

PASSAGES PROJECT

REAL Fathers India:

Findings from Formative
Research



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Passages

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EXECUTIVE SUMMARY

INTRODUCTION AND METHODS

The REAL Fathers formative research conducted in one urban and one rural site in West Bengal, India is part of the worldwide USAID-funded Passages Project. It is a collaborative endeavor between Georgetown University's Institute for Reproductive Health (IRH) and Child in Need Institute (CINI) of West Bengal, India. The objective of this formative research was to gather information for guiding the adaptation of the REAL Fathers initiative, a parenting intervention. The REAL Fathers project is an effective, community-based mentoring project that works with young fathers to prevent violence against young children (ages 0-5 years) and intimate partners and increase the intention to use modern family planning among couples.

Qualitative techniques such as in-depth interviews (IDIs) and focus group discussions (FGDs) were used to explore individual and social perceptions, behaviors and supports related to parenting, intimate relationships and family planning. Participants included men and women who had children and those who met research eligibility criteria. A total of 43 IDIs and 8 FGDs were conducted.

KEY FINDINGS

Findings from the analysis were organized by the **meta-themes** of **'parenting'** and **'couple's relationship,' 'family planning,' 'advice-seeking,'** and **'REAL Fathers program,'** with subthemes used to organize domains where findings emerged under each of these meta-themes.

Parenting *Fatherhood*

There was a difference in perceptions about the role fathers played in urban areas as compared with rural areas. While men in both geographical settings shared similar views about the role of the father being a provider financially, emotionally, and socially, older women in rural areas suggested that fathers provided material support only, while women were considered the primary caregivers of children. In addition, the findings suggested that fathers were committed to their children by maintaining a relationship with them and contributing to their overall development. Parents divided their parenting responsibilities, often adhering to gendered roles and responsibilities with some urban fathers participating in a few care giving activities typically considered a woman's role.

Joys and challenges of fatherhood

Fathers ascribed the presence of child/ren in their lives as a source of happiness while the lockdown was mentioned as exacerbating existing challenges around livelihoods and income to provide for their families, which created barriers to carrying out their envisioned roles as husbands and fathers.

Learning to be a father

Young men learnt to be fathers – including care giving and discipline practices – from various sources, including advice from family members, observation of family members and neighbors, through discussions with friends, and through religious congregations. They also adopted practices promoted by media and were willing to listen to advice from local NGO workers.

Community respect for the father

In both settings, a ‘good father’ was considered one who was able to provide for his family, shared a loving relation with his family, relatives, and neighbors, did not have habits such as drinking or “*meyer neshah (roving eyes)*,” did not quarrel with his wife, and helped people in the community whenever the need arose. In both settings respect was generally associated with seniority in terms of age. However, a different perspective also emerged that being a good father was not celebrated as it was considered normal.

Teaching values to children

The values parents instilled in their children most often included the importance of education and teaching them manners within their communities. Parents reported using different methods to instill values in their child/ren. Strategies comprised monitoring the company they keep, personally demonstrating the values they would like their children to learn. Parents in both settings valued learning and aspired for their child/ren to have a good education and a successful career which would make a child “*manusher moto manush (a worthy human being)*.”

Child Disciplining

Although physical punishment of very small children (less than five years) is broadly discouraged it continues to be a practice both in urban and rural areas. Compared with hitting and slapping younger children, scolding or threatening them with negative consequences of the behavior (including with violence) appeared more common practices. Non-violent discipline practices was reported by only one respondent. Differentials in disciplining methods for boys and girls were noted.

Couple’s Relationship

Household Roles and Responsibilities

Household chores including cooking, washing clothes and utensils/dishes, taking care of child/ren, her husband, and the in-laws was primarily the woman’s responsibility. Women reported difficulties in carrying out daily activities during pregnancy. In-laws, especially the mother-in-law often dictated the daughter-in-law’s behavior, if living together.

Conflict in the relationship

Couple’s relationship was explored using a vignette. Respondents offered perspectives on conflict within couples’ relationships, both that reflected what was described in the vignette and what was happening in their communities. Violence against women emerged as a justified practice, if the situation so warranted it. Other methods of resolving couple’s conflict included sending women to their parents’ homes, divorce, and

involving both sets of parents to resolve conflict. One woman described task sharing as a method of maintaining congenial relation between couples.

Respondents from both settings mentioned that couples' relationship deteriorated during Covid-19, and the exacerbation of stress around family income, as well as additional stressors from the ongoing pandemic.

Family Planning

The REAL Fathers intervention also incorporates a focus on increasing awareness and intention to use family planning. All respondents were aware of family planning, though to varying degrees of specificity and confidence. ASHAs and community health workers were key sources of knowledge for various modern family planning methods. There was more family and social pressure to have a child soon after marriage in rural areas as compared with the urban setting.

Advice-Seeking

A key focus of this research was advice-seeking in communities, centering around young couples seeking advice on parenting their children and their intimate personal relationships, which are core areas for REAL Fathers.

Advice for marital relationships

Many respondents spoke about the role of families of both spouses becoming involved around disagreements and problems in marital relationships, often as mediators. Neighbors and officials were also mentioned as providing advice, or mitigation, for marital conflicts. Young couples got advice for their relationships from a number of sources, with families appearing to be more important sources of advice, though mass media and religious congregations were also named. Respondents noted that couples may not always respond positively to advice from third parties.

Advice for child rearing

Young couples received advice on parenting from sources including families (especially grandparents), neighbors and community members, religious congregations, and government and NGO officials. Advice on parenting seemed more broadly acceptable than advice on relationships, though respondents still cautioned that couples may still not be receptive to receiving such advice.

REAL Fathers Program

Overall, respondents discussed the importance of good relationships between parents and children and between couples. A subset of respondents – including government officials and child protection officer (CPOs) expressed a need for a program like REAL Fathers. A government official from the rural area stated that currently there are no informal or formal parenting mentorship programs in the community. She also

communicated the possibility of politicization of such a program and the need to exercise caution while implementing it.

RECOMMENDATIONS

Based on the findings of the formative research on REAL Fathers conducted in one urban and one rural setting of West Bengal the following recommendations are being proposed:

1. Integrate REAL Fathers with livelihoods programming
2. Build on growing involvement of fathers in caregiving.
3. Implement the REAL Fathers mentoring program in rural areas.
4. Support existing positive parenting practices.
5. Improve couples' communication to reinforce positive practices.
6. Encourage adoption of modern family planning methods.

INTRODUCTION

Georgetown University's Institute for Reproductive Health (IRH) is adapting the parenting program Responsible Engaged and Loving (REAL) Fathers in West Bengal, India, with support from the United States Agency for International Development (USAID).

The REAL Fathers Initiative is an effective, community-based mentoring project that works with young fathers (ages 18-29 years) to prevent violence against young children (ages 0-5 years) and intimate partners and increase intention to use modern family planning among couples. The project builds on opportunities when young men are in transition to becoming parents and partners, living as adults in their community, and experimenting with new attitudes, behaviors and roles. REAL Fathers was first piloted and scaled up in different parts of Uganda, Africa by Save the Children and IRH with funding from USAID.

IRH and the Child in Need Institute (CINI) have partnered to develop an adaptation of REAL Fathers for use with urban and rural communities in West Bengal, India. CINI is a national human rights institute with 48 years of experience in their mission to ensure that children and adolescents achieve their rights to health, education, nutrition, and protection by making duty-bearers and communities responsive to their wellbeing. CINI has strong community ties, networks, and a diverse portfolio of projects in West Bengal. An inception partnership meeting held between IRH and CINI in December 2019 laid out a plan for adapting REAL Fathers which included formative research, an adaptation workshop and a pilot of 2 sessions of REAL Fathers with a learning lab to finalize the adaptation.

This report summarizes findings from the formative research, which was delayed until 2021 due to the COVID-19 pandemic.

BACKGROUND

Violence against women and children are globally ubiquitous and result in adverse public health outcomes. Violent discipline, including the use of physical punishment and psychological aggression, in the home is the most common form of violence against children (VAC) globally^{1,2} with the most common perpetrator being parents or caregivers. Global estimates suggest approximately 3 in 4 children between the ages of 2 and 4 (i.e. around 300 million) suffer some form of violent discipline by their caregivers.² Research, primarily from high-income nations, demonstrate that in addition to physical injury, child maltreatment is linked to a variety of emotional and behavioral problems that surface in childhood but, may persist through adolescence and adulthood. Exposure to severe or violent discipline at young ages heightens the risk of a number of long-term debilitating health, socio-emotional and behavioral outcomes.^{3,4} Harsh or violent remedial measures to correct behaviors perceived as inappropriate have been found to be associated with deep-rooted and socially-sanctioned discipline norms, over-estimation of children's cognitive ability, and unawareness about positive or non-violent disciplining techniques.⁴

Globally, nearly one-third of women who have ever been in a relationship with a man have experienced intimate partner violence (IPV) by their male partner.⁵ Between 133 and 275 million children frequently witness violence between their caregivers.⁶ In addition, research indicates that 1 in 4 children below the age of 5 years (i.e., 176 million) live with a mother who has experienced IPV.² Growing up in a home with IPV increases a child's risk for maltreatment.^{7,8,9} Along with a range of health and wellbeing outcomes, children who experience violence themselves or grow up in a home with IPV are at increased risk for experiencing or using violence in their future relationships.^{9,10,11} Preventing violence against children is critical to children's well-being and an important entry point for violence prevention in later life stages.¹² Working with fathers to transform harmful masculinity norms can be an effective approach for reducing intergenerational violence.¹⁰

JUSTIFICATION

Intimate Partner Violence in India and West Bengal

According to the 2021 United Nations Global Gender Inequality Index (a composite index calculated on three important aspects of human development i.e. health, empowerment and economic status), India ranked 140 of 156 countries.¹¹ There is an urgent need and considerable scope to improve gender equality by addressing norms that perpetuate inequality.^{13,14} The Indian government has expressed commitment to the United Nations Sustainable Development Goals, including focusing on gender equality, women's empowerment and child health, and welfare through innovative initiatives and programs.¹⁵ The adaptation of REAL Fathers to India has the potential to improve the health of families as well as provide learning for the adaptation of effective programs to new contexts.

Several studies in South Asia have found an association between gender inequality and IPV.^{16,17,18} Prevalence of IPV in South Asia (38%) is one of the highest globally indicating a major public health concern.¹⁹ In India's 2015 National Family Health Survey (NFHS-4) survey, 26% of ever-married women aged 15-49 years reported experiencing, physical, sexual, and/or emotional violence in the past twelve months. Among ever-married women in West Bengal, 35% reported experiencing physical, sexual, or emotional IPV in the NFHS-4 survey.²⁰ Along with physical and psychological injuries, IPV has a significant adverse impact on contraceptive decision-making and use, as well as unintended pregnancy and other reproductive health and family planning outcomes.^{21,22,23,24} A population-based survey covering four states in eastern India including West Bengal reported even higher prevalence of IPV than the NFHS-4, with 60% of married men and 56% of married women reported ever perpetrating and experiencing any type of violence, respectively. In this same study, for West Bengali women, 15% reported experiencing

physical violence, 51% psychological violence, and 20% sexual violence, with 52% reporting any form of violence; Among West Bengali men, 20% reported perpetrating physical violence, 53% psychological violence, and 15% sexual violence, with 53% reporting perpetrating any form of violence.²⁵ Research in Pune, Maharashtra explored the determinants of IPV perpetration among 100 recently married men living in slum communities. The study reported correlates of IPV to include not living up to an ideal husband role and not embodying certain masculinity norms, and men reporting greater jealousy if their spouse speaks to men outside the family.²⁶ These findings, and others, support that IPV in India, as elsewhere, is driven by norms that reinforce harmful masculinities including men's power over women and women's submission to their male partners and their in-laws.

In India, as globally, IPV starts early in relationships. The NFHS-4 documented 22% of ever-married 15-19 year olds and 26% of ever-married 20-24 year-old women have reported experiencing physical, sexual, or emotional violence from their spouse in the last 12 months.²⁰ A review of IPV in South Asia, found that 62% of women who ever-experienced marital violence reported it started within the first two years of marriage. Further, married adolescents were twice as likely (11%) to report recent sexual IPV compared to married adult women (6%).²⁷ Age related risk for IPV is a global pattern and may be related, in part, to the power of men and their families in the marital relationship and adolescent girls as wives having little agency and power to counter it. According to the NFHS-4, in India, the prevalence of ever experiencing physical, sexual, or emotional violence by a husband is higher among women living in rural (36.2%) settings compared to urban (27.7%).²⁰

Harsh Discipline in India and West Bengal

Harsh discipline — including physical punishment and psychological aggression — in the home is the most common and hidden form of VAC. A survey in 2007 by the Ministry of Women and Child Development across 13 Indian states including in West Bengal found that nearly half of the children between 5-12 years of age reported experiencing physical abuse.²⁸ Children reported an overwhelming majority of the perpetrators (89%) were parents. Evidence from the same study found that 61% of 5–12-year-old children in West Bengal reported physical abuse by family members, including parents. The study did not examine physical abuse experienced by children younger than 5 years, the age group of interest for REAL Fathers, but the high prevalence of violence in the 5–12-year age group indicates that children under 5 years may also be at risk for violence in the home. Further, in another study in Wardha district, Maharashtra, 52% of the 200 parents surveyed reported slapping their 3–5-year-old child once a week, 24% reported slapping twice a week and 4% reported slapping every day.²⁹

Integrated Violence Prevention and FP Programming

Integrating IPV and VAC prevention programs is strategic due to the shared risk factors including social norms that endorse violence, concurrence of VAC and IPV, the common and compounded consequences of direct and indirect violence experiences, and the intergenerational effects of VAC and IPV.^{10,30} Yet few programs use an integrated approach to address the multiple, inter-related factors (e.g. poverty, hazardous alcohol use, gender inequality, parent history of trauma) that increase risk for violent discipline and IPV in order to prevent poor child health and development outcomes.³¹ Further, given the already well established connection between physical IPV and reproductive coercion in households, improving couples

understanding of and communication on family planning is important.³² Social norms underlying whether and how couples discuss and make decisions about the use of family planning may be related to some norms that uphold IPV. Engaging male partners in these health programs has the potential to increase women's voice in family planning decision making and improve their health.

In many settings worldwide, using harsh discipline is considered good parenting practice and an acceptable approach to raise well-behaved children who contribute to their communities. Often, parents do not learn positive parenting practices to correct misbehavior and encourage other behaviors. Evidence from low- and middle-income countries and humanitarian settings illustrate that caregivers who participate in structured interventions that promote parent-child communication and non-violent parenting behaviors show healthier child-parent relationships and are less likely to use harsh discipline.³³ Studies have also documented that teaching parents positive disciplinary practices provides an opportunity for interventions to explain why a behavior (i.e., those associated with harsh discipline) is wrong.³⁴ Working with fathers to transform harmful masculinity norms can be an effective approach for reducing intergenerational violence.

Context-specific, well-designed parenting programs, based on formative research — such as the study undertaken in West Bengal— can act as a catalyst to break this cycle of violence and improve health. REAL Fathers is one such intervention with demonstrated effectiveness in preventing IPV and harsh punishment of children and improving intention to use family planning in Uganda.³⁵

THE REAL FATHERS INTERVENTION

REAL Fathers is an innovative intervention that addresses multi-level drivers of household violence against female partners and children and to promote family planning use. These drivers include lack of skills around nonviolent discipline strategies, social norms that reinforce harsh discipline and use of IPV, unhealthy alcohol consumption, and poor communication skills for violence prevention and family planning. The formative research explored these domains.

The REAL Fathers intervention includes three main components: a mentoring program, a poster campaign, and community celebration at the end of intervention. Young fathers and their wives identify elder men in the community to be mentors; these are trusted and respected individuals that parents feel comfortable approaching for advice and counsel. Mentors are trained over a one- to two-week period in gender (in)equality, parenting, violence, the REAL Fathers program, use of the curriculum and facilitation skills. Community-identified mentors engage with young fathers and their wives over a period of 6-7 months in groups and individual sessions. Each discussion focuses on a theme including fatherhood, communication and parenting among others. Poster campaigns complement monthly mentoring sessions and address prevailing gender norms, parenting and violence prevention. REAL Fathers ends with a community celebration, which provides an opportunity for recognition of the achievements of the young fathers in completing program, and allows young men an opportunity to publicly commit to continuing to practice healthy behaviors.

RESEARCH OBJECTIVES

The overall goal of this formative research was to collect information to guide the adaptation of a parenting intervention, the REAL Fathers Initiative, to prevent harsh discipline of young children (0-5) years, prevent IPV and increase acceptability of modern family planning for couples living in the intervention areas of West Bengal.

Specific Objectives

The objectives of this study are to:

- 1.** Understand father's parenting and disciplinary practices (e.g., caregiving, harsh discipline) and opportunities to promote positive parenting skills;
- 2.** Understand couple's communication and conflict styles, use of IPV, and opportunities for improved communication and nonviolence in intimate partnership,
- 3.** Describe community systems, social norms, and individuals who influence the behaviors of young fathers and mothers in their relationships as intimate partners and parents; and
- 4.** Understand individual attitudes and social factors that influence the acceptability of modern family planning among fathers and mothers.

METHODOLOGY

Qualitative research methods were used to explore individual and social perceptions, behaviors and supports related to parenting, intimate relationships and family planning.

Table 1: Summary of Research Methods		
Method Type	Information Type	Participant type
In-depth Interviews	Individual attitudes, behaviors, challenges, needs, actions to seek support for parenting, couple partnership and family planning behavior and how social expectations influence behavior.	Younger and older fathers, younger and older mothers, community leaders, village or ward child protection officers, health care workers, government representatives
Focus Group Discussions	Social expectations for the three behaviors (violence against children, IPV, and family planning), enforcement of social expectations, sources of support for men and women, and their perceived needs related to these behaviors.	Younger and older fathers, younger and older mothers

Initially, ethnographic observations were planned as a means to understand the context and social structure in the rural and urban areas of West Bengal. However, as a result of restrictions and safety concerns related to the COVID-19 pandemic and the ensuing delays in data collection, the ethnographic observations could not be carried out.

LOCATION

The formative research was conducted in one urban (ward 66 of Calcutta) and one rural site (Falta administrative block) in West Bengal. Site were selected by CINI considering the location of their programs, ability to recruit participants for the study and locations where they are considering implementing REAL Fathers. The original study design included two urban wards and two rural sites. Due to the COVID-19 pandemic and subsequent delays in data collection, the scope of the study (in location, study method and sample size) was reduced with a focus on capturing the most relevant data in a timely manner to guide adaptation of REAL Fathers.

STUDY SAMPLE AND POPULATION SIZE

Participants for in-depth interviews (IDI) and focus group discussions (FGD) were purposively selected based on relationships that CINI has in each of the two study site communities. Purposive selection sought to include young fathers and mothers who met the eligibility criteria (see below) and whose behaviors related to parenting/caregiving, intimate relationships (including IPV), and FP were typical of men and

women in their age and life stage. Table 2 summarizes the study sample size for IDI and FGD. As noted above, the original study design included a larger scope in study location and sample size in each location. The study scope was significantly reduced, by more than half, due to delays associated with the COVID-19 pandemic that impacted the timing of this overall project.

Table 2. Sample Size by Group					
In Depth Interviews					
Group	Rural Site		Urban Ward		Total
	Couples Relation	Parenting	Couples Relation	Parenting	
Young Mothers (aged 18-29)	2	2	1	2	7
Young Fathers (aged 18-34)	2	3	2	3	10
Older Mothers (30-55 years)	2	2	3	2	9
Older Fathers (35-55 years, with children)	2	2	3	2	9
Community Leaders/Actors	1		1		2
Village or Ward CPC Officers	1		1		2
Health Workers	1		1		2
Government Representatives	1		1		2
Total	21		22		43
Focus Group Discussions					
<i>Number of groups, where each group contained between 4-7 participants</i>					
Group	Rural Site		Urban Ward		Total
Young Mothers (18-29 years old)	1		1		2
Older Mothers (30-55 years old)	1		1		2
Young Fathers (18-34 years old)	1		1		2
Older Fathers (35-55 years old)	1		1		2
Total	4		4		8

ELIGIBILITY CRITERIA

Young mothers were eligible for IDIs or FGDs, if they:

1. Resided in the study community;
2. Were married or cohabiting with an intimate partner;
3. Were between the ages of 18 and 29 years old;
4. Had a child aged 0-5 years old (preferably 0-3 years).

Young fathers were eligible for IDIs or FGDs, if they:

1. Resided in the study community;
2. Were married or cohabiting with an intimate partner;
3. Were between the ages of 18 and 34 years old;
4. Had a child aged 0-5 years old (preferably 0-3 years).

Older mothers were eligible for IDIs or FGDs, if they:

1. Resided in the study community;

2. Were married or cohabiting with an intimate partner;
3. Were between the ages of 30 and 55 years old;
4. Had children of any age.

Older fathers were eligible for IDIs or FGDs, if they:

1. Resided in the study community;
2. Were married or cohabiting with an intimate partner;
3. Were between the ages of 35 and 55 years old;
4. Had children of any age.

Community leaders/actors were selected for IDIs, if they:

1. Resided in the study community;
2. Had been identified by CINI networks as a respected person in the community;
3. If they currently serve a formal role within the community (i.e. teacher, frontline worker, community worker, local government member), and have served in this role for at least 1 year

Health workers were selected for IDIs, if they:

1. Worked in a health clinic that was located in or served the study community;
2. Had been identified by CINI networks as a respected person in the community;
3. Provided family planning services to the study community

Government representatives were eligible for IDIs, if they:

1. Were a representative at the block, district or state level;
2. Represented the site selected for this study, regardless of whether or not they resided in the study community;
3. Served in a role related to child wellbeing, child protection, women's or men's health (including FP), or IPV;
4. Were currently serving in this role; and have served in this role for at least 1 year

IDI AND FGD GUIDE DEVELOPMENT

The IDI and FGD guides were developed by the principal investigator and co-investigator in consultation with the researcher consultant and research team identified by CINI. IDIs and FGDs were organized by theme with some participants interviewed on couples' relationships and others on parenting. Initially, these topics were to be covered in the same IDI and FGD. Changes were made to take focus more tightly in the IDI as timing for data collection was limited with delays due to COVID-19. In addition, in order to probe on each thematic area, shorter guides by thematic area were deemed more appropriate. The instruments were translated to the local language Bengali by external translators appointed by CINI. The researcher consultant along with the research team made modifications and suggestions to the translated versions to ensure that appropriate meanings were conveyed. Consent forms were also translated into Bengali.

TRAINING

Prior to data collection, a ten-day training on the various aspects of qualitative research was held, including the research objectives, methods, and data collection tools. The training also focused on research ethics (voluntary and informed consent, participant rights, confidentiality) and data collection procedures

including rapport building and documentation, and piloting (in both urban and rural areas). The training was participatory, allowing researchers time to practice introducing the study, seeking consent, using the data collection tools, documentation, data management and storage. Due to the pandemic the training was conducted online rather than in person between July 22 and 31, 2021 by the researcher-consultant. The principal investigator and co-investigator joined select sessions to co-facilitate. Piloting of the IDIs was only possible in the urban area for convenience during the pandemic.

DATA COLLECTION PROTOCOL

Data were collected in person. The numbers, types and eligibility criteria of respondents along with dates of field visits were shared with CINI project team prior to the actual field visits. Respondents were purposively selected to meet the eligibility criteria. They were screened for COVID-19 symptoms as per the study protocol prior to interview. Only those individuals without symptoms were invited to participate in the study, interviewers wore masks and encouraged interviewees to do the same, and interviews and focus groups were distanced.

IDIs and FGDs were conducted by four researchers fluent in Bengali. FGDs were facilitated by one researcher while another took notes. Interviews and discussions were audio-recorded, except one interviewee who participated but did not consent to recording. At regular intervals throughout the period of data collection, data were uploaded by the researcher consultant to the Box account provided by Georgetown University, a secure cloud-based file sharing and collaborative, content management tool.

Transcribers were hired to translate and transcribe interviews from Bengali to English. Transcribers were trained in transcription and the study ethics procedures including maintaining confidentiality of the data. Select transcriptions were randomly spot checked by the research consultant. Largely, transcripts reflected the audio recording though a few errors were noted in spot checks. Due to time restrictions for the project, a full review of transcripts and translations was too time consuming to pursue.

Box accounts were created for each of the transcribers who directly uploaded a translated document after which they deleted the file/s from their machines.

DATA ANALYSIS

After reading a selected subset of transcripts, a codebook was developed by the researcher consultant in consultation with the PI and Co-Investigator. The codebook focused on responding to the study objectives. An inductive, exploratory approach was adopted to analyze the data in order to identify the various themes emerging from the data that were related to the study objectives. Four coders were involved in coding the transcripts, and coded a subset of the same transcripts to check inter-coder reliability. Following coding, coded excerpts were extracted by code into a Microsoft Excel spreadsheet where common themes and important information were identified.

Data analysis emphasized drawing out learnings relevant to the adaptation of REAL Fathers. Data on parenting practices (particularly those related to fatherhood), norms around child rearing (0-3 years), care-giving and disciplinary practices, and challenges experienced by parents were collected, as well as data on partnerships, couple communication, intimate partner violence, and family planning. Community attitudes towards marital relations and child rearing were also explored. Comparisons were made across the different types of participants (female vs male, younger vs older [as defined by the research], and

across geographical locations (rural vs urban). Data were analyzed using the qualitative data analysis software Dedoose.

LIMITATIONS

This study was planned and implemented during the COVID-19 pandemic, which meant that trainings were done virtually and data collection was cut back. A small qualitative study like this would have had a representation bias from our recruitment through CINI networks even at the planned number of interviewees and focus groups; a smaller study means that in addition to this limitation, it is possible we did not reach data saturation from our participants.

It is possible that the COVID-19 precautions taken by researchers, including screening for symptoms, distancing in both interviews and focus groups, and masking may have impacted rapport between participants and respondents.

RESULTS

A total of 43 IDIs and 8 FGDs were conducted across both sites over 10 days in August 2021, as shown in Table 2.

Findings from the analysis are presented below, organized by the meta-themes of ‘parenting’ and ‘couple’s relationship,’ ‘family planning,’ ‘advice-seeking,’ and ‘REAL Fathers program,’ with subthemes used to organize domains where findings emerged under each of these meta-themes. Ellipses are used when quotes have been shortened for length and clarity, and as needed, words have been added in brackets for context.

PARENTING

Fatherhood

Community perceptions about the roles and responsibilities of a father were explored in FGDs and IDIs, including the joys and challenges of fatherhood.

In large part, respondents across different age groups and geographical locations saw the role of the father as fulfilling the responsibilities of being a provider, protector, and disciplinarian. An older male respondent from the rural area added “...*a good father is one who is providing education to the children, providing money for their tuitions, attending to their illnesses.*” Fathers’ ensuring the payment of school fees for his children emerged across groups as important example of the provider role.

A young urban father summarized this provider role as “*the main thing is that the father is the king of the family, everything depends on him... the responsibility of the entire family rests with the father, the real hero... to take care of his child, wife and parents... most are trying to do this.*” A young father from the rural area broadly concurred that “*as a father his responsibility is, since he is married and has a family to take care of, he should work. He should run the household. When a child is born, he has to take care of the offspring. Once the child grows, he has to give proper education to the child. Once he reaches the age of marriage, the child has to be married off, after finding a suitable prospect*”.

While providing financial support emerged as the main role of fathers in both urban and rural settings, many also responded that fathers serve roles as protectors and guides for their families and children.

Respondents from both rural and urban settings explained that in the traditional Indian family system, the father plays a pivotal role and in addition to this provider role, is often considered a ‘guardian’ or protector ensuring the welfare of family members. An older father from a rural area expanded on this, “*the role of a father is incomparable. Suppose my sons are causing mischief. They are not studying properly and not attending school regularly. In such case, giving good advice and counselling them, without scolding them, so that they go to school, sometimes escorting them to school, ensuring that they take their meals at proper times, are all a good father’s role....in addition to earning money, keeping track of them...*” He continued to add that this guardian role encompasses correcting children’s behavior when needed,

including “...*explaining things nicely to them, and correcting their mistakes, all these things... father’s role is unlimited.*”

Some fathers, particularly those from the urban study site, were actively involved in as caregivers of the children – still broadly considered to be a mother’s responsibility in the traditional Indian society. As compared with the rural areas, young fathers living in urban areas overall reported a little more involvement in caring for their children. A young mother from the urban area noted, “*Suppose he comes back home from office.... he always takes them out, 10 minutes or half an hour. He takes them every day.... On Sundays he feeds them breakfast in the morning sometimes, takes them out. Sometimes he even bathes them*”.

This was not the case, or ideal, in all groups. An older mother from the rural area voiced support for the belief that care giving of children was solely the woman’s responsibility while the men focused on earning a living. She related, “*baba’r kortobbo kaj korte jetei hobe (It is the duty of the father to go to work). While he is going out for work, the mother is staying at home. She needs to take care of the child: giving them bath, feeding them on time, making them sleep.*”

These findings indicated that perceptions about the role fathers played in urban areas as compared with rural areas were different. While men in both geographical settings shared similar views about the role of the father being a provider financially, emotionally, and socially, older women in rural areas suggested that fathers provided material support only, while women were the primary caregivers of children. In addition, the findings suggested that fathers were committed to their children by maintaining a relationship with them and contributing to their overall development. Parents divided their parenting responsibilities, often adhering to gendered roles and responsibilities with some urban fathers participating in a few caregiving activities typically considered a woman’s role.

Joys and Challenges of Fatherhood

Young men were invited to share the joys and challenges of their experience as fathers. A young father from the rural area mentioned as a source of joy in his children “*their smile, when I come back home, they smile at me and seeing that, happiness in rearing them.*” Another father of two young boys aged 7 and 2.5 years from the rural area stated, “*I become happy from their joys and happiness, from listening to their words when they talk, smart things that they say in spite of being so young. When they start reciting alphabets they sound very sweet.*” A young father from the urban area said “*I feel good to see his [child’s] face. My child smiles at me. That makes me the happiest.*”

When asked about the challenges of being a father, most respondents referred to the difficulties they or someone they knew faced as a result of the pandemic-induced lockdown. A younger father from the rural area narrated “*...with the dearth of jobs in the market due to lockdown, running a family and raising children becomes really tough. How will one fulfil their daughter’s dream? Before the lockdown I used to earn Rs. 100 or 150 per day. That is not fixed now. So, whatever difficulties or challenges it may bring, including running a family and raising two daughters, that is there.*”

Another young urban father mentioned “*after lockdown, those who have money, the ones who are well off they are doing well but people like us, the middle class their situation is bad...*”. These challenges reflected the common view espoused by respondents that fathers are expected to provide materially for their

families. One young urban father explained not being able to meet this challenge: *“I was not working because of lockdown. I was trying very hard to find some work. Then with my wife... my ‘babu’ (child) became sick. I had no work so I sent her to her mother’s house because I was not able to take care of them. I knew her mother and father would take care of them.”*

The findings demonstrated that fathers attributed the presence of child/ren in their lives as a source of happiness while the lockdown was mentioned as exacerbating existing challenges around livelihoods and income to provide for their families, which created barriers to carrying out their envisioned roles as husbands and fathers.

Learning to be a Father

Participants were asked how men learn to be fathers and whether there are people in the community that provide them guidance or model this behavior. In rural areas, parents and especially grandparents and elders were considered important to teaching fathers how to care for their children. A respondent of a FGD with older fathers in the rural area mentioned *“the first lessons of how to raise a child are received from the grandparents, the elders at home. They will say things like, ‘Love your child, and educate your child.’ Parents can tell, but grandparents can tell in more detail”*.

One young father from the rural area reported another source of knowledge for how to teach their children good behavior – religious leaders. *“After attending jamaat [prayer in congregation] for 41 days and listening to their preaching, I have changed.... I used to beat my children. But after attending the jamaat, I don’t beat them anymore. I call them inside the house and give them a warning... I have learned to control them successfully. The children nowadays listen to what I tell them. This is an achievement as they continued to be mischievous even after I beat them. And now I see that I don’t need to beat them. I can achieve the same things by using soft and sweet words. The more you use soft and sweet words with children, the more you attract them towards you. You can make them do whatever you tell them. Nice words are everything....”*

In addition, men in both the urban and rural sites mentioned neighbors, television, mobile phones, social media including YouTube and Google as sources of knowledge on ways to be a father, focusing more on feeding and health than disciplining and correcting behavior. One father from the rural area also mentioned books, though with doubt on how common a source they are: *“A book on child care is available, but I don’t know whether people read such books”*. In a focus discussion, an older father in the rural area referred to television advertisements. He said, *“they show different types of food. Like Horlicks and other different types of food. Good products which are available, children’s food. We learn the different type of foods that can be given to the child.”* During the same discussion, another respondent shared his experience. He said *“after my granddaughter was born, she was fed Cerelac because they considered it to be good for the baby.... However, an NGO worker had visited their house ... he said instead take rice, wheat, corn grains, nuts, grind them together and feed it to the child. This will ensure that the child remains healthy.”*

In general, participants in the urban area said that they learned to be fathers by observing others; within the family they learnt by observing fathers, uncles, brothers. They also learned from neighbors in their apartment buildings, friends, and acquaintances.

Overall, respondents indicated that young men learnt to be fathers – including caregiving and discipline practices – from various sources, including advice from family members, observation of family members and neighbors, through discussions with friends, and through religious congregations. They also adopted practices promoted by media and were willing to listen to advice from local NGO workers.

Community Respect for the Father

In both settings, a ‘good father’ was considered one who was able to provide for his family, shared a loving relation with his family, relatives, and neighbors, did not have habits such as drinking or “*meyer neshah (roving eyes)*,” did not quarrel with his wife, and helped people in the community whenever the need arose. According to an older father from the rural area participating in the FGD “*a good father is someone who buys provisions for the family according to his ability.... to share and manage among themselves [his family]... live a good life, and have no conflict among themselves.*”

Some of the ways the in which the community expressed their respect towards such men were by addressing them as “*dada (elder brother)*” or “*bhai (younger brother)*” depending on the relation, by speaking politely. Older mothers in the rural areas mentioned offering tea and snacks as a mark of respect to the ‘good father’. An older mother in the rural area said that she conveyed her respect to a young father by blessing him “*Live long. Stay happy. Be prosperous. Our blessings are with you. If you continue being good the way you are by God’s grace you will not face any problem in your life.*” In the urban area, an older mother said saying ‘*salaam*’ indicated deference. Women in both settings frequently reported that they would move away or look down if a senior male member passed them by.

An older father from the rural area suggested “*if there is a small event somewhere, a prize can be arranged for a good father... someone who has provided higher education to his son, is maintaining his family very well, and is providing for his grandchild’s education, he should be given a prize. He can be honored by asking him to come on stage and he could be gifted with a bouquet of flowers or some gifts.*” However, another respondent from the urban area brought a different perspective. He stated “*these are normal... good means good... in maximum cases people do not show respect,*” indicating that being a good father was seen as the norm.

Respondents also discussed how families might honor a good father. A younger father from the urban area mentioned family members show respect to him by asking the wife to ensure his meals are given to him; “*the wife cares for him... calls him up in office asking him if he has eaten his food on time.*” Another young father mentioned that a family arranged a surprise birthday party for a young father he knew. He recounted “*...a good father celebrates the birthday of his child, but he did not think of himself. I have seen a father’s birthday. He wasn’t aware that his family had arranged for his birthday celebrations. When he returned home after work, his son wished him ‘happy birthday’. They had arranged for a cake and food to surprise him. He was very happy.*”

Most participants mentioned culturally appropriate salutations and various behaviors and gestures rather than using direct verbal expression were a mark of respect for a good father. In both settings respect was generally associated with seniority in terms of age. One respondent however, expressed a different perspective when he noted that being a good father was not celebrated as it was considered normal.

Teaching Values to Children

Participants were asked about the values they teach their children and how they teach these values. Fathers described wanting their children to be well-mannered, polite, and respectful of their elders. All participants echoed the importance of education and being good students, and wanted children to be studious and prayerful. One young father from the rural area felt that providing education would make his child *“manusher moto manush (a worthy human being).”* All participants echoed the importance of education and being good students for their children, and wanted children to be studious and prayerful. A government official in the rural area also reiterated that parents in the community gave a lot of importance to education, particularly English-language education. According to a young father participating in a FGD *“more than 90% percent of people try to send their children to English medium schools whether they have money or not....if parents are not educated they try to give private tuitions....”* Another young father from the urban area said, *“I will teach my son the poem, ‘Twinkle twinkle little star’...he’s small. But I will teach him when he is able to speak.”* Another father from the rural area who works as a carpenter mentioned, *“the teacher informed me that he is intelligent. When she teaches A for apple, B for ball, she noted that he can memorize without a book.... As a father I tell my wife to keep him in control so that he doesn’t mingle with bad boys... he should focus on his studies.... when he grows up I will try to put him in college”.*

In addition, it was important to respondents that children were not engaging in physical fights or hurting anyone intentionally. A young father from the rural area said that as a parent he would not like if someone approached him and said that your daughter is *“dhyamna (Bengali slang to indicate an obstinate person)”* or if his children had used *“galigalaj (verbal abuse/foul language).”* One young father from the urban location mentioned that he teaches his child not to say *“tui (a familiar form of ‘you’ considered disrespectful when used to address elders)”* to those older than him. All parents across both study sites mentioned that they will try to ensure that their children do not *“fall in bad company (kharap cheleder shonge na meshe)”*.

A young father from the rural area described how his religion served as a foundation for teaching values and behaviors to his children. *“Since I read namaz (Islamic prayer) and kalam (word of God), I know all duas (prayers) and manners regarding how to move around, sit, get up, eat, etc. Since I know these manners and etiquettes, I can teach my children as well”.* He added *“I will make them sit beside me and show them how I do things. Unless I demonstrate things to them they won’t know how to sit with legs folded during a meal, how many times one can drink water during a meal, etc”.*

Overall, the values parents instilled in their children most often included the importance of education and teaching them manners within their communities. Parents reported using different methods to instill values in their child/ren. Strategies included monitoring the company they keep, personally demonstrating the values they would like their children to learn. Parents in both settings valued learning and aspired for their child/ren to have a good education and a successful career.

Child Disciplining

Child discipline was explored in part through a vignette – see Box 1 – and a series of follow-up probes.

Box 1. Parenting Vignette

Vignette 1: Imagine that a father named (FATHER) comes home after working all day. His three-year-old child (CHILD) comes running to greet him, and in the process, knocks over a pot of food that was cooked for dinner. (MOTHER) is startled and the child starts crying.

Now imagine that (FATHER) gets very angry and he scolds (CHILD). He slaps (CHILD) very hard and (CHILD) falls down. (MOTHER) sees this happen.

Responding to the story, most respondents strongly discouraged hitting/slapping young children (0-3 years). However, one young father from the rural area pointed out that “*not everyone is the same. Some people are ill-tempered, some are calm. It will depend on the person....*” Similar views were echoed by an older father and an older mother from the urban area – that despite the disapproval of harsh discipline with children in this age group, some individuals used it or said others in their communities used it. Some men were described as ill-tempered and more likely use physical methods of discipline even on small children or scold them verbally. A child protection officer, responding to a separate prompt, echoed the connection between temper and physical abuse, talking about a client whose children constantly asked her to buy them things, and how this source of irritation led to physical discipline.

There was general consensus across settings that if harsh discipline was used in response to the vignette scenario, the grandparents (who were mentioned in the vignette) would strongly reprimand their son. An older father from the rural area said “*the parents would tell their son his behavior [hitting the child] was wrong. You are older and should have enough sense, then how can you hit the child? The child fell down. What if something happened to him [the child] then we would have to rush him to the doctor. It would be all your fault... how can you hit your small child.*” Another older father in a FGD said in Bengali ‘*ashol takar cheye shuder daam beshi*’ which translates as the interest (their grandchildren) is worth more than the principal amount (their son). He went on to explain that grandparents are fonder of grandchildren than their own children, and will promote non-violent discipline for their grandchild, irrespective of the gender of the child. One older father from the urban area said the grandparents would tell their son “*why are you scolding the child, this also affects the child, intense scolding makes the child irritable?*” A few women (both older and younger) from both geographical settings expressed concern of the child being hurt as a result of the slap and the fall.

However, differing responses on child discipline also emerged when respondents described personal experiences. One young father from the rural area of two sons aged 7 and 2.5 years explained “*if I observe that another child is beating my child and my child is at fault, then I will call my child and affectionately explain to him that he should not do such a thing again....and if he does that again God will punish him. Even after telling him 5 times, if he doesn't obey, then I may give him a wallop on his leg with a stick, so that he understands that if he does such a thing again his father will beat him.*”

A young mother from the urban area explained that she used threats of violence to instill fear in her child to prevent him from misbehaving. She narrated *“We scare the kid a bit saying ‘Do not do this child. Or else I will hit you... eto dushtumi bhalo noy (don’t be so naughty).’ Then the child will have some fear and think twice before repeating it. The child will think ‘Yes, I will not do it. If I do it then mother will scold me again. If I do that father will scold...’ that is why even if the child wants to do it, he will look at the parents and leave it out of fear.”* Another young father from the urban area said that if his son is naughty, he makes him hold his ears and do sit-ups and say that he shall not repeat the mistake. However, if he continues repeating he would say *“I will not give you the biscuits...” nowadays, I understand that I shouldn’t beat him. After all he is a child. It is natural that he will be naughty....”*

One young father narrated *“children don’t play alone, they always play with other children. When other children use abusive language, and my child learns that and uses such language in our home then I get angry and I give him a beating. I don’t show leniency and punish him. His mother questions me for beating the child. When I say he is using abusive language, she tells me that I should patiently explain to the child what is wrong. Otherwise what difference will there be between our child and other children?”*

A young urban father noted different disciplining approaches by sex, saying *“girls can’t be beaten. If a boy does not listen to someone, he can be beaten but not girls...they generally understand.”* A young mother from the rural area added to this concept, saying that parents seek to prevent girls from interacting with boys to keep them safe, *“In our locality Muslims and Bengalis reside. In our Muslim culture girls have restrictions in going out, they stay in home and most importantly in the locality talking over phone with a boy is not allowed. We need to protect her from talking over phone. We punish her if she does wrong, if my child does wrong another child will also learn, we try to prevent this.”*

Although some respondents discouraged slapping or scolding young children, discussions indicated that parents do hit children when a behavior that is disapproved by the parents is repeated by the child.

An urban young mother reflected on non-violent means she used to discipline her daughters. She described, *“they are being very stubborn, they are not willing to understand. So to divert their minds, I gave her something and made her sit...to give something to divert the mind.”* She explained in addition to giving her daughters something like a toy, she would also take a short walk with them outside to redirect them when they were being very stubborn.

When asked about how respondents’ own childhood misbehavior was corrected by parents some responded they were scolded, some were hit (both men and women). A young man from the rural area said that he was never reprimanded by his parents because he was a good boy who was never naughty. Another young man from the rural area said that when he was around eight years old one day his mother had made him put on clean clothes. He went outside and started playing in the sand. His mother saw him and started hitting him. Angrily she also said *“Mereji phelbo (I will kill you).”* He said that it scared him very much. He also added *“I understand my mother is working the entire day taking care of my brother and me and I am increasing her burden but, she could explain that I should not play in the sand instead of saying ‘I will kill you’”.*

The research findings indicate that although physical punishment of very small children (less than five years) is broadly discouraged it continues to be a practice both in urban and rural areas. Compared with hitting and slapping younger children, scolding or threatening them with negative consequences of the behavior (including with violence) appeared more common practices, and one young mother described non-violent discipline practices. Differentials in disciplining methods for boys and girls were noted.

COUPLE'S RELATIONSHIP

Household Roles and Responsibilities

Participants were asked to describe the roles and responsibilities of men and women in the home. All participants described household chores as being the responsibility of a woman, including cooking, washing clothes and utensils/dishes, taking care of child/ren, her husband, and the in-laws. One young mother of two (son 10 years and daughter 3 years) from the rural area said *"I usually do all the cooking and daily household work. When I was pregnant, I found it difficult to manage things all by myself"*. Another young mother from the urban area said that as a mother her responsibilities included *"During pregnancy taking care of myself to ensure the baby is healthy. After pregnancy feeding the child every hour.... helping the child to sleep and sitting with the baby on the lap, taking care of the other child, husband, and other members of the family"*. One young mother from the urban area with a 10 year- and 1.5 year-old daughter found it challenging *"when I have to take care of both of them together. Suppose the younger one is crying a lot or irritating me. And the elder one is in her school uniform and I have to make her do her homework and everything. Then there is household work.... Doing this everyday becomes mundane.... meaning every day I have the same work.... sometimes it becomes irritating. I do not enjoy it any more. Sometimes I wish it would stop..."*

Women were asked to describe how they would express their affection towards their husbands. For example, one young mother from the rural area mentioned that she massaged her husband's feet when he returns tired from work. However, no such action was mentioned on the part of men, who more often mentioned taking care of their families' material needs as well as talking with their wives as forms of caring for their spouse.

Often in rural areas and in some families living in urban areas, a man's parents lived with a couple and the wife would be responsible for caring for them as well. Respondents reported that in-laws were important to young couples' relationships. One young urban woman, speaking of her relationship with her in-laws, said *"We have good coordination and love between us but my mother-in-law gets irritated. Suppose I sleep with the children at night and also discuss with my husband regarding different issues, then my mother-in-law gets annoyed and tells, 'why are you talking, go to sleep, wake up early and prepare chapatti."* Others described more positive relationships, with one young woman from the rural area saying *"...even if my mother in-law gets angry, she loves me very much... with me, everything is good. The relation with my in-laws and between them are good... they never abuse or say hurtful things. They are very loving. Since I have come, I have seen my in-laws and family love each other. I have never seen tensions"*.

Conflict in the Relationship

Conflict in couples' relationships were explored in part through a vignette in focus groups – see Box 2 – and a series of follow-up probes.

Box 2. Relationship Vignette

Vignette 2: Imagine a man named (HUSBAND) and his wife (WIFE). Let's talk more about (HUSBAND)'s relationship with (WIFE). Imagine that he comes home from a long workday and is hungry but food is not ready yet. (HUSBAND) says that (WIFE) does not understand that he works a long day and is tired and hungry when he gets home. Instead, he says that (WIFE) makes him wait for food. Whenever he tries to talk to her about it, he says that she is too busy to have dinner ready right when he comes in.

Let's hear more of their story. Remember this is not a real story –I want to understand what you think about this situation. (HUSBAND) says that she makes him get angry, that she wants him to be upset. Sometimes, (HUSBAND) says that (WIFE) needs to be corrected or she will do this forever. He yells at her and tells her she is slow. Sometimes he pushes her, she falls, and sometimes he hits her. He would not need to do this but she is not taking the situation seriously.

In response to the story in the vignette, young mothers in the rural area said that “...the husband will become angry... he will say that ‘I have come after working hard and the wife is not giving me food and water’”. Young mothers from the rural area added that “...the husband will either take food on his own as a mark of his anger or else will go to neighbor's house.” Reflecting on the part of the story where the husband becomes abusive and violent, respondents felt it was a normal reaction to situations that upset the husband such as when his expectations of his wife's duties were not met to his satisfaction.

An older mother from the urban area concurred, stating “we need to understand that this is our [women's] fault. The gents of the house work outside so that we have money to eat. If they do not work, we will not have money to take care of the house. So we need to ensure that everything is ready before they come home. If the husband is coming from work, we should have his food ready for him.... if we work outside and come home and see food is not ready, even we will get angry. If we come home and see we are not getting any food, or that we are not getting any respect, then we will also get angry....” Another older mother in the urban area offered a different perspective on this conflict over the task of food preparation, talking about a time that she fell ill, “But I would still do the work and we would divide it. He would say you make the vegetables and I will make the rotis (flatbread). He would come and knead the dough so I could flatten it make bake them. Sometimes, he would do both. We do it together. Now that our child is a little older, I do all the work. But even then, if I am sick or unwell, then he does the work. We do it together. That is why we never fight.”

Most respondents in other focus groups agreed that family members in the vignette would not consider it a problem that their son was angry with his wife, and some did not consider violence a problem in response to this scenario. An older father from the rural area said “....it is ok if this [a wife not having food ready for her husband] happens 30 days a year, but it is a problem if it happens daily. If he is not getting food on time after returning from work, or his clothes are not being washed on time... if she is sick then it can be understood, but if she is in good health then she should complete her cooking on time... if she is able to correct herself then it is ok. Otherwise he should give her divorce”. Divorce was also suggested by older

fathers from the urban area if the problem as described in the vignette remains unresolved. However, older fathers were of the opinion that the husband and wife should try to resolve the matter amicably. If they are unable to find a solution the couples' family should be invited to resolve the issue. Another older father suggested harsher measure. He was of the opinion that "she should immediately be returned to her father's home" as punishment.

An older mother narrated an incident outside of the vignette from her own community: "there is a Bengali family, in my neighborhood.... they are constantly fighting. They got married eight months ago but she is not letting the boy come near her. We are making her understand. If you don't like him, tell us, you can leave him." She also expressed "It is natural that he is annoyed.... why she is behaving like this? She should communicate to him the problem," and noted that both sets of parents and others in the community have been called in to help them with this situation.

Respondents from both settings mentioned that couples' relationship deteriorated during Covid-19, and the exacerbation of stress around family income, as well as additional stressors from the ongoing pandemic.

Respondents offered perspectives on conflict within couples' relationships, both that reflected what was described in the vignette and what was happening in their communities. Overall, respondents agreed that there were situations in which anger, mostly against women, was justified, and some felt violence could be justified. Some suggested other solutions, including sending women to their parents' homes, divorce, and involving both sets of parents to resolve conflict. One older urban woman described how she and her husband shared tasks, crediting this for their lack of conflict.

FAMILY PLANNING

The REAL Fathers intervention includes a focus on increasing awareness and intention to use family planning. Participants were asked about their knowledge and acceptability of family planning. All respondents were aware of family planning, though to varying degrees of specificity and confidence. Respondents shared that a key source of knowledge for various modern family planning methods were ASHAs and community health workers.

Although women were responsible for using family planning methods, respondents seldom reported explicitly that women have real agency to make family planning decisions. A young father from the urban area narrated that during his child's delivery he was asked to sign two documents. When he enquired what they were for he was informed that one was the consent form for the caesarean section and the other was for inserting the "copper T" (intrauterine device). When he enquired if his wife had been consulted on the same he was told "what's the need of that? You are the guardian, you are the decision maker, your decision is final."

As compared with urban respondents, respondents from rural areas reported more family and social pressure to have a child soon after marriage. Younger fathers and mothers note that parents express a desire to become grandparents soon, though across groups there seemed to be a broad understanding of and support for child spacing, or for waiting a while to have one's first child.

ADVICE-SEEKING

A key focus of this research was advice-seeking in communities, centering around young couples seeking advice on parenting their children and their relationships, core areas for REAL Fathers. Given this importance, findings are reported separately from the subdomains of ‘parenting’ and ‘couple’s relationship’ – though advice pertains to each.

Advice for Marital Relationships

Many respondents spoke about the role of families of both spouses becoming involved around disagreements and problems in marital relationships, often as mediators. Neighbors and officials were also mentioned as providing advice, or mitigation, for marital conflicts. However, many respondents flagged that couples may not always respond positively to this, with an older urban mother saying couples may “think it is our internal matter. Why will a third party talk about it? If we have a problem, why will someone else come to interfere in it.”

Television serials also played an important role in influencing couple relationship. One young father from the urban area said “Now, most of the Bengali or Hindi serials and films are about family dynamics and man-woman relationship. Some are good, some are bad. They are ignoring the bad and copying the good...that’s normal”. One young father said that he attended a religious congregation where they were advised on couple’s relation. He said they were told, “you should behave well with his wife, you should interact jovially with her, never behave badly. If she makes any mistake, you should rectify it on her behalf. You should rectify her by praising and encouraging her. Even if she does something wrong, you should say something positive about her. Once she corrects herself, you should explain her mistakes to her in a positive way. If you point out her mistakes in an angry manner, it can lead to an altercation. You should speak to her lovingly”.

Young couples got advice for their relationships from a number of sources, with families appearing to be more important sources of advice, though mass media and religious congregations were also named. Respondents noted that couples may not always respond positively to advice from third parties.

Advice for Child Rearing

Respondents reported that family members were a key source of advice for child-rearing, especially older relatives (the role of grandparents has been discussed in the child discipline section). One urban young father in a focus group explained, “From seeing my father I learnt, my father learnt by seeing my grandfather, like this by heredity we learnt.” An urban older father reiterated the importance of learning from families: “they have their elders, their own fathers or grandfathers, from whom they can learn to be a father and properly take care of their children. It can’t be learnt from an outsider. Their elders tell them to do this or work in this way for them to be affectionate to their child.”

In addition to family members, neighbors were also mentioned as a source of advice or knowledge on parenting. One urban young mother described those she listens to about parenting: “Our friends are there... I will say ‘see, this is happening.’ They will say, ‘No, don’t do this work. This is not good. Do this, then it will be better.’ If we cannot understand something, then we ask someone. There are other people

around us. There is khala (maternal aunt), aunt, and pishi (paternal aunt). There are many whom we can ask that... Our mothers are there... Whoever is there around me in the slum, whoever we talk nicely with, I ask... So we listen to that. We have asked because they are elder to us. Again there are friends whom I am asking. Suppose I don't know, they know. Or maybe they don't know and I know. So when we ask questions... they can find out and even I can learn.” Other respondents felt that only parents themselves can decide to change parenting approaches, but that they could be convinced by families and communities.

When given advice from families and communities, respondents reported that young parents may not respond positively; they may feel sad, angry, or that it wasn't the advice-giver's role to interfere by giving advice. A young urban father explained “If someone came to talk about the thing then he will not see that as good and he will quarrel with them and tell them ‘what's in you in that, whether I am beating my child or not.’”

Couples also receive advice from government and NGO officials. A rural child protection officer reported that they provide parenting advice, including encouraging parents not to hit children less than 5 years or older. An urban child protection officer gave the example of providing advice for parents on education, including guidance on how to apply for scholarships and how to access government assistance for schooling – an important role, considering that education emerged as a parenting priority in this research. In addition, mothers are advised to send children to the Integrated Child Development Services (ICDS) centers once they become 3 years old. There they get food and are engaged in many activities such as playing, drawing, singing, dancing with other children. They are advised to send younger children with the 5-year-old child to the ICDS center and the younger child is told to observe the older sibling.

Young couples received advice on parenting from sources including families (especially grandparents), neighbors and community members, religious congregations, and government and NGO officials. Advice on parenting seemed more broadly acceptable than advice on relationships, though respondents still cautioned that couples may still not be receptive to receiving such advice.

REAL FATHERS

Overall, respondents discussed the importance of good relationships between parents and children and between couples. A subset of respondents – including government officials and CPOs – were asked about REAL Fathers as a program, and how it might be implemented in the settings they were familiar with. These respondents expressed a need for a program like REAL Fathers. A government official from the rural area stated that currently there are no informal or formal parenting mentorship programs in the community.

Some (community leaders in the rural setting) suggested that respectable persons from within the community would be suitable mentor: “the selection has to be adequately done. He has to be someone who is from community and have maintained a good hold and position in the community. He believes in social change.” A government representative from the same setting had a different perspective, feeling that the community members were not likely to listen to advice from people who were also members of their community. According to her, “it's even better accepted when someone from outside tells them:” people are more likely to listen to what outsiders had to say, and mentioned CINI workers, ASHAs, ICDS Didis (anganwadi workers) as mentors who could train and work with the fathers. Commenting on the process of

implementation, she advised routing the entire process through proper governmental channel to ensure effective execution of the intervention.

A government official in the rural area felt more confident that the REAL Fathers program would be a good match in the communities she was familiar with, more so than the urban government official respondent included in this study. The urban government official added that people are accustomed to, or would like, some type of compensation for their involvement in programs like REAL Fathers, such as “rice or pulses” – though she cautioned this can politicize who is selected for such programs.

RECOMMENDATIONS

Based on the findings of the formative research on REAL Fathers conducted in one urban and one rural setting of West Bengal the following recommendations are being proposed.

1 Integrate REAL Fathers with livelihoods programming.

Respondents reported that a primary role of fathers is to support their family and that they face many challenges in fulfilling this role, which has only been exacerbated by the Covid-19 pandemic. Integrating REAL Fathers with livelihood programming may potentially increase the appeal of the program for young fathers, as well as address a pressing need in their lives.

2 Build on growing involvement of fathers in caregiving.

The findings of this research suggested that caregiving of children was primarily considered to be a woman's responsibility, as in any patriarchal society. However, this is changing. Men in urban areas were found to be more actively involved in the caregiving of their child/ren's lives as compared with their rural counterparts. REAL Fathers can support and build on this changing conception of fathers as breadwinners only, towards also being recognized as equal co-parents in the process of child-rearing. This formative research highlighted the potential for increasing and encouraging the involvement of young men in caregiving through the skills promoted by the REAL Fathers intervention. If REAL Fathers implementation in rural versus urban communities reveals a pronounced difference in existing engagement of fathers in child caring, it's recommended that mentors' language reflect where young fathers are currently in the caregiving continuum.

3 Implement the REAL Fathers mentoring program in rural areas.

Respondents (government officials, community leaders) were asked about the feasibility of adapting the REAL Fathers mentoring program. While respondents from both settings expressed need for a mentoring program to improve relationship skills and parenting practices, research findings are suggestive of a greater need in the rural areas.

There are existing networks within communities where young couples seek out advice – from family members, neighbors, and officials from community organizations – and a broad willingness to engage with this advice. Respondents also reported learning about parenting in particular by observing family and community members. However, respondents also reported the potential for a negative response from young couples, particularly young fathers, for advice seen as interfering or unsolicited. An adaptation of the REAL Fathers material for this setting should carefully approach advice-seeking and advice-giving in these communities, with a focus on working with mentors to sensitively approach young fathers with advice for relationships, parenting, and family planning. Insights from this research that may be applied include findings on how good fathers are recognized or could be recognized in their communities, including by using respectful language and public celebration (itself already a component of REAL Fathers).

4 Support existing positive parenting practices.

The formative research findings indicated that while respondents from all groups broadly discouraged harsh methods of disciplining young children (below the age of five years), it was not uncommon for parents to hit, scold, and threaten children when they were naughty, and as a way to correct behavior. One respondent indicated that he and his wife disagreed over positive discipline versus violent discipline practices, and multiple respondents indicated that fathers who are irritable or ill-tempered are more likely to violently discipline their children. Findings indicated promising existing protective norms and positive parenting practices that can be engaged with in the process of adapting the REAL Fathers intervention in rural West Bengal to promote positive parenting practices.

5 Improve couple communication to reinforce positive practices.

Findings from this formative research pointed to the use of violence to resolve conflict between couples, a practice that respondents sometimes justified. Specifically, participants from rural areas more often reported men using violence against their spouses to communicate their displeasure. Findings also demonstrated men and women in both urban and rural areas discuss communication as important to relationships and also as a way of resolving conflict, positive practices that REAL Fathers' skills of non-violent conflict resolution could build upon.

6 Encourage adoption of modern family planning methods.

All participants from both settings acknowledged being aware of modern family planning methods, though were not always confident in this knowledge. Women sometimes used family planning methods, but seldom had agency in the process. However, findings from respondents in both sites showed a broad acceptability of young married couples waiting to have children, of spacing births, and to a lesser extent, limiting family size, even as respondents discussed community and family pressures for young couples to have children. The family planning material in REAL Fathers should build on this community support for spacing births and waiting to have children.

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