetings included refreshments.

Data Collection

The interviews analyzed in this article, taken at intervention midpoint (5 months after baseline) and end line (9 months after baseline), were conducted individually with professionally trained interviewers, and followed a semistructured guide with 20 questions related to change in oneself, their partner, their marriage, family, and community. Midline interviews included questions, such as “Are there 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?” End line interviews included

questions, such as “How has your involvement in the Change program affected/continued to affect your relationship with your spouse?” and “Are there any aspects of your relationship that changed as a result of your involvement in the Change program but reverted back?” Interviews lasted 45 to 90 min, were recorded with consent, and were transcribed directly from Nepali into English.

Data Analysis

Descriptive demographic information was drawn from baseline survey data of the broader study (Clark et al., 2017). Employing the existing codebook for the parent study, multiple team members in the United States, the United Kingdom, and Nepal coded a subsample of transcripts using comments in Microsoft Word. Revisions were discussed by team members and incorporated into the final codebook, which was thereafter utilized by four team members (Nepali project director, British technical advisor, and two Nepal-based American interns) to code all transcripts. Transcripts were imported into NVivo 11 software to be electronically coded in the United States, which entailed coding a transcript while comparing with Microsoft Word-coded transcripts to assess overall coding consistency. All files were converted for final analysis in MAXQDA software due to change in licensure. For end line data, two Nepali team members, two American team members, and the principal investigator (PI) reviewed all transcripts and made additional codebook edits to account for themes not covered in the baseline and midline interviews. Coding of end line data was performed by three American team members using MAXQDA. Several rounds of intercoder reliability testing were done to ensure consistency among team members.

Midline analysis comprised case summaries of each couple, which were compiled and displayed using matrices to determine overall and code-specific change, considering reports from either spouse (see Table 1). Code-specific information was entered into a matrix developed along the individual and relationship levels of the SEM. Husband’s and wife’s accounts were denoted as positive, slightly positive, lacking change, negative change, or not reported, and direct comparisons were drawn within couples to assess couple concordance, which included the following categories: (a) concordant: nearly or fully corroborated reports of change; (b) moderately concordant: both spouses reported change, but one spouse reported greater change than was corroborated by the partner; (c) discordant: spousal reports were contradictory or unparallelled; and (d) female report only and (e) male report only: one spouse reported change not discussed by the other. Thematic summaries were used to explore reporting patterns within and across couples in each area of

Table 1. Couple Case Summary Matrix.

Couple ID	Summary of Overall Reported Change at Midline	Change Reported or Maintained at End Line
Chitwan 01	Husband quit drinking, positive change in gendered labor roles, increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution	Increased marital communication, more equitable decision making, positive change in gendered labor roles
Chitwan 02	Positive change in gendered labor roles, increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution	Husband quit drinking, more equitable decision making, reduced quarreling/increased conflict resolution
Chitwan 03	Husband quit drinking, reduced husband roaming, positive change in gendered labor roles, increased marital communication, more equitable decision making, more equitable sexual decision making, reduced quarreling/increased conflict resolution	Husband had resumed drinking but remained less than at baseline, reduced husband roaming, increased marital communication, more equitable decision making
Chitwan 04	Reduced husband roaming, moderate change in gendered labor roles, increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution	Increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution
Chitwan 05	Reduced husband roaming, positive change in gendered labor roles, increased marital communication, more equitable decision making, more equitable sexual decision making, positive change in roaming tendencies, reduced quarreling/increased conflict resolution	Positive change in gendered labor roles, increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution
Kapilvastu 01	Positive change in gendered labor roles, increased marital communication, more equitable decision making, more equitable sexual decision making, reduced quarreling/increased conflict resolution, reduced physical IPV, present but diminished emotional IPV	Increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution, no report of IPV since midline

(continued)

Table 1. (continued)

Couple ID	Summary of Overall Reported Change at Midline	Change Reported or Maintained at End Line
Kapilvastu 02	Reduced husband drinking, reduced husband roaming, positive change in gendered labor roles, increased marital communication, more equitable decision making, more equitable sexual decision making, reduced quarreling/increased conflict resolution, reduced physical and sexual IPV, present but diminished emotional IPV	Reduced husband drinking, increased marital communication, reduced quarreling/increased conflict resolution, reduced physical IPV, positive change in gendered labor roles
Kapilvastu 03	Reduced husband drinking, reduced husband roaming, positive change in gendered labor roles, increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution, reduced physical IPV	Reduced husband drinking, increased marital communication, reduced quarreling/increased conflict resolution
Kapilvastu 04	Reduced husband drinking, reduced husband roaming, positive change in gendered labor roles, increased marital communication, more equitable decision making, more equitable sexual decision making, reduced quarreling/increased conflict resolution, reduced physical and sexual IPV, present but diminished emotional IPV	Increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution
Kapilvastu 05	Reduced husband roaming, positive change in gendered labor roles, increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution	Increased marital communication, reduced quarreling/increased conflict resolution
Kapilvastu 06	Reduced husband roaming, positive change in gendered labor roles, increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution	Reduced husband drinking, reduced husband roaming, increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution

(continued)

Table 1. (continued)

Couple ID	Summary of Overall Reported Change at Midline	Change Reported or Maintained at End Line
Nawalparasi 01	Positive change in gendered labor roles, increased marital communication, more equitable decision making, more equitable sexual decision making, reduced quarreling/increased conflict resolution, reduced sexual and emotional IPV	Increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution, positive change in gendered labor roles
Nawalparasi 02	Positive change in gendered labor roles, increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution	Increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution, positive change in gendered labor roles
Nawalparasi 03	Husband previously quit drinking, reduced husband roaming, positive change in gendered labor roles, increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution	Husband quit drinking, reduced husband roaming, positive change in gendered labor roles, increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution
Nawalparasi 04	Reduced husband roaming, positive change in gendered labor roles, increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution	Positive change in gendered labor roles, increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution
Nawalparasi 05	Husband less aggressive when drunk, reduced husband roaming, positive change in gendered labor roles, increased marital communication, more equitable decision making, more equitable sexual decision making, reduced quarreling/increased conflict resolution, reduced sexual and emotional IPV	Husband quit drinking, reduced husband roaming, positive change in gendered labor roles, increased marital communication, more equitable decision making, more equitable sexual decision making, reduced quarreling/increased conflict resolution, reduced sexual and emotional IPV
Nawalparasi 06	Reduced husband roaming, positive change in gendered labor roles, increased marital communication, more equitable decision making, reduced quarreling/increased conflict resolution, reduced physical IPV	Reduced mutual physical IPV, more equitable sexual decision making, increased marital communication, reduced quarreling/increased conflict resolution

Note. IPV = intimate partner violence.

Table 2. 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)
Employed in past 12 months	Wife	Husband
No	59 (10)	18 (3)
Yes	41 (7)	82 (14)
Characteristic	M (SD)	
Age	Wife	Husband
	34 (7)	41 (8)
Wife age at marriage	18 (3)	
Duration of marriage	16 (7)	

Note. SLC = school leaving certificate.

change to determine gendered patterns. One participant had two wives and was therefore excluded, resulting in 17 couples ($n = 34$ individuals) in the final analysis. End line analysis was similarly conducted using data from the same 17 couples to assess sustenance of said changes.

Results

Sample Characteristics

Results from descriptive analysis can be found in Table 2. Five couples (29%) were from Chitwan, six (35%) from Nawalparasi, and six (35%) from Kapilvastu. Wives' ages ranged between 22 and 46 years, with an average age of 34.24 years ($SD = 7.00$ years). Husbands' ages ranged between 24 and

53 years, with an average age of 41.05 years ($SD = 7.90$ years). Wives' age at marriage ranged between 15 and 24 years, with an average of 18.29 years ($SD = 2.66$ years). 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 2 and 28 years with an average duration of 15.94 years ($SD = 7.22$ years). Three (18%) wives had little or no education, seven (41%) had a primary education, five (29%) had a secondary education, one (6%) had an intermediate education, and one (6%) had a school leaving certificate (SLC) or beyond. No husbands had little or no education, two (12%) had primary education, 10 (59%) had secondary education, three (18%) had intermediate, and two (12%) had SLC or beyond. Most of the husbands were employed in the prior 12 months (82.35%, $n = 14$), whereas less than half of the wives were employed (41.18%, $n = 7$).

Individual-level change. Individual-level change among men was reported by one or both spouses within the majority of couples ($n = 13$) and fell in two primary areas, alcohol use and roaming tendencies, which was described as spending significant time away from the home, often wandering about with friends at night.

Alcohol use. At midline, changes in husbands' alcohol tendencies were reported by four concordant couples, one moderately concordant, and two wives. All couples, in which husbands previously drank, reported at least some change in husbands' alcohol tendencies, with some husbands quitting entirely. 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 . . . 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. (Husband, Kapilvastu 02)

Alcohol use changes affected 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 03).

Husbands largely attributed these changes to increased knowledge about the harmful impact of alcohol: "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 03). Some men explained that their wives had previously tried to convince them to quit drinking, and the program furthered their intention: “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 01).

At end line, this change persisted in seven couples (three concordant, two wives, and two husbands). Within couples where this change was sustained, wives reported improvements related to marital communication, division of labor, quarreling, and experience of IPV. One couple described past incidents of reciprocal violence precipitated by the husband’s alcohol use, but reported significant improvements at end line due to reduced drunkenness:

I used to come home totally drunk, my friends had to bring me home as I used to have pass out. So my wife used to beat me and shout at those who brought me home. But now realize that I was wrong and she had a good reason to be mad. Now I even advise others not to do that. (Husband, Nawalparasi 03)

Roaming tendencies. At midline, changes in husband’s roaming tendencies were reported by four concordant couples, four wives, and three husbands. Rather than staying out late 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 . . . But nowadays he doesn’t come home late. He comes home at time. (Wife, Nawalparasi 06)

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 05).

Related to communication, one woman recalled, “Earlier when I asked him where he was going, he would reply, ‘Why you need to know?’ and just whiz away” (wife, Kapilvastu 06). Husbands had started to exhibit more consideration when deciding to leave the home: “If he has to go somewhere then he asks me and leave . . . Before he used to leave without informing, but now he says before leaving and tells the time he will be home” (wife, Chitwan 04). Husbands 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 06).

At end line, four wives reported that improvements in husbands' roaming had persisted: "But he doesn't drink alcohol; he has improved a lot compared to before. When he used to drink alcohol he used to roam around the whole night" (wife, Chitwan 03). Similar to midline reports, decreases in roaming also led to improved task sharing in the household:

The impact toward my husband is also good, he used to walk at evening . . . he had not sense to help [his] wife at home, but it is just reverse nowadays, such as he use to come back at home at evening and starts to help me. (Wife, Kapilvastu 06)

Relationship-level change. Relationship-level change was reported by one or both spouses within all participating couples ($n = 17$), including gendered labor roles, communication, decision making, quarreling and conflict resolution, and reported experience of IPV (physical, sexual, and emotional).

Gendered labor roles. At midline, change in gendered labor roles was discussed by 11 concordant couples, four moderately concordant, one discordant couple, and one wife. Within moderately concordant couples, husbands admitted less change in themselves and focused more on overall change in spousal collaboration and increased help from their wives. While in the past many tasks were more rigidly divided between partners, participants expressed greater inclination 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 05), and many expressed appreciation for its efficiency. One wife explained that tasks were completed more quickly: "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" (wife, Nawalparasi 02).

Although some men had previously engaged in nontraditional roles, husband's willingness and initiative had increased related to domestic labor:

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 04)

Discussed among a few wives, husbands continued to engage in these tasks 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 01), and another explained,

[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 01)

Other couples reported less husband inclination to engage in cleaning tasks, as one wife explained of her husband: "He helps me in everything. In cooking and other things . . . He does not agree to wash [the children's] clothes. He washes his own sometimes" (wife, Nawalparasi 01).

Much of this change was attributed to program participation, as one man explained: "My opinions are changing. For instance, before we used to do our own work . . . After joining the program, we learned that both of us should work equally" (husband, Nawalparasi 01). These sentiments 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 01)

These changes were positively impactful, such as reducing marital conflict, "Now when he helps me with work, there isn't a reason for me to get mad. So, there has been change" (wife, Nawalparasi 01), and impacting children:

If I wash my own dishes, [the children] 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 03)

Lack of change in some families was largely explained by time constraints placed on employed husbands.

At end line, at least one spouse among all 17 couples reported more equitable division of labor, with men expressing more willingness to take on tasks traditionally performed by women, such as cooking, cleaning, and washing clothes. One wife described these changes: "He didn't wash dishes before. Now he does . . . he even cooks when we have visitors . . . he takes care of the house" (wife, Nawalparasi 03).

Communication. Change in communication was reported by nine concordant couples, six moderately concordant, and two wives. Most moderately concordant couples described preexisting marital communication, but one partner believed there had been more improvement than the other. Couples reported increased frequency of communication, particularly in the evenings:

“At the evening we share everything with each other . . . Before also we used to do but now we do it much more” (wife, Nawalparasi 05). Husbands were sharing their feelings more openly, as one man remarked, “We used to have less, but now it has expanded or we have open conversation” (husband, Kapilvastu 06), and another wife explained, “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 01). 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 06).

For many couples, the program itself served as common ground for conversation. One man described, “Now I ask her about the program and what happened in it. She also explains to me about it” (husband, Kapilvastu 02), and another woman’s husband recorded the radio program if she had to miss an LDG meeting:

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.
(Wife, Nawalparasi 05)

Although not pervasively discussed, greater freedom to discuss sexual matters was salient to at least two women: “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 01).

Improvements in communication were reported at end line by 11 concordant couples, one moderately concordant couple, three discordant couples, one husband, and one wife. In discordant couples, one spouse reported no improvement, whereas the other reported moderate improvement.

Decision making. At midline, change in decision making was reported by 12 concordant couples, two moderately concordant, one discordant, one husband, and one wife. 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, whereas her husband reported significant change in his efforts to consider his wife in decision making. In one moderately concordant couple, the husband reported that their decision-making process had always been balanced, whereas his wife reported significant changes, and the other couple agreed that there was change, but each attributed said change to the other partner without acknowledging changes in themselves.

Multiple women had increased their engagement and participation in the decision-making process. One woman explained that there were times when she had little interest 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 . . . 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 01)

Many men had begun taking wives' opinions into greater consideration: "My husband used to take decisions himself only. But now he ask everything with me" (wife, Chitwan 03), and another woman 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 05).

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 01). Shifts in decision-making dynamics were warmly welcomed by men and women, alike. Multiple men felt that increased involvement of wives reduced the burden borne 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 . . . but now I have my mom, my wife and my two children . . . We all discuss together and managing the loan money and other resources has been easier through it. (Husband, Kapilvastu 01)

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: "Before he allowed me to wear only Sari, but now he allows me to wear whatever I like" (wife, Chitwan 03). 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 . . . 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. (Wife, Chitwan 05)

More equitable decision making was also reported at end line by seven concordant couples, two husbands, and two wives. One husband stated,

We are from [the] old generation so we never used to discuss with women, and we had the behavior of dominating them. But after we attended this program I have changed in those things, and in my family small fights don't occur compared to before, we don't have that ego attitude. (Chitwan 03)

In the remaining end line interviews, decision making was not addressed. Decision making largely centered around household finances, sex, and mobility outside the home:

If we have to buy anything, then we discuss about how much does it cost, how much we should spend on it or even before going to market she tells me the amount she has taken to buy things. When she comes back from the market she shows me the bills as well. We calculate the expenses with the bills and if we don't have bills sometimes we calculate it verbally. (Husband, Chitwan 06)

Quarreling and conflict resolution. At midline, change in quarreling and conflict resolution was reported among all couples, comprising nine concordant couples, seven moderately concordant, and one wife. Since program start, little to no quarreling was reported among all couples. Within moderately concordant couples, both spouses agreed there was little conflict; however, one spouse claimed this was mostly unchanged, whereas the other spouse saw greater change. Some couples experienced little conflict prior to the program, and so did not feel much change, whereas others reported significant change. One man explained, "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" (husband, Chitwan 01).

When conflict did arise, couples discussed increased ability to deescalate and resolve disputes within their marriage. Couples, and women in particular, reported previously experiencing frustration and rapid escalation in temperament; however, new skills improved their ability to manage and regulate anger. One woman explained,

Because before I used to get angry easily, I had a bad temper, but after I started listening to this program I learned that I have to control my anger . . . 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 05)

Another man shared similar changes: "Through this program, we got to learn how to manage anger . . . throwing accusations and insults at each other will only make things worse" (husband, Nawalparasi 01).

Couples who previously engaged in debate too quickly discussed a new regard for taking time apart, which allowed space to calm down and to reflect on their responsibility:

Now we listen to the program and [the LDG 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 02)

One wife reflected on previous tendencies: “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 06), and another man shared, “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 02).

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 . . . I didn’t used to talk . . . But now I have learned that we have to talk” (wife, Nawalparasi 03), 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 . . . [This program] makes a person become more open towards sharing and talking properly” (wife, Chitwan 04). Couples, particularly husbands, 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 06), as well as understanding the root issues behind the conflict: “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” (husband, Chitwan 02).

Couples attributed these skills to program participation. One woman explained that when she felt herself begin to escalate, she recalled lessons learned from the radio program to achieve de-escalation: “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 01), 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 the anger goes away after I remember the things taught in the radio program” (husband, Nawalparasi 02). Multiple participants found it beneficial not only to recall program lessons to calm themselves but also to prompt their spouse to recall

programmatically in the midst of conflict. One wife explained, “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 01). Referencing radio program examples, familiar 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 05)

At end line, nine concordant couples, four wives, and two husbands reported either improvements in conflict resolution or decreases in quarreling, describing sustained changes since the start of programming:

We don’t have fights. Before we used to have. After coming to this program it’s been nine months . . . we learned not to fight . . . we are humans so naturally sometimes we both get angry . . . sometimes you are disappointed with something . . . we don’t have a fight at all since nine months. My husband doesn’t get angry and even if I got angry he calms me down. (Wife, Nawalparasi 03)

Experience of IPV. Experience of physical, emotional, or sexual violence in the past or present was discussed explicitly among seven couples at midline. One couple concordantly discussed change in physical violence and 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, one discordantly, and three wives reported alone.

No couples reported experience (perpetration or victimization) of physical violence since program start. Although some couples had never experienced violence, this was reported as change among five couples, with one or both partners stating that the use of physical violence against wives had decreased. 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 offense” (wife, Kapilvastu 01), and a man explained, “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 02), 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 02). Wives explained that these changes reduced their level of fear around their husbands:

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 04)

Multiple couples reported reduction in emotional abuse; however, three of the women who previously experienced physical abuse explained that although 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 drunk a lot, then though he doesn't beat me, he scolds" (wife, Kapilvastu 04), and another stated, "He does try to scare me. He warns me he will beat me if I go out of line" (wife, Kapilvastu 02). Despite persisting intimidating and emotional abuse, these women discussed the 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. Nowadays he does it sometimes; he doesn't scolds but gives angry looks. Not much, just sometimes. (Wife, Kapilvastu 02)

And although 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 02). 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. (Wife, Nawalparasi 05)

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 05).

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 02).

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 sole wives. 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 . . . But now he doesn't force me, we discuss with each other and do it" (wife, Nawalparasi 05). Two husbands openly discussed these changes, admitting 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 01).

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. (Husband, Nawalparasi 05)

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" (wife, Nawalparasi 05).

Echoing midline data, the majority of couples reported no current violence perpetration or victimization at end line. Only four participants referenced IPV at end line, largely related to observed decreases in violence among neighbors as opposed to personal experience. One man spoke of past perpetration related to alcohol abuse: "The peoples had said by scolding me, 'He do beat his wife after getting drunk'. But now I'm different, I don't behave badly after drinking, and nowadays peoples think that I'm improved" (husband, Kapilvastu 02).

Discussion

At midline, couples reported positive changes in husband behavior, as well as shifts in 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 (Atteraya et al., 2015; Lamichhane et al., 2011; Sharma, 2007), these findings are encouraging. In line with previous IPV prevention efforts that have engaged men (Abramsky et al., 2014; Dworkin et al., 2013; Gurman et al., 2014; Jewkes et al., 2015; Miller et al., 2016; Pulerwitz et al., 2015), *Change* participants reported positive attitudinal and behavioral changes, including reported elimination of physical and sexual IPV perpetration. Although not all participating husbands were abusive or controlling of their wives to begin with, positive change was reported across couples, which may be beneficial not only for wives but also for husbands, themselves (Barker et al., 2007; Courtenay, 2000; Dworkin et al., 2013; Jewkes & Morrell, 2010). The radio program exposed participants to modeled behavior, which allowed participants to recall and adopt similar behaviors to navigate their own marriages. Furthermore, engaging couples in tandem curriculums, a promising intervention strategy (Cislaghi, 2018; Jewkes et al., 2015), proved successful among *Change* couples. As discussed by participants, the gender-segregated LDGs created space to safely navigate new ideas among their peers, and the parallel spousal participation allowed couples to practice new behavior together at home without provoking unfamiliar change.

Consistent with the SEM (Krug, Mercy, Dahlberg, & Zwi, 2002), reported changes transcended bounds of individual SEM 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 overall, 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 (Heise, 2011; Jewkes, 2002; Santana, Raj, Decker, La Marche, & Silverman, 2006; Uprety, 2016; Watts & Zimmerman, 2002). 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. Figure 1 depicts the conceptual framework for this analysis.

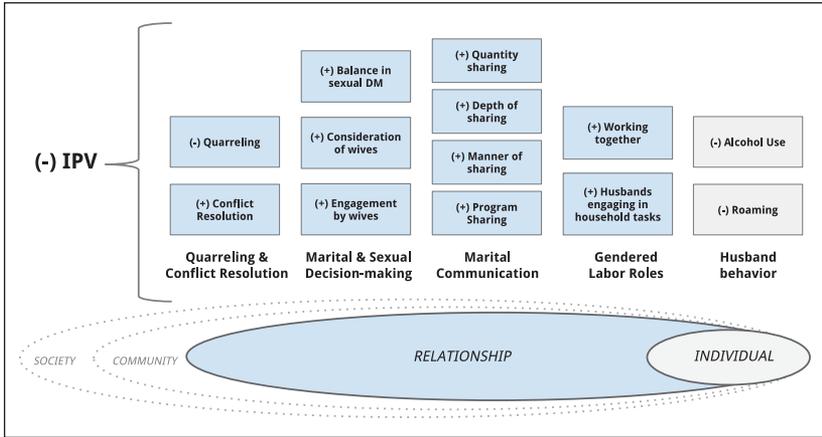


Figure 1. Conceptual framework of reported individual- and relationship-level changes.

Note. Individual changes in husband behavior: reduction in alcohol use and roaming. Relationship-level changes in gendered labor roles: husband engagement in household tasks and spousal collaboration. Change in marital communication: increased program sharing of *Change* lessons, positive manner of communication, increased depth and frequency of communication. Change in decision making: interest and engagement by wives and husband's consideration of wives. Change in sexual decision making: 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 of IPV among participating couples. IPV = intimate partner violence.

Although midline and end line analysis indicated pervasive and sustained changes in a positive direction, long-term sustenance of said changes were less clear. At end line, couples reported sustained change in husband's alcohol use, as well as relationship dynamics, including communication, quarreling and conflict resolution, decision making, gendered labor roles, and experience of IPV. However, examination of counterexamples would provide a more comprehensive understanding of the complex and intersecting dynamics that underpin IPV. For example, although most husbands who reported drunkenness at baseline had quit or reduced drinking at baseline, one husband continued to drink heavily and continued to perpetrate emotional abuse against his wife, although both reported that he no longer beat her.

This analysis found that within five months of participation in the *Change* program, individuals and couples perceived changes within their partners and relationships, and these changes were reported to be sustained in most

couples nine months later, at end line. Although causality cannot be determined in a qualitative study, the participants themselves believed that these changes were, at least in part, attributable to program participation. The interplay of these multilevel changes indicates that *Change* intervention components may be successful in reducing risk of IPV, which suggests that future IPV prevention efforts should employ multicomponent primary prevention strategies to engage couples as agents of change within their families and communities. Furthermore, the level of diffusion and continued sustainability of said changes should be explored at study follow-up, and future research should explore effective approaches for equipping communities to sustain change following program completion.

Limitations

Limitations of this study must be acknowledged. LDG participants, comprising the frame within which the interview sample was derived, were purposively selected based on geographic location and willingness to commit and therefore may not be representative of Nepali couples who live further away or were unable or unwilling to commit to weekly sessions. Prior baseline analyses found that the group members were comparable to the randomly selected survey respondents on most sociodemographic characteristics, but more group members were unemployed and fewer had love marriages (Clark et al., 2019). Furthermore, more group members reported contributing to decisions regarding sexual behavior and fewer reported abuse by their spouses (22% reported emotional abuse and 15% reported physical and/or sexual abuse at baseline; Clark et al., 2019). By nature, qualitative findings are not intended to be broadly generalizable but instead aim for transferability. As with any qualitative study, transferability should be applied with caution. With any self-reported measure, social desirability bias may have influenced participant responses, and this can particularly true when disclosing sensitive information, such as IPV. Moreover, underreporting among survivors and perpetrators of IPV may be also be present. However, the inclusion of both spouses and assessment of couple concordance may have accounted for this bias somewhat. Unfortunately, one couple was eliminated from the study on discovering the husband had two wives. Because this was one of the few cases where significant IPV had been reported, their exclusion may have influenced the findings. End line data were sparse in comparison with baseline and midline due to a more streamlined interview guide; as a result, some themes that emerged at earlier time points were explored in less depth or not at all in end line transcripts.

Conclusion

Individual- and relationship-level changes identified in this study have previously been 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 further the evidence for engaging couples to prevent violence within high-risk areas. Continued exploration of the *Change* project post intervention, 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 such changes.

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