


Community stakeholders' perspectives regarding acceptability of a life skills building intervention to empower women in Pakistan

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Abstract

Violence against women (VAW) is a major determinant in the assessment of a women's mental health. Many interventions have addressed strategies to reduce VAW, however, little information is available regarding effectiveness in the local context, particularly the role of men in women's empowerment. In Pakistan, a qualitative approach was undertaken in all four of its provinces to describe the community residents', both men and women, perceptions regarding the acceptability of a proposed life skills building (LSB) intervention involving men's engagement with regards to women's empowerment and VAW. Eighteen focus group discussions were conducted with men and women from locales within each province of Pakistan, averaging 6–10 participants per group. Fourteen key informant interviews were conducted with community stakeholders. The analysis identified three major themes: family life and male engagement, LSB training as an empowerment tool, and operationalization of the proposed LSB intervention. The proposed LSB intervention was well accepted by the participants with a strong urge to engage men in receiving the LSB training sessions. Men's engagement has been identified as an important element to facilitate women's empowerment. Participants suggested that these sessions should be held for two and a half hours per week within the community public spaces. In addition, these sessions should be based on an interactive approach. The focus of these sessions should include ideas surrounding positive relationships and economic skills building. Moreover, men's engagement will help to reduce VAW and improve the mental health of women in a patriarchal country like Pakistan.

KEYWORDS

domestic violence, life skills building, mental wellbeing, women empowerment

1 | INTRODUCTION

Acts of violence against women (VAW) are rampant in Pakistan, and it is common for cases to be underreported and for offenders to escape

prosecution. This violence includes physical, emotional, sexual, and financial abuse as a continued mechanism to reinforce the subordination of women. Evidence suggests that 56.3% of Pakistani women have experienced physical violence, 53.4% experienced sexual violence, and 88.1%

faced psychological violence, in the past year (Ali, Asad, Mogren, & Krantz, 2011). A violation of human rights, VAW is a well-documented occurrence in all societies regardless of their ethnic, sociocultural, economic, or religious makeup (Amir-ud-Din, Fatima, & Aziz, 2018). It has significant adverse effects that include physical damage (e.g., injuries, reproductive health issues, functional impairment, etc.), mental health problems (e.g., low self-esteem, anxiety, depression, posttraumatic stress disorder, suicide, etc.) and serious impacts on victims (Ahmed, Enam, Iqbal, Murtaza, & Bashir, 2016; Khalid & Choudhry, 2018; McTavish, MacGregor, Wathen, & MacMillan, 2016; Semahegn & Mengistie, 2015; Wathen & MacMillan, 2003; Zakar, Zakar, & Abbas, 2015). Furthermore, exposure to VAW (i.e., through direct exposure to violence or witnessing violence in the household) may lead to significant emotional impairment and other harmful effects in children as well (McTavish et al., 2016; Wathen & MacMillan, 2003).

Pakistan is considered the third highest risk country for VAW. With a female population of 101 million, 34% reported having experienced violence at some point in their lives (Dixit, Ahmed, Yadav, & Lal, 2019). In a 2-year span, from 2012 to 2014, there was a 33% increase in reported cases of VAW in Pakistan (Ali, Naylor, Croot, & O'Cathain, 2015). Perpetrators of such acts are mainly men and often include the victim's husband (51.56%), father (13.95%), or brother (7.97%; Foundation, 2018). Direct causes of VAW include domestic matters (i.e., arguments over household chores), reproductive issues (i.e., infertility, not giving birth to a son), acting against patriarchal wishes (i.e., going out without permission), or financial issues (i.e., frustration due to low income, dowry and property disputes). Consequently, the victims suffer from low self-esteem, anxiety, depression, functional impairment, low satisfaction with life, posttraumatic stress disorder, homicide, and suicide (Ahmed et al., 2016; Khalid & Choudhry, 2018; McTavish et al., 2016; Semahegn & Mengistie, 2015; Wathen & MacMillan, 2003; Zakar et al., 2015; Zakar, Zakar, Mikolajczyk, & Krämer, 2012).

1.1 | Global interventions tested for VAW

Globally, several intervention studies have been done to address primary, secondary, and tertiary levels of prevention for VAW with varied results. Primary prevention studies typically examine the effectiveness of education and information-focused interventions to curb the incidence of future intimate partner violence but are limited by the lack of rigorous study methodologies (Hatcher, Woollett, Pallitto, & Garcia-Moreno, 2018; Miedema & Fulu, 2018; Wathen & MacMillan, 2003). Studies addressing secondary prevention (i.e., screening and early detection) typically involve primary care clinicians who screen women for abuse and provide referrals for these women and/or their partners to various intervention programs. While screening tools are effective for the identification of women experiencing abuse (Iskandar, Braun, & Katz, 2015; Taft et al., 2013), there are limited data that exist for informing authorities in healthcare settings. The availability of data would serve as a means to create specific interventions aimed at improving the overall wellbeing and mental health outcomes of women.

Although findings from systematic reviews with a focus on VAW interventions supported the availability of epidemiological data, there is a lack of evidence-based approaches for primary and secondary prevention of VAW (McTavish et al., 2016; Wathen & MacMillan, 2003). Interventions fall into one of two categories based on their target population; perpetrators (most commonly men) or victims. Perpetrator-based intervention programs involve the referral of those identified as abusers to "batterer intervention programs" which deliver psychological education, cognitive-behavioral therapy, and/or other types of individual and group therapies for victims (Voith, Logan-Greene, Strodthoff, & Bender, 2018). These programs have demonstrated great potential for the prevention of VAW (Davis & Taylor, 1997). However, few studies have examined the effectiveness of skills-based educational approaches to curb the incidence of future violence (Hatcher et al., 2018; Miedema & Fulu, 2018; Wathen & MacMillan, 2003).

Many of the interventions for victims typically provide or support access to counseling, skill improvement to promote employability, housing, and social support. However, interventions can be combined at the primary and secondary levels of prevention. For example, a randomized-controlled trial conducted in New York City (Davis & Taylor, 1997) assessed a primary prevention initiative involving a public education campaign, including tenant meetings, leaflets, and posters, in combination with a secondary prevention intervention involving home follow-up visits by social workers or police, to reduce violence. While the interventions did not reduce the incidence of new cases of violence, the secondary prevention intervention resulted in more victims calling the police for help more frequently. While intervention studies hold potential for improving the lives of those affected by VAW, there is a need for rigorous designs to evaluate the effectiveness of such interventions (Ali et al., 2015).

1.2 | Interventions in Pakistan

In Pakistan, VAW has been addressed using primary and tertiary interventions. Primary interventions focused on addressing significant risk factors such as child marriage, female child abuse, violence against incarcerated women, and honor crimes. These interventions successfully delivered a variety of programs including legal reforms (i.e., the promotion of equity laws), media-based education efforts, gender sensitization, advocacy efforts for vulnerable groups, education and training for healthcare providers, and conditional cash transfers supported through the involvement of men and boys (Kalra, Di Tanna & Garcia-Moreno, 2017; Miedema & Fulu, 2018). Tertiary interventions in Pakistan are focused on the long-term care and support of victims through rehabilitation, reintegration, and measures to decrease the chances of abuse recurrence (Krug, Mercy, Dahlberg, & Zwi, 2002).

In 2012, the *Act of Domestic Violence (Prevention & Protection)* was passed and, by law protects not only women but also children from all forms of violence. However, inadequate implementation and under-reporting by victims are significant factors behind a continued high prevalence of VAW in Pakistan (Critelli, 2010; Zakar et al., 2015).

Clearly, more is required to ensure meaningful implementation and action beyond protective legislation. Interventions that are needed, and are likely to work, within the sociocultural framework of Pakistani society include those at the individual (e.g., economic skills building, health-based microfinance), community (e.g., group counseling, family-based models that include male involvement), and societal levels (e.g., promoting gender equality). Economic skills building, health-based microfinance, and family-based models that include male involvement are also imperative to successful intervention implementation (Ali et al., 2011; Karmaliani et al., 2012). Primary healthcare has been suggested as an appropriate location for intervention delivery (Krug et al., 2002).

There are mixed results in terms of efficacy for interventions that address VAW in Pakistan. The findings may be linked to the omission of studies in which the level of acceptance by the targets for specific interventions is assessed. In this study, we aim to explore the perspectives of local men, women, and key stakeholders regarding (a) acceptability and feasibility of a proposed life skills building (LSB) intervention, a manualized curriculum-based training for life skills enhancement, to married men and women, (b) men's engagement as an innovation to promote women's empowerment and reduce VAW.

2 | METHODOLOGY

The current study is part of a larger project, which will be conducted in a two-phased approach. Phase 1 (i.e., the formative phase), involves a qualitative inquiry using focus group discussions (FGDs) and key informant interviews (KIIs) conducted from July 2017 to March 2018. This qualitative study was conducted in selected districts across the four provinces of Pakistan. The provinces and their corresponding districts were Sindh, Baluchistan, Punjab, and Khyber Pakhtunkhwa (Figure 1), respectively. The purpose of conducting the study across four provinces was to record similarities and differences between cultures regarding the phenomenon under study. This paper

describes the findings from Phase 1, which will be used to guide the refinement and implementation of the proposed LSB intervention, which is to be carried out during the second phase of the larger project using a randomized-controlled trial in the Thatta district.

This study was approved by Aga Khan University, Ethics Review Committee (number: 5174-WCH-ERC-17), and National Bioethics Committee Pakistan Number: 224). All participants provided written informed consent.

2.1 | Study design

This qualitative inquiry was conducted using an exploratory-descriptive study design. To increase community participation and explore community perceptions regarding the proposed LSB intervention, participatory reflection and action (PRA) approach was used. An interactive approach, PRA emphasizes the action of local people and stakeholders to contribute to their own appraisal, analysis, and plans (Bheenaveni, 2018; Deka, Syiem, Saikia, & Surong, 2017). The PRA approach can be used for any health-related issue when it is believed that the participants have the agency to take action on the basis of their own reflection and analysis, and not on the basis of what is prescribed to them (Bergold & Thomas, 2012). We used PRA to gain an in-depth understanding of the existing status of women within larger family dynamics, to create a feeling of ownership and responsibility among the rural community for better results and to increase the social acceptance of a proposed LSB intervention.

2.2 | The proposed LSB intervention

The content of the proposed LSB intervention was drafted by the research team using a thorough analysis of the available interventions in global literature. This draft was created in a manner that

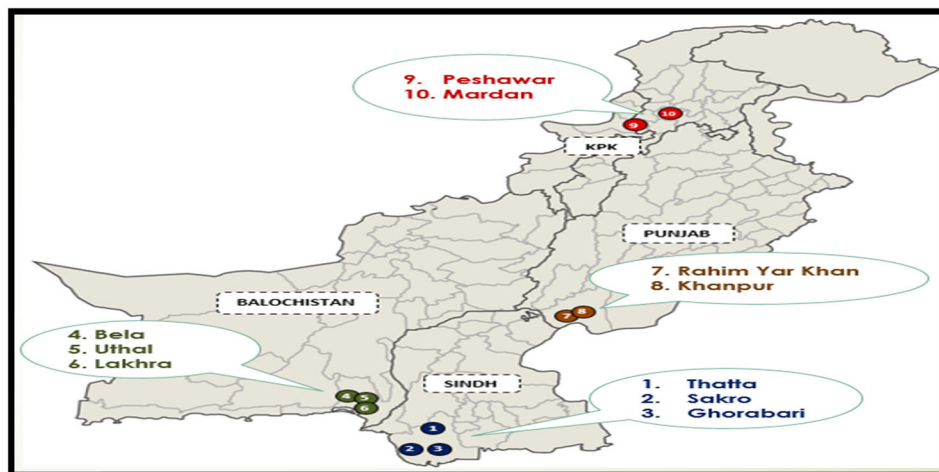


FIGURE 1 Map of study sites across Pakistan [Color figure can be viewed at wileyonlinelibrary.com]

allowed it to be modified through the learnings of the current study (i.e., the perspectives of community men and women in the local context). The proposed intervention is a set of training modules covering essential LSB approaches for married local men and women regarding family harmony and the creation of a healthy home environment to minimize VAW and empower women. Once the LSB design is completed, it will be delivered during the second phase of the study to married men and women by locally hired community workers who will be trained by the research team.

2.3 | Participant recruitment and sampling

The participants for FGDs included the Benazir Income Support Program (BISP; a country-wide social safety initiative by the government of Pakistan) Cash Transfer beneficiary couples, or couples belonging to similar socioeconomic status across four provinces. For the KIIs, BISP Beneficiary Committees members, provincial/district BISP representatives, social mobilizers, community workers, and healthcare professionals were included. The participants for the FGDs and KIIs were purposefully recruited through door-to-door visits to the beneficiary houses in the selected sites. The local participants for interviews were identified and recruited using the information received from the local BISP authorities, particularly in areas with BISP beneficiary households or communities from similar socioeconomic backgrounds.

2.4 | Data collection

2.4.1 | Personnel

Two separate groups of male and female participants were formed. One moderator and one note-taker were assigned in each group of male and female for conducting FGDs and KIIs. The locally hired team members were well versed in the local context and languages. The moderators were trained by the research team on the content of the interview guides, pedagogy, and communication skills in terms of the effective use of PRA tools. All the interviews were conducted in local languages to maintain the comfort level of the interviewees and to gain an in-depth understanding of the topic under discussion.

2.4.2 | Interview guide

The interviews were conducted using a semi-structured guide. Some of the PRA tools (e.g., timelines, routine daily activities, problem tree, and ranking activities, etc.) were used to explore an in-depth understanding of the perspectives of community men and women. Interviews began with an overall introduction and description of the larger project, followed by written informed consent. The focus of the interview guide was mainly around participant perspectives regarding the proposed LSB intervention (e.g., acceptability and feasibility of learning life skills, effective men's engagement, the integration of the intervention with religious teachings, sustainability, and government support) and its operationalization (e.g., training, delivery, content, facilitators, and community participation). Additional questions and probes were included to understand the roles of men and women, the community's perceptions regarding masculinity, and the role of positive masculinity in building a healthy society. The interview guides were developed and finalized by reviewing the available literature along with the mutual consultation of experts within the research team.

2.4.3 | Interviews

A total of 14 KIIs were conducted, each lasting for approximately 30–45 min. The views of 167 additional participants (88 males, 79 females) were captured by conducting 18 FGDs (nine each with males and females) across the study sites (Tables 1 and 2). Each FGD was 60–90 min in length with an average of 6–10 participants. Every FGD participant was married. FGD participants were aged between 25 and 45 years old with a diverse educational background ranging from none to master level education. The FGDs were conducted with community men and women in separate groups to understand and explore their views on the topic under discussion without gender-based influence. To maintain confidentiality and privacy, all interviews were held in quiet and private locations in the villages and/or office buildings on timings suggested by the participants according to their convenience and availability. All the interviews were tape-recorded and transcribed after obtaining written informed consent from the participants. The aim of collecting data through FGDs and KIIs was to capture the opinions, experiences, and personal views from community men, women, and stakeholders who were well

	Sindh	Punjab	Baluchistan	Khyber Pakhtunkhwa	Total
KIIs male	5	2	2	1	10
KIIs female	2	–	–	2	4
Total	7	2	2	3	14
FGDs male	3	2	2	2	9
FGDs female	3	2	2	2	9
Total	6	4	4	4	18

TABLE 1 Total number of focus group discussions (FGDs) and key informant interviews (KIIs) by study site

TABLE 2 Characteristics of study participants

	Males n (%)	Females n (%)	Total
Province			
Sindh	29 (49)	30 (51)	59
Baluchistan	22 (52)	20 (48)	42
Khyber Pakhtunkhwa	23 (72)	9 (28)	32
Punjab	14 (40)	21 (60)	35
Age (years)			
18–25	19 (65)	10 (35)	29
26–39	39 (49)	40 (51)	79
40 and above	30 (50)	30 (50)	60
Years of formal schooling			
0	38 (45)	47 (55)	85
1–5	23 (70)	10 (30)	33
6 and above	27 (54)	23 (46)	50
Employment status			
Unemployed	8 (10)	73 (90)	81
Employed	80 (92)	7 (8)	87

versed in the cultural context in terms of the phenomenon for this study.

2.5 | Data analysis

All the FGDs and KIIs were transcribed and translated from local dialects to English by professionals who were experts in transcriptions. This was done to fully capture the meaning of the content with minimal loss of data that may have been otherwise lost in translation. A manual data analysis process was conducted using content analysis (Creswell & Creswell, 2017). First, each member of the research team who was well versed with the context and content of the interviews, independently read each transcript thoroughly and manually developed language codes while keeping in mind the manifest and latent meaning of the content. Similar codes were merged together and were given an appropriate title. A similar process was followed for the development of the similar themes brought up by participants in the interviews. Each process was discussed among the research team for disagreements and a consensus was reached on the overall analysis. All the transcripts were reviewed again, in the end, to make sure that the necessary information had been represented in the final analysis.

The strengths of this study were dependent on its rigorous qualitative methods as well as successfully obtaining a diverse, credible sample. The study included multiple strategies as described in the methods to ensure rigor. *Credibility* was maintained through the selection of context, data collection through well organized, and structured interviews conducted by the multidisciplinary team of researchers with substantial experience of qualitative research. Furthermore, the data reduction and analysis steps ensured rigor through data organization and condensation, whereby the emerging themes covered the core data. *Transferability* was assured by

selecting the participants based on their various backgrounds to reflect the diversity of the Pakistani context. Additionally, a clear description of data collection procedures, setting, and steps of data analysis were outlined to enable other researchers to replicate the methodology. To maintain *dependability*, trained moderators kept a record of field notes and preserved all raw data, observations, and reflections. The process of data collection, transcription, and analysis, was completed over a specified period of time further ensuring *dependability*. This is considered as one of the strengths of the study. Last, to maintain the *confirmability*, a thorough process of data analysis was carried out through which coding and recoding of entire datasets, first by individual researchers, was followed by an in-depth group discussion regarding similarities and dissimilarities. Later, to further ensure the *confirmability* of the study findings, the last author reviewed all the coded data, subcategories, categories, and themes (Graneheim & Lundman, 2004).

3 | RESULTS

Since the areas covered during the interviews were similar, results are summarized together into three themes each with several subcategories (Figure 2).

3.1 | Theme 1: family life and male engagement

3.1.1 | Relationship between husband and wife

The community men and women agreed that poor marital relationships, exacerbated by weak communication between partners, leads to conflict or violence, which in turn creates negative effects on the entire family and community as a whole. The educational level of a couple and their number of children (particularly male children) had a significant impact on the quality of their marital relationship. Moreover, the man's income, his attitude towards women's empowerment issues, the role of the wife in household decision-making, and the use of drugs were also contributing factors to the extent of relationship harmony. According to participants:

“Woman and man are like two wheels of a vehicle and together if they play their roles accordingly to fulfill all responsibilities then everything related to home and outside will be completed in time.” [FGD Male, Bela]”

“Men agreed that females should be given the right to make decisions about their children however, mothers fear that if something bad happens they will be held accountable and be made to answer.” [FGD Male Khanpur]

“Our problem is a lack of communication between couples, leading to unresolved conflicts so they should be taught effective communication.” [KII Male, Thatta]

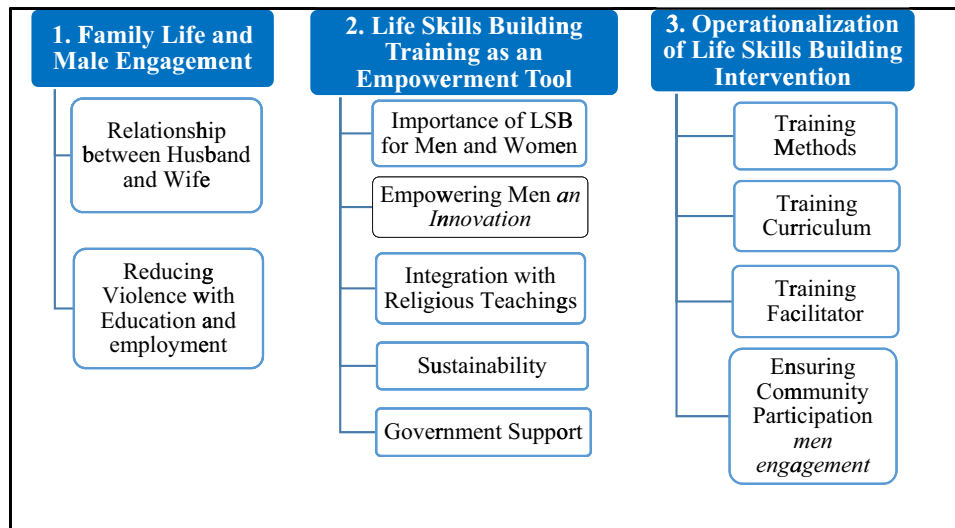


FIGURE 2 Main themes and subcategories identified [Color figure can be viewed at wileyonlinelibrary.com]

3.1.2 | Reducing violence with education and employment

Participants emphasized that the shortage of jobs for both men and women strains family dynamics and wellbeing. It was suggested that enhancing earning opportunities in the community could reduce this strain and enable greater financial security for their families.

“If males will get a job then violence will be reduced. In our area, unemployment is the main problem.” [FGD Female, Lasbela]

“Lack of education, substance abuse and unemployment are major reasons for negative masculinity.” [FGD Male, Thatta]

In agreement, both groups of men and women stated that promoting the earning capacity of women should be given priority as it could make them more independent and therefore, empowered. Female respondents voiced a preference for learning and developing life skills to earn money while being at home or indoors.

“Poverty is one of the reasons for our worries and tension. If any work that will be arranged for us, the housewives will give us some earning. Cutting and stitching center is established so as to keep us busy and give us earnings that reduce our stress.” [FGD Female Lasbela]

“A big change can be seen if women are given education and skills so they can support their husband financially and can look after children in a better way.” [FGD Female Peshawar]

Respondents also voiced the need for the government to facilitate access to jobs and skill building for men.

“Just like the beneficiary of BISP receives a certain amount of cash on a regular basis, we wish for some opportunities for the husband as well. Any opportunity like having a job as a security guard or driver or to even receive a small amount as a loan to start with a small business for supporting their family.” [KII Female, Thatta]

3.2 | Theme 2: the LSB training as an empowerment tool

3.2.1 | Importance of LSB for men and women

The local men and women shared that LSB intervention would be an extremely beneficial way to bring about a long-term change in the attitudes and behaviors of men. It will raise awareness of practical tools to support women's empowerment in their communities. Respondents stressed the need for a trained facilitator to conduct these sessions. Men, women, and the local stakeholders were highly receptive to the prospect of the proposed LSB intervention in their communities.

“Although it takes some time to accept such a type of intervention by the community, the effect in the long run will be there. Such intervention and skills should be taught to men and women even before getting married.” [KII Female group, Peshawar]

3.2.2 | Empowering men as an innovation

The local men and women also believed that LSB intervention was unique in a way that would positively engage men in the ideas regarding women empowerment, leading to the minimization of VAW by sensitizing the community. Participants appreciated the strategies to engage men along with their spouses as an innovation. They further emphasized that monetary incentives should be provided to retain the participation of men for the LSB training sessions. In light of high poverty rates and men mostly stemming from the labor class, it was suggested men need to be paid to encourage attendance.

“Due to poverty in Thatta, I believe if men are paid and given a stipend it will attract them to the training. People are usually interested only in getting paid otherwise they will overlook short term projects and forget about the training after leaving the session.” [KII Male, Thatta]

According to participants, the LSB intervention will help men gain insight into their own behavior. If men are trained as peers, they can also learn from each other and feel valued in their participation. Participants also suggested that this could motivate and inspire others to participate as well.

“The program is good and if there is anyone who is not behaving well at home, he can mend his behavior. We will learn from each other.” [FGD Male, Lasbela]

“Men engagement is important because if men support such initiatives, others will get inspired and join.” [FGD Female, Mardan]

According to the KIIs, building life skills related to women's empowerment for men is a unique strategy that has not yet been implemented. Since men are the decision-makers in Pakistani society, their training is important to improve women empowerment and participation in society.

“This project is unique. I have been working on ground for quite some time and I have never seen a project like the one you are proposing, particularly focusing on men in a different way.” [KII Male, Thatta]

3.2.3 | Integration with religious teachings

Community men, women, and local stakeholders were very receptive toward the proposed LSB training. They noted that beyond their involvement, the engagement of religious scholars in the program would play an important part in strengthening the training as well as creating awareness among local folks.

“The religious scholars can play an important role in creating awareness among the community especially during Friday sermon and preaching. Religion can help teach an individual how to handle family life issues very well. The more we are aware of religious teaching there will be less violence in the community.” [FGD Male, Mardan]

“In big cities you can teach through the media, but for rural areas the community can be approached through influential people like the landlord of the village and religious scholars.” [KII Male, Rahim Yar Khan]

3.2.4 | Sustainability

To increase the sustainability of the LSB intervention, respondents shared that it is important for the participants to be constantly motivated to attend the sessions and receive follow-up resources to reinforce what was learned.

“The training should be conducted for male and female participants separately by committed teachers. The community should be followed up on a regular basis for the skills and learnings to have long lasting results otherwise people tend to forget.” [KII Male Thatta]

“The content and benefits of the life skill based education can be shared with the community leaders so they can convince male and female participants.” [KII Female group, Thatta]

3.2.5 | Government support

Respondents voiced their frustration for government economic subsidies that did not include men. A discussion about government distribution of payment cards based on political affiliation was brought up and participants shared that this created a lack of trust among community members.

“Regarding the distribution of payment cards there are many irregularities and many people are involved in the scam. The purpose is just to improve their vote bank and I do not understand the scheme. It is mainly for those who are common people who cannot afford. They are distributed on political affiliation rather than on merit.” [KII Male, Rahim Yar Khan]

3.3 | Theme 3: operationalization of the proposed LSB intervention

3.3.1 | Training methods

Participants believed the intervention should be delivered in an informal, participatory, and relaxed environment to allow for maximum interaction and engagement between participants and trainers. They voiced a preference for training to be conducted in groups (as opposed to individually).

"All people (men and women) will come on their given time. People can sit for two-and-a-half-hour maximum. Men and women should be trained as a couple." [FGD Male, Thatta]

"Have separate sitting areas and sessions for men and women" [KII Male, Thatta]

"Most of the men can be found at union council or at village council meetings. In addition, men crowd the mosques and religious places and religious people can be involved. Friday will be suitable day to conduct the sessions" [FGD Female, Peshawar]

3.3.2 | Training curriculum

Respondents proposed that socialization, integration, communication between spouses, female participation in household, and financial decision-making should be included in the training content. They added that content should also focus on improving the attitude of men that would also contribute to enhancing their employability skills.

"Couples should be taught about their rights." [FGD Male, Rahim Yar Khan]

"Men and women should be trained on how to build a healthy home environment, socialization, and how to keep themselves away from substance abuse." [FGD Female, Thatta]

"Women should be part of every decision making from minor to major, including money investment, marriages and better education for children." [KII Male, Thatta]

3.3.3 | Training facilitators

Community leaders noted that the training would be effective if facilitated by a health professional, trained facilitator, or outreach

activist. Key qualities suggested which should be held by the trainer included punctuality, good manners, trustworthy, and friendly nature.

"Teams should be formed for both male and female separately from trust worthy and well behaved trainers. They should be educated and given a set of targets and should be followed weekly for their teachings." [KII Female, Thatta]

3.3.4 | Ensuring community participation (men engagement)

The local men and women highlighted that male participation in LSB training sessions would be challenging compared to female participants. Women in the village are mostly accountable for household chores and are available for most of the day as opposed to men who are usually away from the household for work and may attend sessions upon their availability. Furthermore, they emphasized that male participation would depend on their willingness and attitude, so there is a need to adopt innovative strategies that are effective for the men's involvement.

"For those men who are unemployed and wander from dusk until dawn, we can engage them in some form of activity in addition to mobilization. We can create job opportunities for them. If they are engaged in jobs, it would be helpful and then we can mobilize them too at the same time." [KII Female, Thatta]

"In rural areas we can give training for technical skills like tractor driving and mechanic, plumber, and carpenter. We can also engage them in agriculture work, like plantation activities. Such work opportunities and activities will benefit our rural men and create a sense of responsibility in them." [KII Male, Thatta]

Women's participation, on the other hand, seemed promising, as many females were eager for the training sessions to occur. Further, the community men and women voiced that the provision of incentives would attract more participants to attend the training sessions.

"To seek a man's attention, any reward or refreshment can also be given, like giving lunch boxes of biryani, besides providing livelihood opportunities." [KII Male, Thatta]

"Initially the community (male) should be informed regarding the content and benefits of the session. They should be given a date and time for gathering, such as a school." [FGD Male, Rahim Yar Khan]

4 | DISCUSSION

The narratives of community men, women, and local stakeholders have highlighted three major themes related to the acceptability, feasibility, and delivery of the proposed LSB intervention. There is an in-depth description of family life, facing considerable challenges. The associated challenges include compromised physical and mental health outcomes, consequent marital discords, and an overall willingness of the participants to engage in certain activities for the proposed LSB intervention in the local context. Furthermore, job opportunities for both men and women, and government support were mentioned as other tools to address and minimize conflicts and to increase incentives to participate in the intervention program. The proposed LSB intervention was received well by community men, women, and stakeholders who appreciated the innovative approach of encouraging men's engagement. They further suggested integration of the proposed LSB training with religious teaching for optimum sustainability. The participants acknowledged the proposed strategy for the delivery of the LSB intervention. They felt comfortable in attending the training sessions with their spouse in separate sessions for men and women, respectively. Informal sessions based on a participatory and interactive approach were a preferred method of delivery. Preference was given to "safe/convenient locations" (locations considered comfortable to the participants) and "Friday processions" for the delivery of training sessions. Training content that was considered important to the community and would be beneficial in maintaining a successful intervention program was socialization, integration, communication between spouses, female input in the household, and financial decision-making. The involvement of both men and women in the training sessions, facilitated by monetary or nonmonetary incentives, would help achieve optimal outcomes from the program.

In the context of Pakistan, there is much evidence that points to the delivery of LSB training to local women only (Hirani et al., 2010). However, based on our current knowledge the proposed LSB intervention is the first of its kind that includes information on financial management, decision-making, and effective participation with a focus on community men. Relating to the acceptance and appreciation of the communities toward the beneficial nature of the LSB, the findings from this study will help in addressing the significant factors affecting VAW in a local context. Participants highlighted these inclusions as unique and important features of the proposed intervention. Furthermore, they stressed that LSB trainings should focus on economic skill building, including improving education levels and employability skills. Results show that participants were confident that skills enhancement and employment would lead to an increase in more feasible income opportunities. Such opportunities would ultimately improve a man's attitudes and behaviors toward VAW, and reduce the impact of economic burden on family matters. Studies conducted in the past have shown that improved family relationships (Pick, Contreras, & Barker-Aguilar, 2006) and marital synchronization is the result of economic skill-building interventions (Gilroy, Symes, & McFarlane, 2015).

In general, the community men, women, and local stakeholders expressed a positive attitude and willingness regarding the proposed LSB training sessions in the local context. The participants felt the need for improved communication between spouses, increased education levels, and employment opportunities. Changing the mindset of men to encourage and value women's empowerment to overcome VAW can arise from various counseling strategies. Group counseling sessions among communities has shown positive and impactful outcomes (Ali et al., 2011). Training for frontline workers (e.g., nurses, social workers) on counseling skills such as empathic listening, supportive communication skills, and problem-solving has been conducted in the past but has not been tested for effectiveness (Karmaliani et al., 2012). Respondents, supported by the existing literature, also voiced that the intervention should include social integration (both intra- and inter-gender sessions) to promote the success of the intervention. Evidence suggests that group socialization enabled women to feel more empowered after each subsequent session (Turner & Maschi, 2015).

Other suggestions emerging from the results were related to the delivery of the proposed intervention, provision of incentives, and involvement of community leadership. Mosques and schools were identified as suitable venues for the sessions and trained outreach workers were recognized to be the key facilitators. Additionally, stakeholders suggested that training sessions should be held informally and interactively. Participatory approaches toward health promotion training in communities have shown advantages in ensuring quality and in increasing accountability (Steyn et al., 2016). Participants voiced the importance of monetary (e.g., stipends) and nonmonetary (e.g., food, employment opportunities, clothing, and household items) incentives to attract community members to attend the program. It has been reported that the provision of incentives in a socioeconomically homogeneous population results in improved outcomes of a health intervention program (Kouyoumdjian et al., 2015). This highlights that in creating a personal motivation for participants, intervention programs can successfully provide resources that are sought after in a greater societal context (i.e., tackling the issue of VAW while giving people the opportunity to earn). It was also established that the involvement of community-based religious leadership would greatly enhance participation and outcomes of the intervention. The literature supports the conclusion that next to physicians or other healthcare providers, religious and spiritual leaders are most trustworthy to influence the thoughts, emotions, and actions of people (Jamal, 2015). Evidence suggests that having the endorsement of the curriculum by opinion leaders helps in the easy implementation of LSB, gender transformation activities in a community (Stern, Martins, Stefanik, Uwimpuhwe, & Yaker, 2018).

4.1 | Limitations

Due to the diverse background of participants, there was a wide range of strategies proposed which were considered appropriate to the different cultures of the four provinces across the country. However, this limitation was mitigated at an analysis stage by

condensing data into common suggestions for a general operationalization of the proposed intervention. As mentioned, the study was carried out across a diverse set of cultures and consequently, comprehension and effective administration of the interview guide by the moderators posed a significant challenge. The situation was satisfactorily addressed by the selection of locally hired moderators who were well versed with the context and possessed bilingual expertise. Moreover, the identification of BISP beneficiaries across the four provinces was an administrative challenge. Various channels were approached to get appropriate information for the exact location and identification of the beneficiaries. As a mitigation strategy, a door-to-door visit was carried out in the areas identified by the local BISP authorities with the greatest number of BISP beneficiaries or people with similar socioeconomic backgrounds.

5 | CONCLUSION

A proposed LSB intervention aimed at reducing VAW based on participatory activities was perceived to be feasible and acceptable to community men, women, and local stakeholders in the given context. The participatory approach will help to impart a positive impact on a better understanding of gender roles and woman's empowerment. Community stakeholders suggested that promoting the innovative intervention with men's engagement in the local context has the potential to curb VAW and to minimize gender discrimination, which may pave the road for women's empowerment.

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CONFLICT OF INTERESTS

The authors declare that there are no conflict of interests.

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