



# Living Peace in Democratic Republic of the Congo:

An Impact Evaluation of an Intervention  
with Male Partners of Women Survivors  
of Conflict-Related Rape and Intimate  
Partner Violence



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## About Promundo

Founded in Rio de Janeiro, Brazil, in 1997, Promundo works to promote gender equality and create a world free from violence by engaging men and boys in partnership with women and girls. Promundo's strategic partners in the United States (Promundo-US), Brazil (Instituto Promundo), Portugal (Promundo-Portugal), and Democratic Republic of the Congo (Living Peace Institute), collaborate to achieve this mission by conducting applied research that builds the knowledge base on masculinities and gender equality; developing, evaluating, and scaling-up gender-transformative interventions and programs; and carrying out national and international advocacy to achieve gender equality and social justice.

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# List of Acronyms

<b>DRC</b>	Democratic Republic of the Congo
<b>FARDC</b>	Forces armées de la République Démocratique du Congo (Armed Forces of the Democratic Republic of the Congo)
<b>FDLR</b>	Forces démocratiques de libération du Rwanda (Democratic Forces for the Liberation of Rwanda)
<b>FGD</b>	focus group discussion
<b>IPV</b>	intimate partner violence
<b>LPG</b>	Living Peace group
<b>PNC</b>	Police Nationale Congolaise (Congolese National Police)
<b>SGBV</b>	sexual and gender-based violence

# Executive Summary

## Background

This report presents the findings of a qualitative, time-series evaluation that assessed the impact on intimate partner violence (IPV) prevention of a pilot intervention program called Living Peace, which targeted the husbands of women who had experienced conflict-related rape and IPV in eastern Democratic Republic of the Congo (DRC).

Baseline quantitative and qualitative research conducted in 2012 and 2013 in DRC, which found that many husbands of rape survivors used multiple forms of violence against their wives, informed the creation of the initiative. The baseline research also found that, in a deeply patriarchal society with a high degree of gender inequality, exposure to conflict and conflict-related stress were key drivers of men's use of IPV. By analyzing men's responses to stress and trauma, the research found that psychological coping mechanisms are gendered. Constructions of male identity are associated with social expectations of manhood, and the impact of trauma directly affects male identity. Consequently, strategies for coping with loss and trauma are gendered, meaning that men tend to cope with stress by seeking to redress their sense of emasculation, hiding their vulnerability and victimization. When they do not meet expectations of strength and control, men feel ashamed before their male peers and family, and fear exclusion from their social support system.

These findings opened a new window on working with men, not only as potential offenders of women's rights who abuse their power, but also as subjects with gendered identities who are confined by stereotypical norms that shape behaviors as well as create identities and deeply-rooted perceptions of self. From a psychological perspective, men (and women) employ coping strategies to survive stress and difficult

circumstances and, clearly, those coping strategies are strongly influenced by culture and gender norms and gendered power relations.

The Living Peace intervention focuses on: (1) helping men cope with trauma to reconstruct their identities in nonviolent, gender-transformative ways; (2) reducing stigma against and social exclusion of women who experienced conflict-related rape; (3) building social cohesion. Living Peace was piloted in 2013 in three sites in Burundi and DRC. The methodology uses group therapeutic principles to create an environment in which participants feel safe sharing and exchanging traumatic experiences and personal problems.

This qualitative impact evaluation of Living Peace was conducted in 2016, three years after the intervention was piloted, with men who had participated in Living Peace and with their partners/spouses, and other family and community members. Building on the intervention's initial positive results, the impact evaluation aimed to assess the longer-term sustainability of these results and explore any changes in community-level norms three years later.

The impact evaluation was based on two rounds of qualitative research, the first in February 2016 and the second in April 2016, with 40 male Living Peace participants and their families and communities in Goma, North Kivu and Luvungi, South Kivu. The first round gathered perceptions from 155 respondents through focus groups with former participants' wives, relatives, neighbors, and other community members. The analysis of those data was used to do a second round of research with 32 respondents using in-depth individual interviews.



## Key Findings

### IMPACT ON MALE PARTICIPANTS

The vast majority of the male respondents who had participated in Living Peace reported that the intervention had helped them adopt more equitable, non-violent attitudes and behaviors and had positively impacted their intimate and family relationships; they also reported that they continued to observe these changes three years after the intervention. Changes in attitudes and behaviors were observed related to the following:

**Alcohol and substance abuse:** Three years after the intervention, most participants said that they had significantly reduced their alcohol consumption, often turning to family or religion to help prevent alcohol abuse. Living Peace participants' reduction of alcohol and substance abuse was related to a decrease in their use of violence and aggression. Some participants experienced occasional relapses into excessive alcohol use, but few said these lapses resulted in intimate partner violence.

**Conflict management:** Before the intervention, multiple traumatic events that participants had experienced since childhood were associated with their use of physical violence against their partners. Afterward, almost all men reported improved conflict-management skills and new, nonviolent coping mechanisms to deal with trauma. In cases in which men showed symptoms that could suggest underlying mental health problems, and in one case in which serious problems were related to traumatic war experiences, men showed relapses into excessive alcohol use.

**Attitudes about gender and identity:** Three years later, most men interviewed reported that they had adopted more gender-equitable attitudes and behaviors than before the intervention (although, in this deeply patriarchal society, they continued to describe themselves as the “heads” of their households). Men reported carrying out more domestic tasks, asking for their wives' opinions in making decisions, and discussing household finances with their wives, with the men seeing the new collaborations with their spouses not as a loss of power but rather as a gain in well-being.

**Relationships with family members:** A number of the former Living Peace participants interviewed expressed happiness with the lasting improvements they saw in their relationships with wives and children after the intervention. Respondents cited three main reasons for these changes: (1) they felt more responsible for their behaviors (suggesting an increased sense of agency); (2) they communicated more openly and shared greater decision-making power with their wives; and (3) they practiced consent in their sexual relationships, which they credited with creating better intimate partner relations.

**Coping with war-related sexual violence:** In DRC, having a wife who has been raped is seen as shameful for a man and his family. Before participating in Living Peace, many men said they chased away or used violence against their wives who had been raped. Afterward, all 37 men with wives who had been raped reported that their participation in the groups had contributed to their acceptance of their wives and their children born out of rape (of whom there were 12).

**Coping with economic challenges:** After participating in Living Peace, the vast majority of men reported that they began to discuss financial matters with their wives and several men came to support their wives' work. The increased trust between former participants also enabled some of the male participants to collaborate in economic activities with other men in the community, which contributed to higher family income.

### IMPACT ON FAMILY MEMBERS

**Impact on women:** After their husbands participated in Living Peace, many women reported that they felt healthier, happier, and less stressed, and that they were more respected, acknowledged, loved, and supported by their male partners. Almost all women reported that their husbands' use of IPV had stopped or significantly decreased, although some said their husbands continued to use verbal violence. Most women (there was one exception) who had experienced war-related rape – including those who subsequently gave birth to a child conceived from such rape – said that they were accepted again by their husbands. Husbands' increased participation in household tasks and caregiving was also reported.

**Impact on children:** The vast majority of women reported that they felt their children were safer after their husbands participated in Living Peace due to their husbands' reduced use of violence in the home. Children who were interviewed reported that their fathers took on more responsibility and cared more for them. They paid school fees and were more involved in education – not only for their sons, but also for their daughters. (Many fathers didn't pay school fees for their daughters before their participation in the Living Peace groups.) Children reported that fathers also played more, helped more with homework, and engaged in more activities at home with their children.

**Impact on extended family:** Relatives of former Living Peace participants reported that they had come to respect their participant family member; whereas before, because of his behavior, they had not respected him. They also reported being influenced by former participants' changes in attitudes about gender.

## IMPACT ON THE COMMUNITY

In general, community members who were interviewed spoke positively about the changes in behavior of the former Living Peace participants. Community members reported that they saw the benefits in the men's families of their changes. The community members reported that the changes they observed and the benefits of these changes encouraged them to adopt new, more equitable behaviors themselves.

**Changing drinking behavior of friends and neighbors:** After the Living Peace pilot intervention, community members reported that the first visible effect in the community was a change in drinking patterns among former participants' friends. Several former participants abandoned the friends they used to drink with, which then motivated some of these friends to stop drinking, because they saw the positive effect.

**Role and position in the community:** The positive changes in the behavior of former Living Peace participants contributed to improved reputation within the community, respondents said. Former participants took an active role in promoting change in their communities, by, for example, discussing the notions of acceptance for women who had experienced rape. According to the community members who were inter-

viewed, these discussions influenced their own attitudes, and, after seeing the positive changes in the families of the former participants, they wanted to adopt the same practices to improve their own economic, social, and family circumstances.

## IMPACT ON NORM CHANGE AND IPV REDUCTION

Participation in Living Peace affected not only the men themselves but also other community members and friends around them. Community members reported having observed various changes in the families of former participants that they copied themselves, including: (1) reduction of alcohol use; (2) reduction of IPV; (3) decreased stigmatizing of rape survivors; (4) changed attitudes and behaviors in gender relations; and (5) increased socioeconomic well-being.

Respondents reported that the radiating effects of Living Peace on the community started with observation of these positive shifts. Community members' observation of change – and the positive impact of those changes in families – provided a starting point for reflection and discussion within the community of the stigma against women who were raped, the role of men in household tasks, the problem of alcohol, and intimate partner violence. This ultimately enabled families who had not participated in Living Peace to understand what helps a family to change and improve. By copying the behavior of former Living Peace participants and their families, some neighbors, friends, and relatives reportedly stopped their use of violence at home, contributing to a greater reduction of IPV in the community.

## Conclusions and Recommendations

The findings of this qualitative evaluation show lasting change as a result of Living Peace groups with men in eastern Democratic Republic of the Congo. Although the qualitative nature of this evaluation does not allow for broad generalization, it is possible to extract certain factors that are indicative of the intervention's long-term impact on IPV prevention.

Influences on men's reduction of IPV include: (1) moderating or reducing their alcohol use (2) feeling acknowledged and respected during the groups; (3) feeling responsible; (4) having support from partners and/or former group members; (5) having no serious mental problems or disorders; and (6) having at least a minimal amount of stable income.

Perhaps the single strongest contributing factor to sustained behavior change was that men perceived immediate and lasting rewards for making these changes. Many men began to experience, within the relatively short time spanned by this intervention, respect for themselves and respect and care for their wives. They saw that adopting their new attitudes toward women and sharing household tasks – combined with reductions in alcohol use – brought benefits to both their families and themselves. Manifestations of the men's changes in gender attitudes and behavior include: (1) participating in household and domestic tasks; (2) involving their wives in economic and financial activities and planning; (3) respecting consent in sexual relationships; (4) treating sons and daughters equally with regard to education; and (5) challenging and rejecting certain cultural practices, like dietary restrictions for women, when they are, in the eyes of the men, not “fair” to women. While the majority of the families interviewed reported these improvements, they were not found in families in which the man suffered from a mental disorder or continued to abuse alcohol.

These positive results do not signify that gender equality has been achieved in the households, but rather that families and communities have become more equitable or moved in the direction of embracing more equitable relationships. The present evaluation shows that men, via the Living Peace interventions, can learn to see the negative effects of their abuses of power and that this insight influenced their behavior and ability to share or balance their power in their relationships and homes. In a society in which women are generally considered to be men's possessions, such changes are notable.

While all families reported a cessation of sexual or physical violence, not all families showed the same degree of change in men's positive engagements in, for example, sharing family income and participating in household tasks. Those families who reported relapses in the husband's behavior linked the relapses to his

alcohol abuse and/or to severe psychosocial distress; such relapses were mostly temporary

It is important to note that the intervention's effect comes from the bottom up. The psychosocial approach improved men's self-knowledge and awareness of problematic behaviors toward women and others around them. Those insights generated the necessary motivation and skills to change behaviors. The findings show how psychosocial interventions can facilitate behavior change, and, combined with educational approaches, enhance the effectiveness of interventions to end sexual and gender-based violence (SGBV).

The findings also show that personal and family economic gains and psychosocial improvements have multiplier effects, spurring positive behavior change among community members who have not participated in the intervention and, ultimately, a reduction of intimate partner violence within the community.



# Introduction

# Introduction

This report presents the findings of a qualitative, time-series evaluation of the impact on intimate partner violence (IPV) prevention of a pilot intervention program targeting the husbands of women who experienced conflict-related rape in the eastern Democratic Republic of the Congo (DRC). Baseline research that informed the creation of the initiative found that many husbands of rape survivors used multiple forms of violence against their wives after conflict-related rape and/or expelled them from the home. The intervention promotes the involvement of husbands or partners in their wives' recovery and seeks to prevent further use of violence against the women. The current study was conducted in 2016, three years after the pilot, and included male former participants as well as members of their families and communities.

The pilot intervention was originally named “Kikundi Cha Uponyaji Ya Wa Baba” (“Healing Groups for Men” in Swahili) and subsequently renamed Living Peace. It was developed and implemented by the Institut Supérieur du Lac, a Congolese institute for higher education in psychology and mental health, and by Promundo-US, in collaboration with other local NGOs and with financial support from Learning on Gender & Conflict in Africa (LOGiCA), a World Bank program financed by a multi-donor trust fund.

Building on the program's initial results (gathered via a simple pre- and post-test evaluation conducted immediately before and after the intervention), this evaluation assesses whether such preliminary results are sustainable in the long term. It also explores the diffusion effects of the groups and the accompanying community outreach activities, in terms of norm change related to IPV and IPV reduction – not only among male group participants (and their partners) but also

among their adult family and community members three years after the pilot intervention.

Promundo-US provided technical assistance and coordinated the research, which was implemented by the Institut Supérieur du Lac and the Living Peace Institute, by local interviewers not involved in the program implementation.<sup>1</sup> All names have been changed for reasons of privacy.

## About Living Peace

The Living Peace approach is based on findings from the following studies, coordinated by Promundo-US in North Kivu from 2012 to 2013, which explored the impact of war and conflict on masculinity, gender relations, and men's use of violence:

- The International Men and Gender Equality Survey (IMAGES), a household survey carried out in over 20 countries on masculinities, gender equality, sexual violence, and conflict-related violence; conducted with approximately 1,500 men and women aged 18 to 59 in DRC in 2012 (Slegh, Barker, & Levtov, 2014);
- Qualitative research on the impact of experiences with conflict on men's identities and partner relations; included male partners of survivors of conflict-related rape (Slegh, Vess, Kimonyo, & Ruratotoye, 2014).

The studies' results showed that men's exposure to violence was significantly connected to their construction of violent masculinities. Some key findings included:

<sup>1</sup>. Promundo-US and the Living Peace Institute are independently registered strategic partners. The Living Peace Institute is an independent local NGO established in 2015 in Goma, DRC, and financed by the Ministry of Foreign Affairs of the Netherlands to continue the long-term implementation of the Living Peace approach. The Living Peace Institute provides training and coordinates research and implementation of Living Peace in North and South Kivu with men in the Congolese National Police (PNC) and the Armed Forces of the Democratic Republic of the Congo (FARDC), and their families. The Institute works through health centers with husbands of women who have been raped, and with men and families living in high-risk conflict areas.

- Men who were exposed to violence in childhood and/or war-related violence were more likely to use violence against intimate partners and to have less equitable gender attitudes.
- Traditional and rigid gender norms predicted higher levels of men's use of violence in both public and private spaces.
- Psycho-traumatic stress and mental health problems led to increased violent behavior, including intimate partner violence (IPV), and alcohol abuse among men.
- Nearly one in four women had experienced conflict-related sexual violence. In nearly half of these cases, women were subsequently rejected from their homes and communities. When women stayed with their male partners after conflict-related rape, IPV often ensued, driven in part by the husband's conflict-related trauma.

The results showed that men – struggling to fulfill patriarchal societal expectations of man as the provider and protector of family – often respond to their feelings of shame, frustration, and failure through alcohol abuse and violence against women. In general, men employ psychological defense mechanisms to hide their vulnerabilities, and cope with distress through avoidance or hypermasculine and violent behaviors, while women tend to cope with the traumatic effects of violence through silencing and isolation. Additionally, the findings showed that men are not only the perpetrators of violence but also the victims of multiple forms of violence in childhood, adolescence, and adulthood.

The study's conclusions indicate that in the context of eastern DRC: (1) exposure to conflict and conflict-related stress are linked to men's use of intimate partner violence (IPV), including sexual violence against partners, many of whom had experienced conflict-related rape by combatants; (2) men whose wives experienced conflict-related rape reported high levels of psychosocial stress; and (3) any intervention to prevent IPV in this context, including intimate partner sexual violence, should give significant attention to the conflict-related psychosocial needs of men at the same time that they support and protect women survivors.

Based on the findings of the 2012 and 2013 studies, a pilot intervention was designed and launched in 2013 with three key objectives: (1) to support men in developing alternative strategies for coping with their traumatic experiences and in reconstructing their gendered identities in nonviolent, gender-transformative ways; (2) to reduce stigma and exclusion of women who were raped and increase familial support for them; and (3) to build social cohesion in communities and restore social support systems that also serve as prevention for the development of mental health problems and severe traumatic disorders. The intervention operated on the hypothesis that increased social cohesion would lead to reduced IPV in households in which women (and men) had experienced conflict-related rape as well as those that did not. Men's female partners participated in selected sessions and through homework exercises undertaken with their husbands, in order to facilitate a shared process of men's behavior change at home. The pilot intervention was carried out in partnership with NGOs that were already providing psychosocial, legal, and medical support to women survivors of conflict-related rape, including HEAL Africa, Women for Women International, and their local partner NGOs.

In the pilot project, the Living Peace groups consisted of men whose wives had experienced conflict-related rape and men who were known to have been violent toward their partners, as well as men who were exposed to high levels of conflict-related violence but were not known to have used IPV. All groups also included a few men identified by community members as being "men of integrity," meaning they were not known to have used violence against their female partners, showed positive coping strategies, and were well-respected in the community. The objective of mixing these categories of men was to avoid further stigmatizing households affected by conflict-related rape and to expose those men who had used violence to men who modeled nonviolent approaches in their relationships.

The Living Peace program, developed within a human-rights and gender-equality framework, is based on a gender-specific and gender-transformative approach that combines group therapy and community outreach. Men and women in DRC are severely exposed to gross human-rights abuses as a consequence of lasting conflicts and structural violence,

including poverty and social inequalities (Erikson-Baaz & Stern, 2013; Douma & Hilhorst, 2012). Because of socially prescribed gendered roles and expectations, women and men are affected by war and trauma in different ways, and they consequently have gender-specific mental health needs that are acknowledged in this psychosocial intervention model. Moreover, a group-oriented approach is contextually appropriate in the Congolese culture, where individual psychosocial well-being strongly depends on the quality of social relations (Ikanga, 2014).

In complex humanitarian contexts, psychosocial interventions for strengthening social cohesion are considered to be most viable when they empower preexisting, local, and traditional social support systems (de Jong, Komproe & van Ommeren, 2003). The Living Peace model has been designed to resemble Bazra, a local conflict-resolution mechanism by which family and community problems are discussed and resolved in community groups.

The methodology uses group therapeutic principles to create an environment in which participants feel safe sharing and exchanging traumatic experiences and personal problems. The sessions are structured using psychoeducational methods that support participants in regaining control of their emotions, behaviors, and attitudes. The intervention consists of 15 weekly sessions of three hours each in which participants are guided to reflect on themselves, their behaviors, and their relations with others as they learn to adopt alternative, nonviolent coping strategies that support gender-equitable attitudes.

## Living Peace Pilot: Findings from an Exploratory Study

The pilot intervention was first assessed in an exploratory study in three sites in Burundi and DRC (World Bank, LOGiCA, 2014). Pre- and post-test questionnaires, in-depth individual interviews, and focus-group discussions were conducted immediately before and after the cycle of 15 weekly group sessions and the concluding community consultation/celebration event. All participants completed an evaluation survey after

each weekly session in addition to a final survey after the entire series. While limited methodologically, the results were nonetheless strong in both quantitative and qualitative data collected. In particular, shortly after the intervention, more than 90 percent of the participants across the sites reported high rates of positive attitude and behavior change, in terms of coping strategies, conflict management, and relationships with partners and children. Similarly, in focus groups and individual interviews conducted immediately after the fifteen sessions, participants reported numerous positive outcomes, suggesting that, as they began to feel more connected and supported through the Living Peace groups, they in turn felt more secure and stable in their homes and communities.

After participating in the Living Peace groups, some men reported that increased trust with the other men – whom they described as “brothers” – led to collaboration on new ideas for income generation, including jointly renting a small piece of land and growing crops or raising rabbits. Such developments helped them overcome feelings of disempowerment stemming from the war and their loss of work and income. This finding suggests that the groups had an encouraging effect on men’s willingness to develop new initiatives for contributing to family income generation, and that they generated trust among group participants.

In focus group discussions, the wives of all focus group discussion (FDG) participants said that their children had responded positively to the more peaceful home environment. They reported better overall health for themselves, their children, and their husbands. Most women also reported improvements in their sexual relationships with their husbands, particularly as a result of the men showing more respect and approaching them with more equitable attitudes.

After the pilot project ended in 2013, there were no further interventions or contact with the former participants or their spouses, family and community members. By reconnecting with some of the participants and their families three years after the end of the pilot intervention, this study aims to assess the long-term impact of the Living Peace intervention on IPV prevention and couple relations.



# 1

## **Research Aims and Objectives**

# 1.

## Research Aims and Objectives

This study evaluates the Living Peace methodology's theory of change through a qualitative, time-series study. It aims to assess: (1) if the changes continued after the end of the intervention; and (2) if the changes in participants' behaviors and attitudes had a radiating effect on the family members and community members. If this is the case, as the end-line study suggested, the Living Peace groups are not only effective for the participant and his nuclear family, but also function as a primary sexual and gender-based violence (SGBV) prevention tool for the broader community.

No studies are found that examine men's experiences with the conflict-related rape of their wives or female partners. Additionally, relatively few studies focus on experiences of male survivors of sexual violence; one study of male survivors in refugee camps found that groups of male survivors have been able to develop resilience and mutual support through collective action (Edström et al., 2016). To the authors' knowledge, no studies have sought to evaluate the effects on the prevention of IPV, including sexual IPV, of a psychosocial support model for men. By assessing the preventive impact of this psychosocial support and community outreach model, this study aims to contribute to the international literature and development of programs on engaging men as partners in IPV prevention, particularly in cases of displacement and armed conflict. The findings will be relevant for: (1) primary prevention in conflict and post-conflict settings; (2) integrated interventions that include primary and secondary prevention together with survivor support; and (3) primary prevention in non-conflict settings, in terms of how to incorporate an understanding of men's traumatic experiences into IPV prevention.

### Objectives

The main objectives of this research are to explore:

1. The lasting effects, if any, of the therapeutic group interventions on male participants' behaviors, attitudes, notions of masculinity/identity, and use of IPV (specifically in terms of how the interventions relate to primary prevention of IPV at the individual and community levels);
2. The lasting effects, if any, of the therapeutic group interventions as perceived by the male participants' wives, children, and family members (specifically in terms of how they relate to primary prevention of IPV at the individual and community levels);
3. The lasting effects, if any, of the therapeutic group interventions on the community, in terms of male participants' actions as role models and activists for IPV prevention;
4. The lasting effects, if any, of the therapeutic group interventions, in terms of changes in norms around IPV, as they are perceived by community members who did not participate in the group.

# 2

## **Context of the Study and the Initiative**

## 2.

# Context of the Study and the Initiative

Since 1993, eastern DRC has been the site of a series of conflicts, sometimes collectively referred to as the Great African War and partially the result of the Rwandan genocide and its many after-effects (Lemarchand, 2009; Prunier, 2009). These conflicts, along with chronic poverty and inequality in the region, gave rise to armed groups that still operate in the North Kivu and South Kivu provinces and have participated in large-scale human rights violations, including sexual and gender-based violence (SGBV) (Brown, 2012; Kelly et al., 2012; Michalopoulos, 2014). The approximate number of active armed forces in eastern DRC was estimated around 70 in 2015 (Stearns, Vogel, 2015), most of which have committed serious human rights abuses including SGBV (MONUSCO/OHCHR, 2016). The state has weak control over the state armed forces and security situation, leading to a generalized climate of insecurity and instability in DRC (EURAC, 2016).

In DRC, there are legal and policy frameworks regarding SGBV that recognize its root causes and acknowledge the need to engage men in addressing SGBV. In 2006, two laws were adopted that provided definitions of rape and other forms of SGBV. Law 06/018 from July 20, 2006 defines 12 sexual-violence offenses. Among those definitions, rape of men is criminalized; however, marital rape is not criminalized, nor is it mentioned there nor in any policies related to SGBV (Slegh, Barker, & Levtov, 2014).

DRC ratified the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) in 1986, and adopted several African and UN resolutions related to women's rights, including UNSCR 1325. However, while gender equality is guaranteed before the law, the Family Code still includes several clauses that are discriminatory against women. For example, it designates the male as head of household with "marital authority" over his wife, and women are required to get the husband's permission to

ravel, to open a bank account, or to work (Douma & Hilhorst, 2014; Davis, Fabbri, & Alphonso, 2014). DRC is a patriarchal society in which men are considered to be leaders at society and community levels, but also at home.

Numerous studies have affirmed high rates of conflict-related rape, as well as their impact and the impact of other forms of SGBV on women in eastern DRC (Johnson et al., 2010; Peterman, Palermo, & Bredenkamp, 2011). Fewer studies have looked at conflict-related pregnancies and the women who gave birth as a result of rape, but all findings indicate severe consequences on mental health for both the women and the children (Liebling, Slegh, & Ruratotoye, 2012; Scott et al., 2015).

Accurate data on the prevalence of SGBV and war-related pregnancies is scarce, though studies estimate that 6 to 17 percent of rape survivors faced pregnancy as a result of the sexual violence (Scott, Rouhani & Greiner, 2015). Most data on SGBV are collected from cases identified through services for women at health clinics, police stations, or NGO programs that do not represent all women who experienced SGBV or who gave birth after they were raped (Douma & Hilhorst, 2012). Many women do not receive services as a result of fear, stigma, or lack of access because they live in remote areas. Nevertheless, the existing evidence shows high rates of war-related rape and intimate partner violence against women (Johnson et al., 2010; Peterman et al., 2011; Douma & Hilhorst, 2012).

The International Men and Gender Equality Survey (IMAGES) in DRC (Slegh, Barker, & Levtov, 2014) explored the gendered effects of trauma and displacement and how these effects interacted with men's use of violence against female partners. Approximately 70 percent of men and 80 percent of women reported at least one conflict-related traumatic event, such as loss of property, displacement, loss of a family memb-

er or child, personal injury, or the experience of sexual violence. Nearly two-thirds of men and women who experienced conflict reported negative psychological consequences. Results of the survey showed that, in general, men tend to cope with extreme stress and trauma using strategies that seek to avoid and reduce feelings of vulnerability, including alcohol and substance abuse, while women are more likely to seek help from others or turn to religion. IMAGES in DRC also found widespread support for various forms of violence. Sixty-two percent of women and 48 percent of men believe that a man has a right to sex even if a woman refuses. Seventy-eight percent of women agree that they have to tolerate violence to keep the family together, while 48 percent of women agree that women sometimes deserve to be beaten.

Various other studies have found associations between IPV and attitudes of acceptance toward spousal violence and traditional patriarchal gender roles (Babalola, Gill-Bailey, & Dodo, 2014; Dossa, Hatem, Zunzunegui, & Fraser, 2014; Norman & Niehuus, 2015). In the context of highly patriarchal societies, gender inequality, and impunity towards SGBV, the main drivers of conflict between husband and wife are related to the husband having more than one wife; the lack of formally registered marital status; the husband's excessive alcohol consumption; disagreements over spending money on food and other items; and men's economic stress and un/underemployment (Norman & Niehuus, 2015; Tankink et al., 2010; United Nations High Commissioner for Refugees, 2005).

In addition, while there has been a tremendous amount of research on SGBV in DRC, few studies have examined in detail the impact of the conflict on gender relations in a way that includes the disempowerment or emasculation that many men perceive in the face of lost livelihoods and status due to displacement and victimization from armed conflict (Eriksson-Baaz & Stern, 2010; Liebling et al., 2012; Lwambo, 2011). Lwambo's study is one of the few to focus specifically on how men's sense of identity is severely affected by the conflict, with consequences for men themselves, their partners, and their families. Similarly, Eriksson-Baaz & Stern (2013) explored the motivations of Congolese soldiers to rape and highlighted the influence of conflict on a process of emasculation, similar to the findings from the baseline study that led to the creation of Living Peace (World Bank,

LOGiCA, 2014).

The reproduction of violence is demonstrated in studies that show that men who feel humiliated and abused by armed groups tend to become more prone to violence themselves (Erikson-Baaz & Stern, 2013). Men in this setting generally do not perceive themselves as perpetrators; rather, men perceive themselves as the ones who have been wronged. They justify their violence by victim-blaming, and by distancing themselves from the victims' suffering, which serves as a psychological defense mechanism of externalization – also framed as “othering” (Staub, 2007).

Finally, the conflict has had a significant impact on family structure in the North and South Kivu provinces of eastern DRC. Historically, the structure of families in the region has been patrilineal and hierarchical. When individual and familial grievances develop, community mechanisms exist – or at least have existed historically – to provide some reconciliation for affected parties, and the extended family usually assists in conflict resolution. However, in contexts affected by armed conflict, it has become apparent that traditional mechanisms are inadequate (Akello-Ayebare, 2009; Akello, Richters, & Reis, 2007; Eriksson-Baaz & Stern, 2010). When problems arise in families and communities in conflict and post-conflict settings, tensions grow and frequently result in domestic conflict and violence. Cultural notions, social practices, and social resources are under pressure, and families may no longer function as a safety net and support system (Immigration and Refugee Board of Canada, 2006; Tankink et al., 2010). Thus, while much of the focus on SGBV in eastern DRC has focused on “rape as a weapon of war,” this idea too narrowly reduces gender-based violence to one type of violence and too often casts men solely as perpetrators of conflict-related rape (Erikson-Baaz & Stern, 2013). As many as one fifth of the men in North Kivu and South Kivu have served in armed groups, and the effects on men of two decades of conflict are severe and many. However, the dynamics that drive men's use of violence against women (in the home and in public) extend far beyond armed conflict (Kelly et al., 2012).

According to a study by Médecins Sans Frontières, the need for mental health treatment in the conflict-af

affected areas of North Kivu is great. They diagnose many patients with post-traumatic symptoms including “constant fear, flashbacks, insomnia, suicidal thoughts, feelings of despair, heart palpitations, and breathing difficulties” (2014, pp. 26). However, these symptoms of traumatic stress are not only caused by conflict-related trauma. Research has shown that daily stressors have a significant impact on mental well-being (Miller & Rasmussen, 2010, 2014). Indeed, various studies have found that alcohol abuse and substance abuse in conflict and non-conflict settings is associated with exposure to daily stressors as well as with violent, traumatic events and unemployment (Steel et al., 2009; Kozaric-Kovacic et al., 2000; Médecins Sans Frontières, 2014).

# 3

## Methodology

# 3.

## Methodology

As previously stated, exposure to armed conflict and stress from displacement increases the risk of severe mental health problems and domestic violence. However, these risks may be offset by protective factors, such as positive coping strategies, being surrounded by caring and supportive peers, and having access to strong justice mechanisms and psychosocial support programs (Inter-Agency Standing Committee (IASC) (2007).

The framework for this evaluation follows the Living Peace methodology's theory of change, which is based on the ecological approach to the problem of violence at individual, family, community, and societal levels, as developed by the World Health Organization (2005) and adapted from Bronfenbrenner's model (Bronfenbrenner, 2005). In this framework, behavior is defined on three ecological levels:

- The micro/individual level, referring to individual characteristics;
- The exo level, referring to relationships, family, and other social networks and institutions;
- The macro level, referring to societal factors like culture, gender notions, and (judicial) structures.

The Living Peace intervention occurs at the individual and group levels and aims to reduce the use of violence by men and to mobilize change at the family and community levels. The approach builds on the findings of past studies, which have shown that interventions posited at the individual level can shape long-term collective and social processes of peace-building within families as well as wider social change, including community norm change (Hamber, Gallagher, & Ventevogel, 2014).

To assess the long-term impact of the Living Peace intervention, the researchers looked at three questions:

(1) Do former participants show behavior and attitude changes toward intimate partner violence and gender relations at the individual level?

(2) Are those changes visible in interpersonal relations with partners and relatives?

(3) Have the personal and interpersonal changes had impacts at the community level?

According to this theoretical framework, the beneficiaries, at the individual level, are the men who directly participate in the groups and their partners. Within the context of structural gender inequality, the effects of conflict-related trauma on men and the gendered norms that inform men's ability to cope with trauma are considered to be additional contributing factors to violent relationships and the use of IPV (Slegh, Barker, & Levtov, 2014). Consequently, the study hypothesizes that focusing on individual men's psychosocial well-being and coping mechanisms, through a group-therapy approach, combined with community outreach, can break cycles of IPV, encourage greater social cohesion, and motivate men to start joint income-generation activities that help to reduce economic stress.

## Research Team

The research team consisted of two female international (European) researchers, one local field coordinator, and a team of six Congolese interviewers: four males and two females. The key researchers – the co-designer of the Living Peace methodology and an external research consultant – worked closely with a local team of experts in designing the impact evaluation study. To minimize the risk of positive bias, the external researcher led the analysis and the other researcher verified the analysis and findings.



The four Congolese male interviewers were externally recruited and had not been involved previously in the activities of the Living Peace intervention. The two female Congolese interviewers were trainers/researchers from the Living Peace Institute and in that sense not fully impartial. To reduce the risk of bias, they only conducted interviews with women they had never met before who did not know of their connection to the Living Peace Institute.

In the individual interviews, Congolese male interviewers conducted interviews with men and female interviewers conducted interviews with women. The focus group discussions were facilitated by one pair of male interviewers and two mixed pairs of male and female interviewers.

The research was implemented in collaboration with the Living Peace Institute and Institut Supérieur du Lac in eastern DRC, with technical assistance and project coordination provided by Promundo-US.

## Research Design

The study design was developed by the international research team, in conjunction with a local group of Congolese researchers with extensive experience in implementing research in DRC, as well as experts on the Living Peace methodology.

The external research consultant conducted four stakeholder interviews in preparation for workshops with the full research team. The full research team (i.e., two key researchers, the field research coordinator, and local experts) participated in three workshops. The first workshop was organized to develop an interview guide for focus group discussions. Based on the preliminary findings of the focus groups, another interview guide was developed at a second workshop. At the third workshop, the team analyzed the findings of the second round of data collection.

**Table 1:** Elements of the impact evaluation study

Timing	Interview Tools	Sites	Samples
Preparation: January 2016	4 stakeholder interviews	Goma	2 former facilitators 2 former participant couples
First round: February 2016	15 focus group discussions 7 family interviews	Luvungi and Goma	Participants Wives Family members Community/neighbors
Second round: April 2016	32 individual in-depth interviews (including 2 home visits)	Luvungi and Goma	Participants Wives Family members Community/neighbors

Several interview tools – including a triangulation of various theoretical perspectives and study populations, and more than one interview technique – were employed, and different types of respondents were approached in order to obtain a nuanced and contextualized understanding of the lived realities of the research participants. This allowed the research team to explore in greater depth the dynamics and reasons for the research participants' behaviors and behavior changes since the end of the intervention.

In the preparation phase, four formative interviews with experts and former facilitators of the pilot intervention were used to develop a general topic list for the first round of data collection, which featured focus group discussions. The objective of the focus groups was to gather information on present circumstances and perceptions, including: (1) How are participants and their families coping with stress and challenges in current life?; (2) What are the prevailing perceptions of male identity, gender relations, and social relations?; (3) What are the current practices and norms around gender relations in the home?; and (4) What is men's role in family well-being and income generation?

The focus group discussions did not directly ask about personal experiences of IPV, SGBV, or the former Living Peace groups, but rather assessed the daily lives and behaviors of former participants, their spouses, and their relatives. The neighbors/community members were also asked if they had observed any changes in the homes of the former participants related to the discussed topics, and if this had any influence on their own lives and families.

The second round in the research included individual in-depth interviews with a selected number of former participants and their spouses, relatives, neighbors, or friends. Based on the findings from the first round, the in-depth interviews focused on individual stories to explore motivations and dynamics that explained changed behaviors, obstacles to change, or relapses into violent behaviors during the recent years. The interviews also covered current practices in gender relations, perceptions of SGBV, and stigmatization of women who had been raped.

Given the exploratory nature of this study in examining the long-lasting effects of participation in the Living Peace groups, the research team avoided formulating hypotheses and chose instead to base its analysis framework on grounded theory. Contrary to traditional social science research that begins with a hypothesis, grounded theory methodology operates with data collection as its first step (Strauss & Corbin, 1994).

## Research Sample

The research sample was composed of male former participants of the Living Peace groups from the 2013 pilot. As previously mentioned, the vast majority of former participants of pilot groups had spouses who had experienced rape and/or IPV at home. A multi-stage sample procedure was applied for the selection of the research sample in the first round of data collection (conducted between the end of January and the beginning of March 2016) and the second round (April 2016), as described below.

To enable insight into the possible radiating, preventive effect of Living Peace on IPV, the research sample also included the participants' wives, grown children, relatives, neighbors, and key figures in the community.

### Sampling for the first round of data collection

The selection of research participants for the first round of data was done in three steps: (1) identification of former participants through former facilitators and community leaders; (2) informational meetings about the research; and (3) target sampling by local focal points (NGO staff and community social workers) of couples who were known as "problematic," meaning that they faced family conflict. Since not all couples were still living in the same zones, the first selection was at random and convenient – that is, those who were not found were excluded from the research sample. To avoid only well-functioning couples being interviewed, former facilitators and focal points such as pastors and community leaders helped to identify couples who were experiencing relationship problems.

Qualitative data collection in this first round consisted of focus group discussions with males who participated in the Living Peace groups in 2013, their wives, family members, and others community members such as neighbors, friends and colleagues.

As summarized in the table below, the interviews were conducted in Goma (North Kivu) with soldiers and

civilians and in Luvungi (South Kivu) with civilians only. The team carried out 15 focus group discussions with former participants, their wives, or people around them. In addition, the team held seven discussions with smaller family groups (each with three family members). In the first round, 155 respondents in total participated in focus group discussions about their experiences and views.

**Table 2:** Round one: Focus group discussions

<b>GOMA</b>		
<b>Tool</b>	<b>Kind of participants</b>	<b>Number of respondents</b>
1 FGD	Former participants of Living Peace groups (soldiers)	10
1 FGD	Former participants of Living Peace groups (civilians)	10
1 FGD	Wives of former participants (soldiers)	10
1 FGD	Wives of former participants (civilians)	9
2 FGDs	Family members in a mixed group of civilians and soldiers; 6 participants in each group	12
7 family group interviews	Family members of the former participants; 3 participants in each group	21
1 FGD	Friends, neighbors, or colleagues of former participants in a mixed group of civilians and soldiers	7
<b>Total respondents in Goma, Round 1:</b>		<b>79</b>
<b>LUVUNGI</b>		
<b>Tool</b>	<b>Kind of participants (only civilians)</b>	<b>Number of respondents</b>
2 FGDs	Former participants of Living Peace groups; 10 participants in each group	20
2 FGDs	Wives of former participants	18
2 FGDs	Family members of former participants	19
2 FGDs	Friends, neighbors, or colleagues of former participants	19
<b>Total respondents in Luvungi, Round 1:</b>		<b>76</b>

## Sampling for second round of data collection

After having analyzed the transcripts of the first round of data collection, a two-day workshop with the local researchers was conducted. Preliminary findings were discussed and new topics were formulated in order to examine dynamics of change or lack of change more closely. A selection of participants was made based on reports of positive change or indicators (from women or men) of problems at home, such as alcohol abuse or IPV.

The second round of research sought to explore the preliminary findings more deeply and seek empirical support for the research questions formulated in the study.

As demonstrated below, in Table 3, family members of former participants were interviewed. All interviews were individual, with men and women seen separately. Additionally, the researchers paid two home visits to couples participating in the study as a way to see and better understand how the family members communicate and live together.

**Table 3:** Round two: In-depth individual interviews

<b>GOMA</b>		
<b>Tool</b>	<b>Kind of participants</b>	<b>Number of respondents</b>
Individual interviews	Former participants (civilians) and their wives (4 men and 4 women)	8
Individual interviews	Neighbors, family members, or friends of one of the 4 couples	2 (females)
Individual interviews	Former participants (soldiers) and their wives (4 men and 4 women)	8
Individual interviews	Neighbors, family members, or friends of one of the 4 couples	6 (females)
Home visit	Former participant (soldier) and his family	1
<b>Total respondents in Goma, Round 2:</b>		<b>25</b>
<b>LUVUNGI</b>		
<b>Tool</b>	<b>Kind of participants (only civilians)</b>	<b>Number of respondents</b>
Individual interviews	Former participants and their wives (4 men and 4 women)	8
Individual interviews	Neighbors, family members, or friends of one of the 4 couples	2 (females)
Home visit	Former participant and his family	1
<b>Total respondents in Luvungi, Round 2:</b>		<b>11</b>

## Data Analysis

In order to allow a constant comparative interplay between analysis and data collection, a “theoretical sampling” method (Glaser & Strauss, 2006) was used: the findings were confirmed, sharpened, or corrected in interviews with new respondents, and the theoretical frames and hypotheses were constantly tested against the findings. This approach characterized the entire fieldwork process, in which the interviewers and focus group discussion facilitators worked in close cooperation with the key researchers and the research coordinator throughout the fieldwork period, as well as in an ad hoc workshop between the first and second round of data collection.

The two lead researchers used a mixed approach in analyzing the collected data, with one researcher doing manual analysis and the other using the qualitative data analysis software ATLAS.ti. Both researchers aimed to identify patterns and themes extracted from the respondents’ viewpoints, experiences, beliefs, and perceptions. In the workshops, the research team reflected on identified codes, combined codes, and examined links between and within themes. The research team reviewed and agreed on the findings and themes.

## Ethical Considerations

All appropriate ethical procedures – confidentiality, informed consent, anonymity, and “do no harm” principles – were followed throughout data collection, in accordance with World Health Organization requirements for carrying out research on IPV. Ethical approval was obtained from the Institut Supérieur du Lac in Goma, provided through the ethical commission of universities in DRC.

All of the former Living Peace participants in this study gave informed consent as well as permission to interview their wives, family members, neighbors, friends, or colleagues, who in turn also agreed to participate in the research. One couple constituted the only exception: the wife refused to participate due to serious problems related to alcohol abuse by her husband.

The couple was referred to the counseling team at the Living Peace Institute, where they got further assistance.

To protect the confidentiality of participants, the researchers signed an agreement on confidentiality and data management procedures. The researchers explained to all respondents that the researcher would not share any information to others apart from the key researchers’ team and that their real names and identities would be made anonymous in all reports.

The data were delivered to the local research coordinator in the office of the Living Peace Institute and researchers worked on their transcription reports in the office. The researchers asked participants in the FGD for oral agreement not to share information that was disclosed in the FGD to others outside the group. In all individual interviews, the researchers explained that if the participant disclosed experiences – for example, of war-related rape – to the interviewer that the participant had never discussed with their partner before, the participant should not feel obliged to subsequently do so.

### “Do no harm” principles

In compliance with “do no harm” principles, focus group discussion participants were not asked about personal experiences with SGBV. Rather, they were asked about attitudes and opinions related to SGBV, including behaviors of men toward women, men’s role in family and community, and coping strategies. Before every individual interview, it was explained to all participants that the interview was not necessary/required, nor was it necessary to answer any of the questions. Research participants in need of psychosocial support were offered the opportunity to be referred to counselors/psychologists or former facilitators of the Living Peace pilot intervention.<sup>2</sup>

It should be noted that most research participants – especially the former male participants and their spouses – understood the importance of confidentiality very well, and were open in talking about SGBV and related topics, likely because they were accustomed to doing so in the pilot Living Peace groups in 2013.

2. After the research, six couples, in total, asked for additional psychosocial support from the counseling team of the Living Peace Institute. Of these twelve individuals, two persons with severe mental health problems were referred to the psychiatric hospital in Goma. In addition, two couples who are based in Luvungi and who lack financial means and access to mental health services there, engage in weekly phone calls with a counselor, but more specialized support is needed. One of these couples needs specialized mental health support.

## A. VALIDITY OF STUDY DESIGN

This study on the impact of the Living Peace pilot intervention on sustainable change and IPV prevention was carried out in close collaboration with the Institut Supérieur du Lac, which implemented the pilot groups in 2013, and the Living Peace Institute, the Congolese NGO that has implemented the Living Peace methodology in North and South Kivu since 2015.

The close collaboration enabled the researchers to gain access to former participants and obtain the cooperation of community leaders in identifying as many former participants and their families as possible. Moreover, experts who have been involved in the development of the method since 2013 were able to assist the research team in developing questions based on their observations from their years of working with the Living Peace methodology.

## B. MITIGATING BIAS

Concern about bias in information gathering was taken very seriously, and steps were taken to mitigate the risks to objectivity in the research. Although the research was carried out in collaboration with the Living Peace Institute, which now implements the Living Peace program, it is important to note that the majority of researchers were externally recruited in order to minimize bias in sampling, data collection, and analysis. Measures were taken to ensure that selected families were unknown to their interviewers and vice versa. Researchers selected an equal number of couples who had been identified by focal points as experiencing positive change and couples experiencing problems (namely family violence or conflict). Furthermore, the two lead researchers carried out the analysis by using different methods, while the external key research consultant led the analysis process. Findings were verified in collaboration with the entire research team.

## Limitations of the Study

Despite the research team's efforts, it was not possible to achieve a completely random selection of study participants, because some of the former Living Peace participants had left the area or had changed telephone numbers since the intervention in 2013. These may be the couples most at risk of continuing

family conflict, but researchers had no way of contacting them. Another major limitation was the lack of a control group. There is also the chance that the focus group discussions themselves had a positive impact on participants, such that even if they reported problems (violence) at home, they perceived the interviews and the focus groups to be supportive spaces and may have over-emphasized the "positive" change they perceived, regardless of its cause. The authors, however, tried to compensate for that by interviewing participants' partners and other individuals, as well, to see if their information was in line with the information the former participants provided.

Other challenges were related to translation, as the research instruments were translated from English to French to Swahili, and the findings were translated in the opposite direction. To minimize possible mistakes, a team member fluent in both Swahili and French controlled the French-Swahili transcriptions, and the researcher fluent in French and English ensured that the quotes and interpretations in this English language report did not deviate from the French transcriptions.

Although the research team interviewed an extensive group of people, in such qualitative research it is not possible to generalize the finding to the whole group. The qualitative findings can be used, however, to inform the design of a larger quantitative impact evaluation study (with a control group).

Finally, it should be noted that former participants and their families were eager to participate in this study, because they viewed it as a follow up of the 2013 Living Peace intervention. This may have influenced the findings in the second round of research; some participants reported improvement of their situation from what they reported in the first round of data collection, suggesting, as previously noted, that the focus group discussions were perceived as supportive and that, as a result, participants may have particularly emphasized the positive when they shared their experiences with the groups.

Additionally, as explained previously, one of the key researchers was involved in previous studies and in the design of the Living Peace methodology, which could have had biased effects in two ways: that researcher may have evaluated the data as more positive or been more critical of the findings to avoid positive bias. The role of the independent key researcher as leader of the analytic process served to minimize those effects.

# 4

## Findings

# 4.

## Findings

### Sample Characteristics

Most of the former Living Peace participants and their wives are civilians. In the focus group discussions, however, one group included 10 military men and one group included their wives. The groups of relatives were composed of brothers, sisters, sisters-in-law, children of the former participants above age 18, uncles, aunts, or cousins. The neighbor/friend groups consisted of neighbors, friends, and people of status in the community, such as pastors or community leaders.

Participants for the individual in-depth interviews were selected from the focus group discussions with former participants. For each former participant, the wife, relatives, and neighbors/friends were interviewed separately. Interviews were conducted with 12 former par-

ticipants and 12 wives; of these couples, three involved military members. Additionally, seven small family group discussions were conducted, each composed of three relatives from one family. Also, two in-depth interviews were conducted with two family members and four in-depth interviews with neighbors/friends (see Annex 1).

More than half (23) of the male participants lived with a partner, and only 14 were legally married. Three men had polygamous marriages; the others were each married to one wife. The average age of the male participants was 44 years. The average age of the wives of former participants was 33 years among civilians and 27.5 years among military wives. Most female participants had experienced conflict-related rape: 33 civilians and seven military wives were raped. All participants had children; the average was four to five children per couple.

### Research Question 1: What are the lasting effects of the Living Peace intervention on male participants?

All respondents said that participation in the Living Peace groups caused some changes in the behavior, attitudes, or family dynamics of the former participants and their intimate partner relationships. In almost all cases the changes were noteworthy – as shown in the examples below. In particular, the reduction of alcohol and/or substance abuse was found to be a key factor in positive change.

#### A. ALCOHOL AND SUBSTANCE ABUSE

Reduction of alcohol and substance abuse is a major factor in the sustainability of behavior change among

former participants of the Living Peace groups. Before the group intervention, almost all participants reportedly consumed alcohol excessively – mostly beer, a locally brewed alcohol called Kanyanga, or other strong drinks with an alcohol content up to 42 percent. However, three years after the intervention, most participants said they had reduced alcohol consumption dramatically, with the greatest number having stopped completely or drinking no more than two bottles of beer per day.

Among men who have not completely stopped consuming alcohol, several say they have started buying



bottles of beer in shops instead of drinking locally brewed alcohol. According to these respondents, they feel physically better as bottled beer has a lower alcohol content and it costs more, which forces them to drink – and thus spend – less. A neighbor of a former participant in Luvungi reported:

*“He is healthier and, psychologically, he is no longer nervous. Yes, he drinks, but socially. Now he has time to talk with his family; now he is visiting neighbors ... and he returns home early.”*

### Violent behavior and alcohol

All respondents make the connection between being drunk and engaging in violent behavior, stating that, since they ended their alcohol abuse, they are no longer violent. Emanuel, a former Living Peace participant, reported many positive changes:

*“The value I found in the abandonment of alcohol is that it leads to stability in the home...I return home in time, and many issues have been improved in my home. Since I stopped drinking, we manage to save money and are emotionally and psychologically more stable.”*

In a separate interview, Emanuel’s wife confirmed the perceived change:

*“He became a good man. Before, he lost himself in alcohol, which made him become aggressive in his drunkenness. Now, this is not the case anymore; everything is good, and I am happy to see that my husband has changed.”*

On a similar note, the mother of Theophile, a former Living Peace participant from Goma, described the change she had noticed in her son since the intervention:

*“Our son was very aggressive toward his wife and children. I tried to convince him to stop with the alcohol, because his wife and children were really in a terrible position, without clothes and food, because he wasted all his earnings on alcohol. However, during these two years, we found a complete change in his way of life within the family; his wife does not complain to me anymore about his habits and his children are well-supervised and at school.”*

### Supportive elements for behavior change

Some men tried to avoid relapsing into alcohol abuse by turning to religion, as Theoneste, a former participant from Luvungi, explained:

*“Before, I made alcohol a priority in all my affairs... But now, as I was taught by Promundo,<sup>3</sup> little by little I began to decline, and now I don’t drink alcohol anymore, and I have become Evangelist.”*

Some men found that the improvements in personal and community relationships that they experienced as a result of abstaining from alcohol abuse were motivating factors in continuing to resist alcohol. Several respondents reported that abstaining from drinking brought back love and respect at home and in the community, and this motivated them to resist the desire to return to drinking. Alphonso cited the positive effects on his physical and psychological well-being as reasons he abstains from alcohol:

*“Before, I had no feet on the ground anymore: I was vomiting, I lost my appetite, and I was beating my wife, and I even refused the food my wife prepared for me. I terrorized my children and they feared for me, and I had conflicts with everybody. Since I stopped drinking, we have been able to buy some land, we have peace at home, and we are doing very well.”*

3. Many of the respondents spontaneously called the groups “Promundo groups,” or simply “Promundo,” because the pilot-intervention was coordinated by Promundo. The project was presented by implementing partners as new, and it was tested in DRC with coordination from Promundo together with community-based organizations. However, participants found it easier to say “Promundo” than “Kikundi Cha Uponyaji Ya Wa Baba” (“Healing Groups for Men” in Swahili). Promundo staff and colleagues neither started nor encouraged this practice, and Promundo supported the creation of a separate NGO, the Living Peace Institute, precisely so that the program would be rightfully seen as local. Nonetheless, the practice by participants’ wives of using Promundo’s name to remind their husbands to continue showing respect, and not to use violence, is an indicator of the ongoing impact of the groups on the men and women.

Alphonso's wife, Eline, a focus group discussion participant, confirmed the change has been positive:

*"It is very hard for an alcoholic to stop drinking after so many years, but, in general, I can say that we are doing much better."*

## Relapses

Despite the overall reduction in alcohol abuse among participants, a few respondents described relapses in times of difficulty when they fell back into old habits. Patrick, a former participant in Luvungi, admitted that though he drinks less now, he still has moments when he drinks too much:

*"I can have some setbacks in drinking and then I scream at my children. This is bad, and I agree with my wife that I should stop completely, and should not have even one bottle anymore."*

In most cases, the men only relapsed temporarily. Most men who experience relapses manage to stop drinking again with help from their wives or former Living Peace group members. Men often attributed their relapses to daily stressors, such as extreme poverty. In addition, some men found that the end of the Living Peace intervention and a lack of support from family or spouses for their changed behavior presented problems, and a few men were seriously addicted to alcohol. But, almost all men expressed regret and shame for having lost control and for becoming dependent on alcohol.

Men cited unemployment as a source of shame and stress, and a cause of relapse. Unemployment was cited not only as a source of financial problems, but also of shame at a man's inability to fulfill the male role of income provider, as defined in the highly patriarchal context of DRC. These feelings at times contributed to alcohol abuse, and show the depth of ingrained gender norms, as they shape identities and responses to the shame and stress experienced when a man is not able to meet the social expectations of manhood. In former Living Peace participant Anicet's words:

*"During 2014 and until March 2015, I had a little relapse in alcohol intake... Sometimes this*

*was due to lack of money in my pocket, which couldn't meet the needs of the house. You know, sometimes it is difficult if that happens; if only your wife brings money to our home and me."*

Three women, who indicated that their partners have had many relapses, affirmed during a focus group discussion that they are "very dissatisfied" with their husbands for the way they spend money on alcohol and take no responsibility for children and family. Their testimonies show how alcohol abuse can not only create dissatisfaction but also foster mistrust within a couple – both in terms of the way money is handled and in regard to fidelity.

One of the women stated that since her husband began drinking again, she has refused to have sex with him. Even though her refusal is a source of conflict at home, with her husband accusing her of having a lover, she has been resolute in refusing sex when he is drunk. She said that she feels stronger in no longer accepting his harmful behaviors.

Other women likewise indicated that they feel more confident in setting limits to their husbands' bad behavior, without fearing violence. Even the couples who are still facing problems related to the husband's drinking behavior reported that, since participating in the Living Peace groups, the husbands no longer use physical or sexual violence.

In general, the authors found that changed behaviors around alcohol intake – particularly reducing consumption or stopping altogether – is a significant contributing factor to social, psychological, and economic improvements in families. Relapses are often linked to existing and new stress factors. However, most men and families reported no relapses, and in all cases where they did, the men appeared, nevertheless, to continue being less violent or nonviolent with their partners.

## B. CONFLICT MANAGEMENT

Since participating in the Living Peace groups in 2013, the majority of former participants have experienced negative life events, such as the loss of loved ones, serious health issues in the family, robbery, harvest failures, and imprisonment. Before participating in the intervention groups, similar problems had been sources

of violent conflict with their wives, relatives, or neighbors. Many men went to bars to drink with friends as a way to escape problems at home and to cope with poverty, unemployment, and frustration about their perceived failure to be a “real man” and provide for their family. In the interviews, each of the men reflected on their past violence toward their spouses and other community members, describing themselves as “animals” or very bad people who do not deserve respect from the community.

The former participants reported improved conflict-management and communication skills through the Living Peace groups: they said they now communicate better, take responsibility, and try to mediate conflicts among others. They listen to other people’s perspectives and are able to see how they contribute to a conflict. The former participants reported that they are now better able to control their emotions and take responsibility for their actions. Most former Living Peace participants have stopped being violent toward their partners, even when they feel provoked.

### From violent to nonviolent behavior

In interviews, all former participants stated that they have stopped using violence against their partners and children, though a few admitted that it has happened once or twice over the last three years. Most wives of former participants confirmed that when conflicts or disagreements arise between the couple, the husband does not become physically violent, even when he feels provoked. In contrast, before participating in the Living Peace groups, most of the men did become violent in similar situations. One wife of a former participant and military member described her husband’s behavior:

*“When my husband feels provoked or attacked by me – this can happen between a couple – he might shout badly at me, but without touching me. Instead, he will leave the house, in daytime, and at night he will go to bed and fall asleep, even when it is early, like 19 hours.”*

This behavior is consistent with reports from other respondents, including wives. Many men seem to manage their emotions at home by leaving the house for

a walk to reflect on what is going on or by going to a friend or neighbor’s home for a chat or support. This represents an important change in the way they deal with emotions: the men take time to reflect rather than react immediately, and they are willing to listen and discuss the situation at a later time. One former participant said in a focus group discussion that he uses this approach:

*“I handle my problems by involving my wife calmly, leaning on our wisdom or asking advice from seniors who have greater life experience and who are practicing the teachings I received from Promundo.”*

Another man in the same group noted his increased self-control:

*“Many times, my wife goes beyond my limits and it bothers me a lot and may drive me to do bad things to her. Sometimes it makes me very uncomfortable; if I had not had Promundo, I would have really hit her.”*

Several women reported helping their husbands cope with stress and avoid using violence by calling out, “Promundo!” when the husband gets angry. In this way they remind their husbands of the intervention’s teachings, helping them keep control of their emotions.

At times, it can still be difficult for some men to control their emotions, as Theophile explained:

*“It is especially the poverty that is at the base of my relapse; because I feel very bad when my children and my wife spend the night hungry because I have no money. Faced with this situation, many times, I get angry at my wife, I intimidate her and force her to shut up and leave me alone... Nevertheless, I try to keep my reaction under control, and when I realize what I am doing... I pick myself up and I do not hesitate to ask for forgiveness... In the period before the male therapy group, I would have taken the money to drink alcohol.”*

## Coping with traumatic experiences

For the most part, male respondents have managed to find new ways of coping with previous trauma:

*“Sometimes I go to bed to avoid hurting others; or I go to my friends with whom I did the men’s therapy group, to talk with them, especially about managing emotions, or I go to church to pray.”*

The change appears largely attributable to the fact that – since the Living Peace intervention – the former participants have come to understand the relationship between their current emotions and their past traumatic experiences. The following quote by a former participant, Boniface, particularly exemplifies this change. He referred to a situation in which he was captured by the Democratic Forces for the Liberation of Rwanda (FDLR, the armed group of former *genocidaires* who fled Rwanda into DRC following the Rwanda genocide and after the Rwandan Patriotic Front assumed control of Rwanda in 1994), threatened with beheading, and forced to have sex with a woman in front of the group, if he wanted to be liberated:

*“I always remembered this situation, and every time it hurts me again, but since the groups I have managed to forget this completely. When somebody hurts these internal wounds now, I am able to re-pack myself and not explode into anger.”*

Interestingly, after male participants disclosed their own traumatic experiences in the groups, they tended not to talk about them anymore, instead trying to forget. However, they are now able to recognize that their emotions around such experiences can lead to violent behaviors, and this self-awareness, in turn, gives them more control. Several men referred to traumatic memories of the rape of their wives – an event that disturbed their sexual and emotional relationships with their spouses, as Patrick explained:

*“Every time I remembered the rape of my wife, I lost my interest in sex and I stopped. But after the groups, I have managed to forget the past, and we sleep together again, have joyful sex, and we are happy.”*

## Mental health and trauma: Little or no change

The story of former participant Anicet and his wife revealed an extremely traumatic past that, to this day, influences their relationship. When he was 16 years old, Anicet witnessed the rape and killing of his mother. Some years later, Anicet raped a 14-year-old girl. The girl had lost all her family and belonged to a different ethnic group than Anicet. When she found out that she was pregnant, she found Anicet in the village and announced to him that she was pregnant and that she had no family to help her. He accepted her as his wife, but since then they have lived a life of violence. Anicet believed he had done well; as he told his wife, *“My mother was raped and killed, but I raped and married you.”*

After the Living Peace groups, the couple was doing much better, and managed to live for a while without violence. At the time of this study, however, Anicet had become violent again. *“We have no full peace at home and sometimes he is asking for sex daily,”* his wife reported. Further interviews disclosed that Anicet feels very insecure and struggles with serious symptoms of anxiety and depression. He said he is afraid of losing control of his anger and killing his wife. (The researcher reported this to the team and the couple now receives psychosocial assistance, via weekly phone call because the couple lives in a remote area where no specialized mental health support is available.)

This case shows that the intervention did not help all of the men cope with serious mental health issues and trauma. Like Anicet and his wife, others also suffer from serious and lasting mental health issues due to multiple traumatic experiences, and do not have all their mental health needs met by Living Peace groups. Anicet’s case shows some positive change shortly after the intervention, but the symptoms of trauma did not permanently disappear. The incidence of men falling back into alcohol abuse may also indicate serious mental health problems. This highlights the need to have better strategies in place for families who experience ongoing mental health needs and who may need more traditional counseling and psychiatric treatment.

## C. ATTITUDES REGARDING GENDER AND IDENTITY

### Gender roles

Benjamin, a former Living Peace participant, identified a change in his awareness of gender relations:

*“The men’s therapy groups have distanced us from our customs and have introduced new good practices to us. According to our custom, my wife is an object, a tool that I use. I did not have to negotiate to have sex, for example, because I bought her; sick or not, she has to give me sex whenever I wanted. The group came to show me that you should always negotiate sex with a woman, and consider her opinion, as well, and not only my wishes.”*

As this quote suggests, before the Living Peace intervention, Benjamin never thought of his wife as a person with her own rights, needs, and wishes. Since the Living Peace groups, Benjamin, as well as other male participants, say they have changed their way of thinking and behaving in terms of their daily relationships with their wives. They say they are supporting their wives with domestic tasks, asking for their wives’ opinions, and discussing their earnings or economic activities. In terms of household power dynamics, the interviews suggest that, rather than feeling a loss of power as a man, male participants experience a gain in well-being. Participants reported a positive sense of increased responsibility, respect, love, happiness, and peace in the home. One husband, Mathieu, explained:

*“My power is still there, I’m always the chief at home, but in a good way, not as I was before. Currently, I am a happy man at home in the house, responsible for my family.”*

Asked what motivated the former participants to give more power to their wives, Mathieu answers:

*“There is peace at home now, we are in perfect harmony; my wife is very happy... I give a rightful place to my wife, that of a good mother to my children, I honor her... I receive the love she shows to me; she is accompanying me... I am motivated by the fact that my children have a*

*better future for their lives and their homes... Currently, ‘I am a man among men.’ My wife and I have a good spirit of working together, with mutual respect.”*

Mathieu’s words were echoed in most interviews with male respondents. All men reported unhappiness associated with their previous role as a “lion” in the family, making their wives and children afraid of them. Moreover, their accounts suggest that the Living Peace groups helped some men to feel more empathy for their wives and children. Through the changed behaviors, they now feel closer and more connected with their partners and children. The harmony, peace, and joy in the house, and the respect former participants now receive from their wives and children, are powerful incentives for sustaining the change in their identity and in their aggressive masculine behavior. Diogene, a soldier and former participant in Goma, said he now feels like a role model:

*“After my change, for the first time I felt proud, because I saw myself as a model for my family and my neighborhood. I feel more responsible in my family. I am respecting the rights of my wife and children. I am working together with my wife to run the family, to show her what I earn with my activities, and we decide together how to spend the money.”*

Not all changes were easy for the men. Some men felt ashamed when they started to change their sexual relationship with their wives by paying attention to their partners’ wishes and needs. Some had to deal with neighbors or family members who told them that they were “in the bottle,” an expression used to describe a man considered to be under his wife’s control. Despite external judgments, almost all participants started to understand gender roles differently and changed their behavior accordingly, as Patrick, a former Living Peace participant, explained:

*“I know that it is not my wife or witchcraft that changed me: it was the teaching I received that made me change.”*

This change in participants’ understanding of gender roles and norms also impacted the way in which they began treating their daughters after the Living Peace

intervention. All former participants with daughters now allow their daughters to go to school, realizing that girls should be prepared for the future in the same way boys are. A woman in one of this study's focus group discussions explained:

*“He was against the education of girls; now he is saying that there is ‘no difference between girls and boys.’ He now pays for all expenses, and the children thank their dad for his way of being, not only for this but also for his changed behavior, especially that he agrees to eat at the table with them now.”*

### Male identity

During the Living Peace groups, men learn to question notions of what a “real man” is, and reflect on the ways in which their opinions influence their relationships with their wives and children. As a result, they start to realize the connection between violent, selfish behavior and masculinity – they were the head of the household, the boss, and everybody had to adapt to their wishes and orders. Three years after the end of the intervention, the effects of these reflections are still present, as a relative of a former participant described:

*“His behavior was masculine, yes, because he said ‘I’m the head of the house’... That behavior has changed, now his wife, too, can speak and it is included.”*

Most reports reveal that men (and women) still adhere to the patriarchal notion that men are the bosses and hold the power; however, positive changes in gender roles and dynamics are apparent, as Alina, the partner of former participant Theoneste, said:

*“His male identity has changed positively, because he has become a responsible man who takes care of his children and wife and has stopped abusive behaviors.”*

## **D. RELATIONSHIPS WITH WIFE AND CHILDREN**

All the men who were able to change expressed their happiness about the changes in family life, mentioning three main factors contributing to the improvement of their relationships: (1) feeling responsible; (2) better communication; and (3) being equals in the couple's sexual relationship.

### Feeling responsible

Many male respondents reported that they now feel responsible, and better able to control their behaviors and be caring toward their wives and children. They reported feeling better able to ensure harmony and peace in the house, and better able to manage their finances since they started to share income with their wife and plan together how to spend money. Such positive changes at home seem to make respondents feel more respected by their wives and children, which in turn reinforces men's motivation to sustain this change. As Pascal, a soldier and former Living Peace participant in Goma, said:

*“My wife is proud of me, and I help her with her projects for the family and it brings us prosperity... We get along fine now, there is good communication in our home and the violence has stopped... We have less distress... I make her happy and my wife flourishes.”*

The taking of responsibility is also reflected in men's decisions regarding their sexual relationships with women other than their wives, with some men deciding to end relationships with other women to focus on their family. Some men in the study, who cohabitated with, but were not formally married to, their partners, decided to get married, saving money to meet the obligations of paying a dowry.<sup>4</sup> Some men who practiced polygamy decided to commit to one woman, after they began to realize that polygamy was a source of conflict.<sup>5</sup> Others stayed with multiple wives, but began to treat them more respectfully, as this focus group discussion participant stated:

4. In this region, a dowry (money or goods paid to the family of the wife) is considered important for the couple because it is an acknowledgement of the marriage for both families. The husband and his family will take responsibility for the wife and daughter-in-law. According to the women, their position is vulnerable as long as the dowry hasn't been paid. At the same time, the dowry can prevent women from leaving an abusive husband, especially when her family should pay back the dowry.

5. The authors have no data on how men ended those relationships, or on what became of those women.

*“I have two wives, and before Promundo, I favored one of the two and I was threatening the other one. It was after Promundo that I understood I had to treat both women equally... Both wives feel valued and healthy now.”*

### **Couple communication and negotiation**

Partner relations changed when men started to communicate with their wives. Together, couples began to discuss plans for the improvement of their family’s well-being, as well as how to spend earnings. When there were disagreements, they had discussions to resolve the problems. During an interview, Emanuel revealed, *“We have a sincere exchange and dialogue, which did not exist between us before.”*

The interviewers asked both the men and women what they do when they feel provoked or when they have serious misunderstandings. Most men and women said that those situations still arise, but do not lead to violence as they did in the past. As previously mentioned, men will leave their houses when facing conflict or when conversations make them angry, in order to avoid resorting to violent behavior. When they return, they have calmed down and are ready to communicate with their wives about the disagreements, as former participant Pascal noted:

*“We talk calmly... We get along fine now, we have good communication in our home. The cycle of violence has stopped... the violence has decreased because there is an agreement between us, a common management.”*

Most participants reported that they now have “peace in the house” – a good relationship, agreement, harmony, mutual respect, and nonviolence. Peace in the house is viewed as “peace in the heart,” a Congolese way of saying that someone has no stress or fears. The expression was used by men and women who also reported that since the husband changed, children and wives are no longer afraid and stressed when the husband comes home. All men who sustained positive change now take time to play with their children, they eat together with the children at the table, and most men expressed having a better relationship and stronger attachments to their children, both boys and girls. Pascal stated that he now enjoys family life more:

*“I was not easy. My children and my wife did not approach me. The children were searching for their mother, and I had quarrels with their mother... but now we no longer have poor management in my home, and we avoid conflicts and quarrels as a result of the program... Now we all enjoy. My children and I are proud of what takes place in our family: my children go to school, my wife is happy, no quarrels, and together we plan something like the purchase of the plot, we get there.”*

### **Sexual relationship dynamics**

The changes in ideas about gender roles also influence sexual relationships. The sexual relationship is important for both husbands and wives. In the Living Peace groups, men learn the meaning of consensual sex; before the intervention, many men were used to having sex whenever they wanted, using force when their partner refused. After the intervention, many couples discovered the pleasure of consensual sex. One woman disclosed how she used to be “taken like a goat” and many other women used similar expressions in explaining how they felt treated like an animal, describing the husband as cruel and comparing him with a lion. All of the accounts of change describe different versions of the way in which the husbands now take time and show care and affection. In fact, all of couples who showed sustained change stated that they communicate about sex and agree not to have sex if the woman does not want to. Men who changed explained the importance of “preparing the wife” for having sex (referring to foreplay and affection), and women confirmed that since the husband started taking time for preparation, they have much more joy and pleasure in their sexual relationship. One man told the interviewers that he and his partner have changed positions when having sex: now the woman is on the top and they experience more joy.

## **E. COPING WITH WAR-RELATED SEXUAL VIOLENCE**

Most women in the sample had experienced war-related sexual and gender-based violence (SGBV); 37 wives experienced war-related rape and 12 women

had a child born from rape. Obviously, those data were gathered from a database of the pilot intervention group, as the participants in the interviews were not directly asked about those experiences.

### Living with wives who experienced conflict-related sexual violence

Stigmatizing and blaming women for being raped is deeply rooted in a culture where men are supposed to be the procreators and protectors of family, honor, and heritage (Kohli et al., 2014). “Losing” a wife to a rapist is traumatizing and perceived as shameful for a man and his family. Several men described how “bad images” and memories troubled their minds when they were having sexual relations with their wives, as former participant Joseph explained:

*“Sometimes when we had sex, I thought of the rapists, and I stopped and said to her, ‘Go to your husbands that have raped you.’”*

Most men said they chased their wives away because they could no longer live with them, or they continued living in the same house but slept in separate beds. Joseph added:

*“Our culture says that you cannot accept a wife who was raped, because she has become a (garbage) bin for men. You should find another wife.”*

The Living Peace groups helped reduce the stigma and rejection of sexually assaulted women and children born out of rape. The groups helped men cope with the traumatic memories and painful feelings through hearing about similar experiences from other men; these conversations reduced feelings of shame and allowed them to move on. As previously described, the disclosure of their problems within the groups helped them “to forget about all that happened,” as one participant in a FGD explained.

Through group participation, all of the men started to realize that they could not blame their wives, and that they had to accept that their wives had been raped. Pascal, a former participant, recalled his growth in understanding:

*“The session about responsibility in the group*

*helped me to realize what I was doing and helped me to accept my wife and the child... In this state of responsibility, I show this child or my wife that I’m on their side to help and protect them.”*

Many men explained that they now understand that rape is a criminal offense beyond the fault of women, as Diogene confirmed:

*“My participation in the group helped me change the perception of women who were victims of sexual violence, because if this happened to my wife, I can easily understand that it has nothing to do with her will; she is innocent. Before the group, this could make me chase her from my house, because I thought that when a woman is raped, it is because she allowed this to happen.”*

All of the men explained that they had changed their opinion about rape and that they have started to accept their wives and their children born out of rape. As Theoneste stated:

*“I understood that if I accept my wife, I also accept the child born of rape, to completely break the violence against women, and that it becomes our child directly.”*

In the research question section, women’s reports confirm and elaborate upon these accounts, describing how their husbands have changed their attitudes toward their children born of rape. All of the male participants reported accepting the children born of rape as their own.

### **F. COPING WITH ECONOMIC CHALLENGES AND UNPAID CARE WORK**

The changed gender relations had positive effects on families’ economic circumstances, and men became more engaged in household tasks they had previously considered women’s work. Such tasks include cleaning, fetching water, cooking, and washing clothes, as well as cultivating in the field, as is discussed in the following section.

This more collaborative approach was also reflected in the way couples now address economic challenges



First, the significant reductions in alcohol abuse had an immediate effect on couples' ability to save money. The vast majority of men reported that they now share their income with their wives. Some men put full financial management into the hands of their wives, believing that the woman's control of the money helps them abstain from spending money on alcohol. The couples reportedly make spending decisions together, and collaboratively plan ways to improve the family's well-being. Former Living Peace participant Theophile recounted the change:

*"Before the group, I had no time to think about economic aspects because everything I earned in my little job I used for alcohol. Before the group, I sold my plot in Kitshanga without telling my wife, and I wasted all the money from this sale. When she learned later, she was very angry and, in reply, I greatly insulted and intimidated her to make her calm down and leave me alone. But now I regret all this. Because after Promundo, I make all the major decisions in collaboration with my wife, for the interest of my family. Over these three years that we have made common decisions, I have noticed that it has been a great advantage because we bought a plot and a large field in the village."*

In general, men reported that their economic situation improved significantly as a result of the Living Peace groups.

The trust engendered between former participants by the groups enabled men to collaborate in economic activities with other men in the community, contributing to family income. Several men started a savings club together, after the Living Peace intervention had stopped. In those groups, they saved some money each week that could be used to make bigger investments.

Though the economic situation of most families in the study improved, poverty is still a major issue. Most couples indicated that, despite these problems, the husband continued to be supportive of the family. However, for a few men, it is still challenging when the wife becomes the main income provider. A participant in a focus group discussion expressed this struggle:

*"I lost my small business that allowed me to meet the family's needs. Fortunately, my wife has a small income through various trades, which generate some means of survival. Unfortunately, this way, she tends to dominate me, but still I try to support..."*

## Research Question 2: What are the lasting effects perceived by participants' wives, children, and family members?

In this section, the research explores the ways in which the men's positive changes are reflected in women's perceptions of their husbands' changed behaviors, and the effects of these on their own lives. Subsequently, experiences of women who reported relapses of the husband after the groups are addressed.

### A. EFFECT ON THE WIVES

There were 38 women in the focus group discussions, all partners of former Living Peace participants. Key findings from discussions with these women include:

- 12 women said that they were very happy with the changes and could not think of anything that their husband could improve.
- 16 women said that their husband had improved significantly and is still in the process of changing in a positive way, and that they hope the improvements will continue.
- 10 women said that, against their wishes, their husband still drinks too much and does not share all the earned money with them, but that, despite this, things have improved at home since his participation in the Living Peace groups.

### B. REDUCING VIOLENCE

The effects of men's participation in the Living Peace groups are apparent in women's reports of their own psychosocial, mental, and physical well-being. Women who reported positive change said that they experience less stress and feel healthier and happier, as well as respected, acknowledged, loved, and supported by their husbands. The wife of former participant Boniface said:

*"He also supports me with fetching water, washing the children; he accompanies me to the field. This makes me proud and I feel tranquil, honored, peace, joy, and love for him, and also for other people because I am happy."*

She continued, explaining how his changed attitude contributes to access to health care for her:

*"My husband supports me now, he accepts my opinions and ideas. I proposed going to see a gynecologist in the hospital because I had two spontaneous abortions last year. Before the groups, he would have rejected me and he would have blamed me for not getting pregnant. Now, he supports me and will accompany me to the hospital in July."*

Wives of soldiers reported that they are happy with the change in their husbands, highlighting the importance of changes in themselves, too. One woman stated:

*"The changes of the men in the camp have infected the women... Most women of soldiers who participated in group therapy have also learned to change."*

Some of the wives of the former participants said that they, too, have reduced or stopped their alcohol intake. A neighbor recalled:

*"In that family, the husband and wife, both were slaves to alcohol... they were fighting day and night, but now all that has changed, especially in terms of alcohol consumption."*

### Higher self-esteem

All of the women who reported changes in their partner

relations reported feeling more respected and valued by their partners, and as a result feeling greater self-esteem as women. Mary, Pascal's wife, said:

*"I feel now that I am a real woman in the house. He values me, he respects me, he includes me in all decisions, he is even buying clothes for me."*

Some of the women have come to realize that they are better than their male partners at planning economic activities and now discuss their ideas with their husband. Many women reported that they like to invite visitors into their house now, because they feel self-assured and happy to show the house is at peace.

Among the ten women whose husbands reportedly still relapse, most are very outspoken about their dissatisfaction. Some women accuse their husband of being a "bad" person, the "enemy," or "a drunkard," while others express more understanding for these relapses, saying things like, "he lost work and income," "men will always be unfaithful," and "it is hard to change men's alcohol problems."

### Free of violence and feeling safe

All of the women reported that intimate partner violence drastically decreased after the Living Peace groups. In most families, sexual and physical violence stopped completely. Even in the cases where the husbands continue to drink to excess, the women reported that there is no longer any physical violence or forced sexual relations. Three women in FGDs in Goma, who reported that their husbands still spend all the money on alcohol, now show more autonomy in refusing sex when he is drunk:

*"He now accepts this and goes to sleep quietly."*

*"He comes home and is not asking for sex anymore; he knows how to resist his desire now."*

*"Despite the problems at the moment, we only have consensual sex and he never forces me anymore."*

The end of violence, the women reported, makes the home safe and helps women feel secure and happy.

Louise, former participant Emanuel's wife, said that before the groups, her life was a nightmare. She was excluded from all decisions and she was often forced to have sex:

*"Although it may happen that I provoke him, he remains calm, he cannot beat me anymore, as for nine years he had done... If there is a crisis I am not afraid anymore."*

The narratives of most female respondents reported that conflict in couples still happens, but the biggest change is that it no longer ends in violence. Additionally, women like Louise feel more safe and secure and are not afraid to disagree with their partner.

All of the women interviewed reported cruel or abusive experiences in their sexual relationship with their husband before he participated in the Living Peace groups. The women said that now, however, they communicate with their partners, negotiate the sexual relationship, and create intimacy and joy. As Patrick's wife, Charlotte, noted: *"Now we speak before we have sex, we prepare each other, and it goes well."*

### Less nervous and agitated

Women whose partners are soldiers reported that they, themselves, also used to consume too much alcohol and act violently (often verbally) against their children and husband, but that they have since changed and, like the men, find that less alcohol means less violence. Likewise, civilian women referred frequently to feeling less nervous and tense. Maria, for example, said she feels more "flexible and calm" in dealing with issues at home. This has physical as well as emotional benefits: women are gaining weight (gaining weight is seen as an indicator of having enough food, but also, locally, refers to doing well, physically and mentally) and one woman reported that she has not been in the hospital for heart problems or hypertension since 2013.

### Love and happiness with husband

The wives of the changed former participants said that sexual relations are more enjoyable, and some

reported that this reinforces love and affection in their partner relationship and in their homes. Many women said that their husbands are no longer using force, and that now they enjoy the pleasure of mutual consent, of taking time to prepare, and of being nice and gentle. One woman said that she does not refuse sex with her husband anymore because then she would not get the pleasure. Obviously, traditional gender relations did not fully disappear, as illustrated by the remark of a woman in the FGD who saw it as a positive effect that having good sex made her husband more generous in sharing his income:

*“When we have good sex, the next morning he shares with me whatever he has in his pocket.”*

Louise said that she now loves her husband and that they have a good relationship:

*“A good relationship means agreement, harmony, mutual respect... We love each other, people say that he has become soft, polished, respectful, and I love it.”*

Women also highlighted the positive effects on their social life. One woman in a FGD reported:

*“My husband and I are now going together to weddings, parties, and church.”*

Another joked:

*“We go everywhere together now, except the toilet; people now say that we are twins.”*

All of the participants who reported these changes – men and women – said that they like and love each other more and show each other more affection, including in front of their children. Couples reported having learned to communicate and discuss problems, something they said that they did not do before the participation in the Living Peace groups.

### Peace and harmony at home

The improvements clearly contribute to peace and harmony at home, with the children, and with other family members. The positive engagement of men with their children is greatly appreciated by women,

like Louise, who reported that the children are happier with their father involved:

*“I am happy. I see that he regularly brings little presents for the children, little things that make them cheerful and happy, too. Now I sleep peacefully, without quarrels. I have become healthier and neighbors do not hear quarrels anymore.”*

“Having peace at home” is the answer given by the most women when asked how the groups have affected their lives. Alina described the meaning of “peace at home”:

*“There is peace in our home because there is no strife: children study, we have plenty to eat, sometimes when I want to work, he says, ‘Leave it, my darling, leave it to me, I have to do it.’ Then, I feel like I am in paradise. Also, he sometimes brings me sweet drinks and I am very happy. Our sex has become responsible because even when I’m sick or my husband is sick, we understand easily [meaning that refusing sex is no longer a source of couple conflict].”*

## C. EFFECTS OF GENDER EQUALITY

The transformation in ideas about gender roles is most visible in men’s engagement in household tasks and caregiving. Women receive these changes as positive, as they help women manage the many tasks involved in daily life, in a way that acknowledges, as Marie said, “equal rights for women.”

### Shared household tasks: Jointly performing “women’s tasks”

Esperance, the wife of a soldier, said her husband now helps in the house:

*“He bathes the children, he goes to buy or catch water, he prepares the food when I am sick, and now we always eat together: me, my husband, and all children. I am happy with it.”*

Other women, too, reported that their husbands now bathe the children, wash the clothes, and sweep the house. Many husbands are also now reported to join

women in cultivating the field, going to the market, and carrying the bags. The women are happy with and proud of these changes. According to the respondents, this supportive behavior by the former participants has become a lifestyle, suggesting that changes really have been integrated into their lives as ongoing practices.

### Economic effects on women

Collaboration on household tasks has led to positive economic outcomes for women and their families. First, when the husband helps his wife with household tasks, she has more time for income-generation activities. Additionally, women have become more involved in decision-making at home, and in some cases are now the financial managers, which allows them more control over spending and saving. Socioeconomic improvements are most evident in those families in which the husband has stopped abusing alcohol. Gains are also evident where men have started economic activities, contributing significantly more to family income and thus to family well-being. As Aline, wife of Theoneste, explained:

*“What changed in our family is poverty. Because since we have begun cultivating the field together, we produce a lot and we find sufficient means to live: we do not feel the highest levels of poverty, as we did before.”*

In focus group discussions and individual interviews, many couples reported greater ability to make larger investments, such as buying houses or plots of land, in addition to smaller investments, like buying a television or a motorbike. The improved economic situations also enabled payment of children’s school fees, which were previously, for many families, a point of conflict and stress when the husband spent the money on other, trivial things. As previously noted, the positive effects on economic situations are less significant among the ten women who reported their husbands returning to alcohol abuse.

### Changing cultural notions and traditions

After the Living Peace groups, both men and women are able to act outside of cultural norms. Alina, the

wife of Theoneste, explained some of these traditional “rules”:

*“We women, we have to live according to several standards in our culture, such as that the man cannot help his wife in household chores; that you should accept your husband in bed; or that I should give birth to a boy.”*

After the men’s Living Peace participation, the couples are able to discuss and judge these rules, and set them aside if they think they are harmful or meaningless.

Many respondents noted changes in dietary restrictions for women, who are now “eating chicken gizzards.” In the traditional culture of Luvungi, eating chicken gizzards is a privilege reserved for men; when a woman eats this part of the chicken, the belief is that she will become bewitched and may die. Former Living Peace participants said they do not understand the logic of this rule anymore, and the men now share chicken with their wives.

As described previously, women confirm that men have changed their attitudes toward their daughters. They now contribute to their daughters’ school fees and let them go to school.

In spite of these positive changes, deeply rooted perceptions of masculinity continue to define power relations, in which men are supposed to be the head of the family, responsible, and respected by others. In fact, all of the female respondents who were happy with the changed attitudes of their husband confirmed that the changes made him “a better man,” but that he remained “the boss.” Charlotte reported:

*“My husband still has his power and this did not change. He is still the chief, but in a good sense, as even the Bible says that the husband is the chief of the house. My main interest is that I have peace in my heart, and I even find time to gain more weight and improve my beauty, because as a married woman, I should be attractive for my husband... His masculine identity changed positively, because before he was not responsible. He was not respected by his children, not by me, and not by his family, because all people found him a senseless and foolish person. Now all people respect him.”*

Another woman, Mary, said:

*“His masculine identity improved positively. I say and repeat: he always will remain a man, with his responsibilities that I have respected all my life, and I also feel that I have power in our house.”*

#### **D. REDUCTION OF STIGMA TOWARD WAR-RELATED RAPE SURVIVORS**

According to the female respondents, women who had experienced war-related rape, including those who subsequently gave birth to a child, are now re-integrated into their families. Women rape survivors whose husbands participated in the therapy groups all confirmed that their husbands changed their attitudes. Charlotte, who was raped when she was working in the field, said that, while her husband did not reject her, he was always humiliating her, saying, *“Please go to your husbands that raped you.”* After the therapy groups, her husband started to take care of her and accepted her. He joins her now in cultivating the field, and Charlotte said, *“I now feel safe and protected. Since then, we live again as wife and husband, and share the same bed, and we are doing well.”* She added:

*“Since my husband accepted me, I can look at all this as history. But I only share my experiences with other women, to be an example for them. My husband, he even advises other families that experienced rape. And other people in the community, seeing us going to the field together, have begun to join their wives, also, to protect her but also to improve the production of harvest.”*

Women who were raped and bore a child from rape reported that their husbands started to pay for the child’s food, take care of the child, and treat the child like their other children. Alina, Theoneste’s wife, was raped before her husband joined the Living Peace groups. She recalled his change in attitude during the intervention:

*“After he followed the teachings of Promundo, my husband accepted me fully, and here we are now, living well... When I was pregnant with my child from the rape, it became too bad at home. He was shouting very hard at everyone at home, and he was beating us, even his own children for*

*small mistakes, and he did not even look at me or talk to me... nor accept me beside him in the bedroom. Especially when he found that I was pregnant from the rape, it was serious. He chased me from home. When I gave birth to this child, he only looked at her from a distance. He did not touch her or buy clothes for her and did not want her in his house. Not that he hated her, but it did not feel good to him to do these things... It was during the teachings of Promundo that one day he came home and said, ‘My wife, you are a person like me, it happened to you against your will. Starting today, I have decided that I will forget all about this and accept you as my legal wife in everything.’ It is from that night until today that we have taken the mood to live well in our home... He has also accepted his daughter and cares for her in everything.”*

Several women said that their husbands had defended them before other family members, and that, in general, their husbands had started to realize that rape is a serious offense that harms both the woman and the family of the victim. As Charlotte reported:

*“He understands, now, that he cannot blame me for this happening to me, because it was not my will... My husband has become responsible and a model, he cannot accept when someone is stigmatized... Therefore, he advises and regularly educates his teammates NOT to abandon a woman or child.”*

#### **E. EFFECTS ON CHILDREN’S WELL-BEING**

Women highlighted the importance of feeling less worried about their children, and they expressed happiness at seeing their husbands relate to the children in different ways. Many women said that their children are now in a protective environment; they do not need to be scared, or sleep outdoors to protect themselves from their previously violent fathers.

##### **Relationship with their father**

Six children of former participants of the Living Peace groups (all over the age of 18) participated in the first

round of family FGDs. Rebecca is a daughter of one of the former participants. She is 20 years old and experienced domestic violence as a child. She explained how the change in her father has influenced her:

*“I like the atmosphere at home so much. I had to adapt to the change, because dad comes home early, too. I know he has learned not to be too bad, not to get angry from morning to night, to help his wife and children. Before my father went to the group, we did not talk with our dad, we did not eat together, and did not have our rights as daughters. But now, all of this has changed because he has become responsible. He is not a big lion anymore, as we used to call him. Other children, family, and others always ask us, ‘Who is his great teacher? Is this a church? If not, then who is able to transform him so?’ Now, I consider God is with him my whole life, and I will testify about the change to my many friends, wherever I go.”*

In the second round of individual interviews, Aisha (the daughter of Boniface) was interviewed. She is 19 years old and married. She explained the impact on her family since her father changed, after the groups:

*“In our culture, here in Luvungi, a woman who was raped has no value, because the people say that she accepted the rape. Unknown men raped my mother in the field, and after Papa participated in the groups, we saw that he started to accept Mama. Our parents are doing well now as a couple.”*

Aisha explained that she, as eldest daughter, was always in charge of household tasks and care for the smaller children, but after the groups, her father showed that all family members could contribute, the smaller ones and even himself.

Other women described the ways in which their husbands engage differently with the children now. The fathers pay school fees and are more involved in their children’s education. They are also more emotionally engaged and play with them, help them with homework, or watch television with them. The children are no longer afraid of their fathers; they are very happy with the changed role and the increased attention they get. Mary comments on her husband’s changed behavior:

*“The children are very stable now and feel that their father loves and protects them and he has time for them... The children feel that their father is not an animal; he is now their friend.”*

## Gender equality

As mentioned above, the reports of women, men, and children alike reveal that the Living Peace groups helped husbands to become supportive of their daughters’ education. As explained by key informants of the local research team, men tend to invest less money in school fees for girls because the girls will leave the house to live with in-laws at a young age when they marry. The boys will contribute to family income, even after marriage. The willingness of former participants to pay for their daughters’ education and treat them more equally to their sons was mentioned frequently in the data.

One husband said that he had decided that the family’s inheritance, which normally excludes women, would now include his daughters and sisters. Another father is now happy and proud that he has daughters. He stated that before participating in the Living Peace groups, he did not pay attention to his daughters, because he wanted a son and blamed his wife for not given him sons, which he now he regrets.

One daughter of a former participant explained how difficult it was before her father participated in the groups, especially with regard to schooling:

*“He paid the school fees for our brothers, saying that school was only for boys and not for us girls. He said that the place for girls is in the kitchen... Now I am studying at the university, thanks to the teachings of the men’s therapy group.”*

All of the women who had daughters referred to this as a positive change that demonstrates that women are now considered to have rights, including the right to education. In general, women whose husbands changed after the groups reported feeling more equal than they did before.

## Behavior change of children

The positive behavior changes extend to children of

the former participants of the groups. In interviews, children said that, not only have their fathers become role models in the community, but that they now see themselves as examples for others, as well. One child of a participant described the change:

*“We cannot misbehave now, because at home no one has this behavior. We have become models for others. I think my father cannot relapse because he continues to keep his lasting change... I like the atmosphere at home... So I recommend that you teach other dads in Goma how to live the change in everyday life.”*

Sharing food with their fathers, sitting with them at the table, communicating in a nonviolent way, seeing their fathers help their mothers with domestic tasks, and even seeing their fathers kiss their mothers, are all not only extremely important for the children, but also examples that they want to emulate in their own lives.

## F. EFFECTS ON THE EXTENDED FAMILY

### Changing relationships within the extended family

In addition to better relationships with wives and children, former Living Peace group participants said that their position in their extended family improved. Likewise, several of the men’s family members reported that their own relationships with the former participants had improved, as well. Several family members reported that they feel supported by former participants in various ways: emotionally, morally, and, in some cases, financially. In some cases, however, this improvement took considerable time, as not all of the family members appreciated the changes in the men. At first, some family members saw the changes in behavior as the work of “witchcraft” by the wife. However, when they saw that the couple was doing very well, they started to accept that the change came from somewhere else.

### Influence on behavior of family members

Former participants have gained respect from their relatives: *“He even contributed to the change of others*

*like me; he helped me change through advice and by his way of life,”* said a family member during a focus group discussion in Luvungi. Most of the former participants try to give advice and support to their relatives. A wife of a soldier reported that he *“even uses the telephone to advise and teach his relatives who are far away.”*

Relatives are also influenced by changes in gender attitudes among former participants. When Jean Claude’s father died, his property was divided among the males of the family, as is the custom in Luvungi, but Jean Claude recognized a problem:

*“After the group, I realized that my sisters were also entitled to their father’s property. Thus, after four months of training, I called my sisters, uncles, and other family members... and explained to them that these two sisters are also his children and should be considered as equal, and that everyone has the right to inheritance from their father. No one could understand this. My uncles called me crazy because I was destroying the custom and tradition and disobeying their orders and decisions. I was the first in our village to do such a thing... This issue has improved the relationship within my small family and with my sisters... and many people in conflict now come to me for advice, whereas this was not the case before, even though I am a pastor.”*

A member of the same focus group discussion gave another example of transformed gender norms:

*“I managed, thanks to the achievements of Pro-mundo, to solve a family problem that nobody had tried: my father died, leaving polygamous conflict between his two women, including my mother. So I began the reconciliation process by being the first to visit my stepmother. She was very happy and made many gifts for me. Now others have also started to visit her.”*



## Research Question 3: What are the lasting effects of former participants as role models and activists on the community?

In general, community members spoke positively about the changed behaviors of the former participants, and said that seeing the benefits for the former participants encouraged them to engage in the same positive behavior. In a focus group discussion, a neighbor of one family said her own husband emulates this improved behavior: *“My husband has imitated his behavior [of the former participant] and he comes home now around 6 o’clock.”* Neighbors start to look differently at the former participants and view them as examples, advisors, and counselors.

### A. CHANGING DRINKING BEHAVIOR OF FRIENDS AND NEIGHBORS

After the Living Peace groups in 2013, the first visible effect in the community was the changed drinking patterns among former participants’ friends. Several former participants abandoned the friends with whom they used to drink, which then motivated some of these friends to stop drinking. Theophile was one of these former participants whose behavior inspired his friends:

*“I told them that I followed the intervention groups and that I could not return to this [drinking behavior] anymore. I told them that I would leave, but they said if you give up alcohol, we will, too... I had two friends with whom I was drinking alcohol, even without being able to pay. After joining the intervention group, I started to talk to them about alcohol and its disadvantages and my progress since I declined alcohol use. Each time, they welcomed me with alcohol, and when I started to refuse their offers, our relationships and meetings became less. However, after seeing the positive changes in me, they have also gradually declined taking alcohol, and now they congratulate me for having helped them.”*

Several other respondents confirmed that friends or

neighbors of former participants had changed their behavior and stopped drinking excessively.

Former participants not only tried to positively influence the drinking behavior of their friends, but also to address alcohol misuse in their neighborhood. Pascal, for instance, tried to convince other people to reduce their alcohol intake:

*“I talk about alcohol-related harm, telling them that their alcohol destroys, and wastes money... I want others to change their behavior and change their social lifestyle, as well.”*

### B. ROLE AND POSITION IN THE COMMUNITY

#### Role models and activists

The former participants who were interviewed now serve as role models, showing others positive behavior, talking to family members or to neighbors, supporting people in resolving problems, and showing people how to change negative behaviors. In addition, most former participants reported that they have taken on an active role in the community to promote peace and change. Some men view their role as that of a social worker, helping to mediate family conflicts. Others have taken on more of an activist role in promoting behavior change. For example, Pascal arranges meetings with civilian and military friends to talk about behavior change and achievements. He advises people and testifies about his positive experiences following the Living Peace groups. Others promote change through the arts, as Theoneste once did: *“We performed theater for several months after Promundo. We [the former participants] played together with our wives.”*

Though formal groups organized by the former participants are no longer operating due to lack of financial

and material resources, the men still meet informally and consider themselves to be activists and promoters in ending IPV. Alina, Theoneste's wife, explained:

*"They are together as often as possible: in different districts of Luvungi, we see them together to cultivate the fields and if one of them has a job at home, the other three are helping to complete it. So, their positive behavior is visible to everyone."*

### Improved social standing in community

The positive behavior changes of former Living Peace participants have improved their social standing in the community and their reputations. They are now respected figures in their communities and role models for others. Since 2013, several former participants have achieved positions of responsibility, becoming, for example *"chef de la cellule"* ("chief of the community"), responsible for ten local families. Emanuel is a former participant who became a community leader, responsible for the security of families under his care. In this role, he talks to the family members, helps them to resolve problems, and mediates disputes between neighbors. He is building further on the lessons and experiences of the Living Peace group; he said, *"I use the knowledge about relationships, mutual expectations, and show them what dialogue is."*

A few former participants said that they rely heavily on their religious faith, and some have become religious leaders. Others were religious leaders before participating in the group but were not respected in their congregations because of their behavior. In addition to the spiritual support they find in religion, their position also helps them to influence the community with regard to gender roles and norms, responsibilities, and misuse of alcohol, as Theoneste described:

*"I am loved now in my church and my community because they now see me as a wise and responsible man, and this has produced good social and family relationships for me. After my change, I now influence the community, especially the neighbors, members of my church, and their families."*

Former participants said that they take every opportunity to spread the lessons of the Living Peace groups in these spaces, in their communities, and among their

friends, finding that people are very willing to listen.

### Improved economic situation

One of the reasons that community members want to adopt the behavior of the former participants is to improve their economic situation, the study's participants explained. They realize that ending violence at home and quitting alcohol use is directly linked to better economic well-being, because it saves money and creates more opportunities to find work and develop businesses that generate money.

Participants' accounts reveal that most men survive by collaborating with their wives to save small amounts of money, working on the land of others, and *"se débrouille se"* – a frequently used expression in DRC that means doing small business, helping others, etc. In Luvungi, two former participants (Patrick and Theoneste) are working to enhance economic activities with other members of the community through a strategy known as *"likelemba."* This is a local custom of mutual support in which people help each other to cultivate land, harvest crops, travel to the market to sell the harvest, build a house, or do another job. A group of community members join forces in *likelemba*, and helpers can be paid back in money or products of the harvest or future help. *"Being asked by community members to join a group in likelemba entails that others trust you, they have confidence in you, otherwise they would not ask you,"* Theoneste explained.

Another type of economic endeavor that started after the Living Peace groups continues today: economic support groups. An unanticipated result of the intervention, several such groups formed among former participants who were striving to develop income-generating activities. Most are savings clubs, helping participants to save money that can be used for larger investments, as in Theophile's group:

*"For the last three years, we have met once a month and discuss how to grow economically in the future. Our group has four participants of the therapy groups and we are each paying \$5 per month per person and using it to pay for goats or anything else, as needed."*

Not all of these savings clubs' efforts are successful, however. Emanuel created an economic support group, but they had to stop when their business did

not succeed: “We were making contributions between \$10 and \$15 dollars per person in our group to help each other to solve some family problems,” he said. Though the group is not currently active, its members are still looking for successful activities and are still positive about new opportunities. In another venture, former participants started a cooperative brick-making enterprise, but they lacked the financial resources to sustain it.

In the interviews and focus group discussions, all of the neighbors and community members spoke with respect about the former participants’ economic improvements at home.

### Support among group members

Of most Living Peace groups, a few former participants still meet each other, even after three years, but most do not meet on a regular basis. Some say that they know where they can find their comrades when they need them, but that they have stopped meeting. Theoneste still meets his support group of four people:

*“They help each other with money and they contribute regularly. If one of them has difficulties, for instance, if one is ill or has a sick family member, we can, for instance, give him a bike so he can more quickly and easily visit the patient in the hospital.”*

The findings show that, in part, it is the geographic locations of the implementation sites that determine whether groups still meet; where former participants live close to each other, more groups still function. For instance, in the military camp a group of former participants meets regularly to discuss and support each other. Also, in the village of Luvungi, some groups still meet regularly, and men say that when they meet in the street they greet one another with “Promundo.” They know that if ever they need help, they can ask each other.

In Goma, participants for the Living Peace groups were recruited from different areas, and most do not meet anymore. People have moved, or live too far away and lack money for transportation to meet. However, all of the respondents said that they regret that they are not meeting anymore, as they would like the support. Anicet, whose situation has not improved as it has for others (as described earlier), explains why continuation

of the groups is very important:

*“The other participants of the group influenced me positively when we were together in the group to share the experiences of life. I felt joy because I had space to express my problems, to say what is easy and difficult for me, as a man. Then, everyone gave their contributions to others and compared their own experiences. I learned many important things that have helped me in my journey of change. All men with whom we participated in the teachings of Promundo became my friends and family. Now we do not meet anymore on a regular basis, but we can always ask for help because we know each other’s house. I regret that the groups have stopped.”*

The groups that still meet clearly contribute to the sustainability of the men’s changed behaviors and help to prevent relapse. Diogene explained how his group, which is one of the few remaining in Goma, works:

*“The other participants help me a lot to keep my change, because we continue to see each other for sharing and mutual advice. When any one of us drifts away from the group, the others meet him to bring him to reason. Our meetings are regular, as we often see each other twice a week, and we share everything, and we feel accountable to one another. When we meet, our discussions revolve more around what we acquired with Promundo, such as the gender aspect, mutually helping our women, peaceful coexistence with neighbors... Trust and mutual support are still there as we continue to see ourselves as members of the same family... Remaining aware of all those issues and being involved in the group, I feel a moral obligation to behave like a model in my family and to be responsible for and value my wife and children. Thus, the neighbors continue to consult me for advice about their difficulties of daily life, such as fights, insults, misunderstandings, and money mismanagement problems.”*

The mutual support and solidarity of this group of former participants has radiated throughout the community, and according to Diogene’s wife, compels the admiration of others: “This way of behaving of the group participants is respected. Even my parents began to have great respect for him and take him as a model for the community members.”

## Research Question 4: What are the lasting changes in norms related to IPV, as perceived by the community?

Participation in Living Peace affected not only the men themselves, but also the friends and members of the community around them. Community members observed various changes in the families of former participants, including: (1) reduced alcohol use; (2) reduced intimate partner violence; (3) decreased stigmatization of rape survivors; (4) changed attitudes and behaviors related to gender relations; and (5) increased socioeconomic well-being.

At first, neighbors and friends reported that they were surprised by and suspicious about men's engagement in "women's issues," but later they began to notice the positive changes in those families. The families were visibly influenced by the changed behaviors of the former participants, as described in the previous section.

Neighbors (of former participants) who participated in the FGD in Goma described their surprise when they first saw their violent neighbor (the former participant) change his behaviors: some thought he was mentally ill when they saw him cleaning the house, others thought he was changed by a church, or that he had seen a medical doctor, or that his wife had given him traditional medicines.

The wife of a former participant reported that a neighbor called her mother-in-law after seeing her husband washing the children's clothes and sweeping the garden. The mother-in-law came over immediately to scold to her for being a bad wife. But, her husband defended his wife, and said to his mother-in-law:

*"This is not witchcraft, as people think in our neighborhood, it is a learned behavior change that came from my lessons; rather, those who came to tell lies to you may want to bewitch our family [referring to a neighbor who complained to the mother-in-law]."*

All of the neighbors interviewed for this study said that they knew about the past violent behaviors of the former participant, and that they were surprised

that he became not only sober and calm, but also a model for many other people.

In the FGD, Theophile's neighbor said that, in his former life, Theophile was always drunk and very aggressive, and that he had many women and run-ins with police and the law. The neighbor reported that there were always fights between Theophile and his wife concerning her rape. However, after Theophile participated in Living Peace, the neighbor observed that Theophile completely changed all of those behaviors. He stopped drinking, he stopped seeing other women, he began to support his wife, and he became a model for the community. His neighbors observed his support of his wife in household work and how he included her in decision-making, and they saw that the family's financial situation improved. Theophile's neighbor, a woman, remarked that her husband was influenced by Theophile's behavior changes: *"My husband reduced his alcohol abuse, he started to show me his wages, and we started to decide our expenses together."*

Diogene's neighbor reported that not only she, but also other neighbors and friends in their neighborhood (military base), had stopped drinking, influenced by the positive effects they saw in Diogene's household. She said, *"They have seen that his family did very well when he stopped drinking, included his wife in all decisions regarding expenses, and the children went back to school."*

The positive changes in the lives of the former participants that resulted from the lessons of the Living Peace groups acted as motivators for others in their communities to change, as well; community members started making changes of their own accord, even though they were not part of the Living Peace groups. Interestingly, community members and extended family members came to the former Living Peace participants and asked them how they had managed to make the improvements. As one woman explained in the FGD, two women from another village came to Luvungi to

ask the wives of former participants “*what medicine had changed the husbands*” because they, too, wanted these changes in their village.

## A. CHANGES IN GENDER ATTITUDES

The changed behaviors of former participants and the positive results observed by community members helped to change attitudes in the community toward gender relations and women’s rights. A man in a FGD in Goma said:

*“Here, with us, we thought that women have no rights, but it is thanks to our neighbors’ therapy groups that we got another vision of gender, meaning that a woman is totally not different from a man. We have let them suffer for nothing.”*

Several neighbors and friends of former participants said that they wanted to emulate the new behaviors. Said a friend of Theoneste’s:

*“His change, that he has stopped domestic violence, has influenced me and others, because he talked about everything. I want to change, to help my family live well and maximize our development... I want to improve my way of life, in my family and in the community, in the area of responsibility. His behavior has helped others to change, so we can only congratulate him.”*

Former participants discussed topics openly with their community members and friends that previously were not often discussed by men. Adelin, a soldier and former participant living in the camp in Goma, provided information about family planning and the risks of HIV and AIDS and of other sexually transmitted infections to women in the camp. After his changed behaviors due to the Living Peace groups, he was considered to be a respected and wise man in the community, and people listened to him.

Pascal has also gained an important position in his community: *“I am a commander now, because people are happy with my change and my current behavior. They found that I am now able to do better than before.”* He said he now solves conflicts in the community *“by counseling and dialogue, especially by ex-*

*ploring all the facts in order to solve a problem with mutual understanding.”* His views are respected because people recognize that he *“came from what was bad to a surprising attitude.”* In meetings with his civil and military friends, he recounted the lessons he received in the groups and the improvements in his life.

Likewise, wives of former Living Peace participants described their husbands’ new roles in the community. Louise said that Emanuel *“brings people who have problems together; he listens, he gives advice, and he guides so that they abandon their conflicts and live in harmony as friends.”* Anicet’s wife described her husband’s role when he learned that his friend was discriminating against his daughters:

*“My husband called the couple... He spoke to them about the teachings of Promundo: that we have girls or boys, but that they have the same rights. They started to understand, and the father, who had suddenly stopped the education of his daughter for the benefit of his son, allowed his daughter to study again with the full support of her dad. There was already a small delay of two months unpaid fees, but the father had everything cleared and the girl returned to school. After that, the couple began to think of nondiscrimination of children in the household.”*

## B. RESISTANCE IN THE COMMUNITY: “PUTTING THE HUSBAND IN THE BOTTLE”

Wives of former participants as well as some community members reported some cases of resistance to the idea of men becoming more supportive of women and sharing power with them. Most critics were concerned about the perceived loss of men’s power when they share power with their spouses.

Negative reactions included accusations that the wife had used medicine or other traditional methods to “put her husband in the bottle.” As previously explained, in the Congolese context, this expression is used to suggest that a woman has power and control over her husband, rather than the other way around. In a focus group discussion, a wife of a former participant said:

*“The community members say that we have given*

*our husband medicines to transform them... They are jealous. My neighbors have misperceptions about the current relationship between me and my husband; they assume that I cursed my husband to make him soft."*

However, most neighbors and others in the community changed their minds when they saw the positive effects of the former participants' changes. Women, in particular, were very interested in learning how to end intimate partner violence in their own homes. As one former participant reported, "Some women came with money to my wife, asking her for the medicine she had given to me that had caused the change."

### **C. CHANGING COMMUNITY MEMBER ATTITUDES TOWARD GENDER RELATIONS AND IPV**

Some former participants have actively tried to influence their community members' opinions around sexual violence. Emanuel, for example, has used his position to engage men in his community in discussions about the stigma of rape, and he has tried to protect children born out of rape. Emanuel said that the other men seem to listen to him: "They seem to understand me, but I hope that if it becomes reality they realize the consequences and will remember these discussions." Louise, his wife, recalled a situation in which a woman in their community was raped, but then accepted at home: "Her husband wanted her to go away, but my husband sensitized him to accept her."

Attitudes may have changed over time. Some community members said that they observed and adopted the same changes that former participants practiced; for example, respondents who were friends or neighbors of the men who participated in the Living Peace groups said that they saw the men becoming more involved in household tasks and including wives in decision making, and then they no longer saw or heard any violence or conflict. At first, however, some of the neighbors and other community members said that they were confused by the change. "At the beginning, I saw my neighbor as odd, as a hypocrite. I did not know where he was going," one neighbor recalled. Another said that, initially, he did not understand what was happening to his neighbor:

*"When he began to do an exercise at home, such as washing the children and getting water, I was surprised about that. One night, I asked him why he was doing work that is not supposed to be his task. Then he said that his spirit is to follow good teachings together with other men and that their goal is that all men will change their behavior and the way they live with their wives, their children, their families, and even the community."*

Some neighbors reported that, after they saw the positive effects of the change, they wanted to change as well. They said that they tried to copy these new behaviors, encouraged by their wives, who said that they envied the harmony and peace they observed in the families of men who had participated in the Living Peace groups. Some community women who were interviewed reported that they visited the wives of the former participants, asking what they could do so that their husbands would change, as well. In a focus group discussion, a neighbor recalled:

*"We neighbors, we began gradually to copy the model of this couple who cooperate and work better. The husband became like a pastor in the community, and I like to live with my husband in the same way that they do."*

A neighbor in Luvungi explained:

*"My neighbors have become a model. They advise their neighbors on the parenting of their children. They now have a good image in the community, so that people in the community want to listen to them. His wife informed me that they are currently saving money and that her husband involves her in family management."*

Another neighbor in Luvungi said that he was trying to change, too:

*"The first day I saw him holding a basket for his wife, I was surprised, and I quickly thought that he must have consumed some kind of medicine. But afterward, he shared his experience with me and told me about the male groups; I wanted to imitate it – but it is difficult."*

Partly because, for ethical reasons, the interviewers did not directly address the issue of rape of former partici

pants' wives, the data do not provide clear information about changes in attitudes toward rape, stigma, and SGBV at the community level. While some women are known within their communities to have experienced rape, others who experienced it are not. Some friends and neighbors referred indirectly to the "bad luck that arrived in the house" when they observed that wives who had been raped were accepted by their husbands again. As a friend of Theoneste remarked:

*"Here in our village, husbands do not easily accept women that were raped. But I have seen that my friend took his wife back after the groups, and they are living together in a very positive way. This behavior has influenced me and many other men."*

Other men in the community, who saw Theoneste accompanying his wife, who had been raped, to the field to protect and help her, started to accompany their wives to the field as well.

Neighbors and friends also reported reductions of intimate partner violence in the community by giving examples of other families that changed. One respondent said, *"I have another neighbor, who was always fighting with his wife, who also changed when he saw the changes in my friend's house."*

A neighbor of a couple in the military camp said that she had heard of several other military families (old friends of the former participant) who were all trying to stop violence in their own homes. However, the authors were not able to confirm this.

The radiating effects of the Living Peace groups on members of a participants' community generally begin with observations of change rather than with any active, organized promotion of gender equality on the part of former participants. Neighbors' and community members' observations of these changes can be powerful starting points for reflection and discussion, and can consequently allow those friends and neighbors to understand what helps a family to change and improve, leading them to emulate the behavior of former participants, stop the use of violence at home, and ultimately, contribute to the reduction of IPV in the community.





# 5

## Discussion and Conclusions

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### Sustainability of the Change

As noted earlier, a pre- and post-test evaluation was carried out for the pilot intervention “Kikundi Cha Uponyaji Ya Wa Baba” (“Healing Groups for Men” in Swahili), a Living Peace methodology implemented between 2012 and 2013. That evaluation showed a strong short-term impact: 90 percent of the male participants experienced a positive behavior change in terms of coping strategies, conflict management, and relationships with partners and children.

Three years after that pilot intervention concluded, the present qualitative evaluation assessed the longer term effects of the intervention groups on behavior change and on prevention of intimate partner violence. The “former participants” in this study had not received any follow-up from the program itself, after the 2013 groups, and as was expressed to the researchers, since the Living Peace groups ended they had not participated in any other interventions related to IPV prevention or mitigation.

Given the complex and dire conditions of many families living in conflict zones in eastern DRC – including the deeply ingrained gender inequality, hegemonic masculinity, and normalization of intimate partner violence in this context – one might expect it to be difficult to change men’s behaviors in an intervention of only three months. In light of the short duration of the intervention, the findings of this research are striking. Respondents reported that physical and sexual violence had stopped in most families; they reported that most men had adopted more gender-equitable behaviors in their relationships with their wives; and a majority reported that they continued to live in harmony and peace at home, three years after the intervention.

Not all families experienced the same levels of change.

Ten families, in which the husband had fallen back into alcohol abuse, reported continued conflicts over money and problems related to distrust. For the purpose of this study, we did not carry out mental health screenings, but recurrent alcohol abuse by some men suggests lingering mental health problems. Two families, both struggling with serious mental health issues, reported use of violence in the last three years.

### Factors Associated with Positive Behavior Change and Prevention of IPV

#### A. REDUCTION IN ALCOHOL ABUSE

Alcohol abuse is not a cause of IPV, but it is a factor. The findings suggest that reduction of alcohol intake contributes to lower rates of violence against partners, but this should not be seen as uni-dimensional. The motivations of men to use alcohol may be linked to social norms that associate masculinity with drinking together and hanging out in bars. Moreover, the authors consider intimate partner violence to be an expression of power inequality in gender relations. Nevertheless, the results of the Living Peace intervention show compelling effects in reducing the stress that drives men’s alcohol abuse.

From this perspective the findings suggest that men’s alcohol abuse was linked to men’s gendered coping strategies and linked to war-related traumatic events, which is consistent with other study findings showing that men with post-traumatic stress disorder (PTSD) – more than women – tend to use alcohol to cope with traumatic stress. Alcohol consumption can be seen as a form of self-medication.

Further research would be needed to explore the ways in which social norms around alcohol use may inform men's patterns of drinking. The focus of the intervention on coping strategies, on ways to reshape harmful and negative responses to stress, helped most men (except for a few men who showed symptoms of more severe mental health issues) to stop harmful alcohol abuse.

Before the intervention, the men reportedly did not control their drinking behavior, and most of the participants were often in a state of drunkenness. When men gained more control over negative behaviors and stress responses, and understood the destructive role of alcohol abuse on their problems, most men managed to reduce their drinking behaviors. Reducing or eliminating alcohol use had a direct impact on their use of IPV, not only because they were in better control of their behavior, but also because their financial situations, and their standing in the eyes of their community, improved.

## **B. PERCEIVED REWARDS FOR CHANGE**

How is it that the men's reported positive changes continued three years later with no additional intervention? The men risked being ridiculed by friends and family members, and most former participants faced traumatic life events in the years since the group meetings. All of these made the continuation of change even more difficult. Furthermore, changing behaviors and perceptions of gender roles, in general, and masculinities, in particular, is not easily done: identity is deeply rooted. Before the groups, the typical former participant saw manhood as a justification for the exertion of power over his wife and children by the use of violence. While life experiences and trauma had challenged his sense of himself as protector and defender of his family, at home he manifested his power with violence. His violent behavior damaged his relationships with others, in his community as well as in his family. He did not contribute to household work, he forced his wife to have sex, and his wife, children, and others were afraid of him. He lived in a home environment of violence, poverty, and abuse, and the lives of his wife and children were severely affected.

However, the research findings show that, starting with reflection on their sense of self and their male identity, .

most of the men managed to change their behaviors. After realizing that their use of violence was intertwined with their feelings of failure, loss, and poverty, they were able to find new entry points for relating differently with their wives and children.

The authors of this evaluation conclude that the men's reported change was sustained by the benefits and rewards that resulted from it; these rewards were strong incentives for men to maintain this behavior change three years after the intervention. When asked what factors supported them in changing and in sustaining this change, the men cited five important ways in which they were rewarded: (1) by feeling acknowledged and respected; (2) by feeling responsible; (3) by maintaining better communication with their wives; (4) by having a more satisfying sexual relationship; and (5) by being better off financially.

### **Feeling acknowledged, respected, and responsible**

One powerful incentive for the former participants to sustain their positive behavior change came in the form of the happiness and acknowledgement of their wives and children when they stopped using violence and instead started to care for their family. In addition, community members showed the former participants their respect, not only in words, but also by giving the men important positions in the community; the men became neighborhood leaders and "wise men" whom community members consult when there is a problem. Obviously, the positive behavior changes also benefitted the men by improving their social status in the community, which reflects the patriarchal structures deeply engrained in society. Nevertheless, the shifts reveal changes in the right direction when the men use their leadership positions to defend women's rights. Instead of being "a lion" from whom everyone in the house hides, they have become supporters of their wives and children.

### **Maintaining better communication with their wives**

In the Living Peace groups, men learned new coping skills: instead of drinking, shouting, and beating, they learned to control their negative emotions and

use positive conflict resolution skills. They found other ways to cope with anger and irritation, often by going for a walk to cool down so that they would be able to express themselves calmly. When husbands started to communicate with their wives instead of using violence, these men also learned to look at their wives differently: as full human beings. Most husbands no longer saw their wives as objects or possessions; instead, they noticed their wives' human qualities and the value of the work these women undertook on a daily basis. Some men found that by including their wives in decision-making and by sharing responsibilities, they had fewer conflicts and an improved marriage.

Moreover, they discovered that good and respectful communication improved their sexual relationships with their wives. Before the Living Peace intervention, some of the women reported that they were often forced by their husbands to have sex; after the intervention, almost all of the couples expressed how pleasant and joyful their sexual relationships had become. Almost all of the men interviewed had discovered that respect for each other's sexual needs provides more mutual satisfaction and pleasure. Furthermore, healthy sexual relationships increased love and affection between partners.

### Improved financial situation

The last major incentive for men to sustain their behavior changes was economic security. Most of the men reported that, after they stopped spending all of their money on alcohol, the immediate result was better living conditions for the family. Although most families in the study were extremely poor, and the project provided no direct financial benefit in the form of micro-credit or cash transfer, spending money on household needs rather than on alcohol allowed them to put enough food on the table, wear good clothes, and pay school fees for the children. Additionally, couples' shared decision making had economic benefits: some men began to support their wives' work in the field, which increased yield. With the ideas and support of their wives, men's economic situation improved. Finally, several men developed initiatives for saving money and for cooperative economic activities – opportunities that became accessible because of their new reputation as trustworthy community members. Though there was no formal support to motivate the

former participants to make a habit of their changes, the changes lasted and even improved because of these very important benefits and incentives.

## Gender Perceptions

Gender inequality is deeply rooted in Congolese society, and with this inequality comes gender-based violence. The fact that inequality is so deeply rooted – and that macro-level gender relations have not changed – makes the changes in gender roles and attitudes at the individual level all the more notable. While full gender equality has not been reached, the reduction in violent behavior by former Living Peace participants is significant, and the husbands' acknowledgement of the opinions, feelings, suggestions, role, and work of their wives has created a huge change in gender roles and power.

All of the former Living Peace participants in this research reportedly began to realize the value of their daughters and the importance of treating their daughters and sons equally – for example, paying school fees for girls to complete their education – as a result of the Living Peace groups. These changes may have had a radiating effect: women and children also began to reconstruct their gender identities. The vast majority of the wives who were interviewed gained self-esteem and felt more confident, and children experienced the benefits of feeling safe and protected at home; as they have grown, these children have expressed their desire to create relationships and families in which more equitable perceptions and identities are central.

### **A. INTIMATE PARTNER VIOLENCE**

The men's past violent behavior – in combination with their traditional power, their alcohol abuse, and their lack of coping skills – created a destructive mix of physical, psychological, and sexual violence against their wives and a violent and unsafe environment for their children. After men participated in the Living Peace program, according to most of the men and their female partners, they were able to end this cycle of violence. Even in a setting where there is widespread acceptance of men's use of violence against women, the former participants were able to change

and, according to their wives, most of them stopped using physical, sexual, and psychological violence.

## **B. RAPE AND CHILDREN BORN FROM RAPE**

Before participating in the Living Peace groups, the men thought that women were partly responsible for rape, and some of the former participants sent their wives away, or made their wives' lives difficult by stigmatizing them and using violence against them. Most of the former participants changed their ideas about rape during the Living Peace sessions; they realized that women should not be blamed for rape, and they started to see rape as a criminal offense. This new perspective made an impact: all of the men who had rejected their wives asked their wives to come back into their homes and tried to comfort them. The same thing happened for the children born of rape, as men began to acknowledge these children and care for them. They began to consider these children to be their own. This research shows, again, that important opportunities exist within families to stop the cycle of violence. Narrow approaches that only focus on women as victims and that exclude men will miss these opportunities.

## **Radiating Effect on Family and Community Members**

It has become clear, from this study, that the Living Peace intervention had a radiating effect, reaching extended family members, neighbors, and community members of the interviewed former participants. Neighbors and friends saw the changing atmosphere in the homes of former participants, heard the positive stories from their wives, saw their children happy and attending school, and noticed the improved financial situation of former participants' families. These neighbors and friends desired the same changes and consulted the former participants in times of difficulty. At the same time, most of the former participants had a strong desire to share what they had learned, and, in

their various roles in their communities, tried to positively influence other community members.

## **A. PARTICIPANTS BECOMING INFORMAL ADVISORS IN THEIR COMMUNITIES**

Community members were reportedly surprised, at first, when they observed the former participants performing domestic tasks. However, they respected the fact that former participants reduced or stopped their alcohol use, and they began to see that this combination of behaviors improved financial security and created more joy and peace in the home. Other women in the community were especially eager to emulate this approach, and other men became convinced and tried to change, asking former participants what they had learned. The former participants now often intervene in other families in cases of IPV, helping to address problems. They also actively advocate for family planning, try to reduce the stigma against raped women and children born of rape, advocate for the education of girls, and promote the advantages of husbands and wives sharing money and planning together.

Some of the former participants have become community and religious leaders. In these roles, they try to address harmful cultural notions and behaviors, and teach the members of their community the different lessons they learned through Living Peace. They speak about the stigmatization of raped women, family planning, domestic violence, and shared income-generating activities. Some have started economic support groups or cooperatives, though with little success, given the extreme poverty in the region. When they meet together informally, former participants repeat the lessons they learned and try to support each other during difficult times.

Shortly after participating in Living Peace, some of the participants, of their own volition, performed street theater<sup>6</sup> for a short period, together with their wives. With these performances, they addressed key issues related to violence and gender while providing entertainment. Unfortunately, these types of activities have not been sustained because they had no funding, but the fact these men and women invested such time and

6. Participants and spouses performed role-plays at the community celebration at the end of the Living Peace groups. Some men and women continued to perform plays in the community for the first year after the end of the groups.

effort shows how important they consider this work to be.

## **B. MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT**

The Living Peace program does not address serious mental health problems by offering ongoing individual therapy or psychotherapeutic treatment or medication. The findings show that the groups did have some positive impact on participants with severe mental health problems; however, as soon as the project ended, the problems returned. This suggests that Living Peace could be useful in the identification of hidden mental health needs, since the groups are more accessible than any other mental health service. The Living Peace groups work as community psychosocial support groups with a focus on daily psychosocial stressors rather than on severe mental health problems (IASC, 2007). Close collaboration with existing mental health services or professionals is recommended, but the problem remains that people living in remote areas will have difficult or no access to any mental health services.

## **Affirming the Ecological Model**

The findings illustrate that the Living Peace program, implemented in a setting where relationships among community members are strong, enabled a holistic, integrated approach at three levels: the group intervention was on the micro (individual) level and had an impact on the meso (intimate partner) level, as well as on the extended families, neighbors, and friends of the participants at the exo (community) level. The impact of the intervention was strongest at the meso level: the improvement of intimate partner relations.

At the individual level, men initiated an experiment with new behaviors that benefitted their own lives. The findings suggest that it was not, primarily, the promotion of gender equality that led to change; rather it was the focus on dynamics and interactions between people and groups of people. What is interesting to note is that the changes at different levels reinforced each other: individual change was reinforced by meso-level

improvements in intimate partner relations and by exo-level changes that brought about positive feelings and respect from wives and children, joy and peace in the home, and respect from the community. Such benefits gave the former participants even greater motivation to continue and sustain their behavior change, with reciprocal benefits for the family and the community.

It is worth noting that the intervention's effect comes from the bottom up. It is neither education nor awareness raising that generates behavior change within the broader community, but rather the fact that community members observe former participants' behavior changes and the resulting benefits for their nuclear family members. From this observation comes a desire to experience the same benefits, motivating positive behavior changes among community members who have not participated in the intervention and, ultimately, a reduction of intimate partner violence within the community.

The results presented here may seem "almost too good to be true." During the research process, during the interviews, and with the local partners, the authors of this evaluation considered the possibility that respondents were providing what they felt were "good" or "right" answers to questions (i.e., displaying social desirability bias), rather than answering those questions truthfully. However, the consistency of the responses – the fact that women, men, other family members, and community members all separately reported the same types and mechanisms of change – leads the authors to believe that the participants in the study were reporting, to the best of their ability, what has truly happened to the men and their families.

The findings of this evaluation provide valuable evidence to inform the design of a possible larger, quantitative impact evaluation of Living Peace. The findings also have the potential to refine the intervention model, both setting it up for a future randomized control trial (RCT) or quasi-experimental evaluation, and providing new evidence to inform policymakers and other stakeholders about this intervention and its implications for primary prevention of IPV. Moreover, the findings reveal the gaps in appropriate and accessible psychosocial and mental health resources in this region, and could be used to advocate for the psychosocial and mental health needs of men, in addition to the better

known (but still unmet) needs of women and children. Further research, as well as more collaboration, would be needed with partners who work on mental health and psychosocial support.

## The results of this evaluation suggest the following:

### *A. Psychosocial support to help men who use IPV overcome trauma and end their use of violence is a viable, effective approach.*

Psychosocial support and a psycho-educational approach can reinforce the ability of men to integrate meaningful concepts of justice, gender equality, and rights into their own lives. Men are often both victims and perpetrators of multiple forms of violence, and without addressing these experiences, cycles of violence cannot be broken.

The findings of this evaluation clearly show that when men started to reflect on their own problems and behaviors in the Living Peace groups, they discovered new perspectives and hopes for a better family life; it was the men themselves who decided to end their use of violence.

This study's respondents made clear that there are no other programs or organizations in their communities offering the same kind of support, namely a space in which men can address their traumatic experiences; develop positive, nonviolent coping skills; and discuss and reconsider masculinity, violence, and gender norms. What is unique about this method is that it holistically addresses men's experiences, needs, and capacity for change at the same time as it helps to define new, positive behaviors and prevent violence in the home.

### *B. IPV prevention programs that fully integrate support for individuals in conflict and post-conflict areas can also serve as catalysts for change within the broader community.*

Sustainable behavior change starts at the individual level. The evidence suggests that, in the Living Peace intervention, the benefits that resulted from positive change and IPV prevention became incentives for men to both retain these new behaviors and promote them to others. This may explain why, three years after the pilot program ended, behavior change was sustained by most of the men in the study and had spread to some of the other community members interviewed. The immediate, observable benefits of behavior change at the family level motivated other families to emulate the former Living Peace participants' behaviors.

### *C. Effective approaches to engaging men in gender equality focus not only on the needs of women, but also on men's awareness and transformation of their own gendered identities.*

Gender transformation is mainstreamed and woven into Living Peace's process of change; this helped men to accept and support gender-equitable behaviors after participating in the intervention. It is important that the focus of programming for men be not only on the benefits of gender-equitable behaviors for women, but also on the benefits for men themselves. The results here underscore that equality and nonviolence are not a zero-sum game: what benefits women benefits men, as well.

While the results show that the Living Peace intervention did not fully transform deeply-rooted perceptions about gender and power relations in DRC, they suggest that the intervention reduced IPV and improved partner and family relations – a crucial step toward gender equality.

# Recommendations

- **Scale up gender-specific therapeutic approaches that engage men in IPV prevention** and that could work parallel to interventions that focus on the reinforcement of legal responses that hold men accountable for their use of IPV, particularly within existing mechanisms such as international non-governmental organizations, United Nations entities, police and military forces, and other already-established services for female survivors of rape.
- **Implement Living Peace groups for women, parallel to those for men.** The group process provides benefits to couples, and to men and women individually; groups for women would complement and enhance services that women might already be receiving. Moreover, in spite of what is known of the severe consequences of war and rape for women, their psychosocial and mental health needs are barely met. Members of the communities in which Living Peace has been implemented have expressed strong interest in groups for women, and the Living Peace Institute has already started to do this.
- **Collaborate with organizations that provide mental health services** to address mental health problems and alcoholism, ensuring that individuals and families in need receive adequate services. The gender-specific approach of the Living Peace groups could benefit mental health services in providing more gender-informed services. Create referral mechanisms and train group facilitators to screen for such cases.
- **Implement and evaluate Living Peace for youth,** with the hope of preventing IPV before young men and young women enter into intimate relationships. The Youth Living Peace program, supported by the UN Trust Fund for Ending Violence Against Women, began piloting this approach in Brazil and DRC in 2015, helping adolescent boys and girls heal from violence while providing critical school-based training for violence prevention.
- **Organize and formalize peer support groups** after the 15-week cycle of the Living Peace intervention ends, so that support for participants can continue without requiring a trained facilitator. Findings show that peer support works well, but there is no mechanism in place to continue meeting after the 15 Living Peace sessions, except for individual efforts to keep meetings going.
- **Conduct further research into the relations between men's trauma and IPV.** While much research has been done into the connection between trauma and violence from women's perspectives, or for persons exposed to conflict and trauma (but not segregated in gender and thus gender blind), very little has been done on the gender-specific impact of trauma on men's psychosocial and mental health. Greater research into this still relatively unexplored field has the potential to improve and build upon efforts to prevent IPV.



# References

# References

- Akello-Ayebare, G. (2009). *Wartime children's suffering and quests for therapy in northern Uganda*. (PhD), Leiden University, Leiden.
- Akello, G., Richters, A., & Reis, R. (2007). Reintegration of former child soldiers in northern Uganda: Coming to terms with children's agency and accountability. *Intervention*, 4(3), 229-243.
- Babalola, S., Gill-Bailey, A., & Dodo, M. (2014). Prevalence and Correlates of Experience of Physical and Sexual Intimate Partner Violence among Men and Women in Eastern DRC. *Universal Journal of Public Health*, 2(1), 25-33.
- Bronfenbrenner, U. (Ed.) (2005). *Making human beings human: Bioecological perspectives on human development*. Thousand Oaks/London/New Dehli: Sage Publications.
- Brown, C. (2012). Rape as a weapon of war in the Democratic Republic of the Congo. *Torture*, 22(1), 24-37.
- Davis, L., Fabbri, P., & Alphonso, I.M. (2014). *Profil du pays en matiere d'egalite de genre*. Kinshasa: Sida, DFID, EU, Canadian Embassy.
- de Jong, J.T.V.M., Komproe, I.H., & van Ommeren, M. (2003). Common mental disorders in postconflict settings. *Lancet*, 361, 2128-2130.
- Douma, N., & Hilhorst, D. (2012). *Fond de commerce? Sexual violence assistance in the Democratic Republic of Congo*. Wageningen: University of Wageningen.
- Dossa, N. I., Hatem, M., Zunzunegui, M. V., & Fraser, W. D. (2014). Social consequences of conflict-related rape: The case of survivors in the Eastern Democratic Republic of the Congo. *Peace and Conflict. Journal of Peace Psychology*, 20(3), 241-255.
- Edström, J., Dolan, C., & Shahrokh, T., with David, O. (2016). *Therapeutic Activism: Men of Hope Refugee Association Uganda Breaking the Silence over Male Rape in Conflict-related Sexual Violence*, IDS Evidence report 182. Brighton: IDS.
- Eriksson-Baaz, M., & Stern, M. (2010). *The complexity of violence: A critical analysis of sexual violence in the Democratic Republic of Congo (DRC)*. Sida Working Paper on Gender-based Violence. Sida.
- Eriksson Baaz, M., & Stern, M. (2013). *Sexual Violence as a Weapon of War?: Perceptions, Prescriptions, Problems in the Congo and Beyond*. London and New York: Zed Books.
- EURAC. (2016). *Report: EU support to security sector reform in the DRC: Towards an improved governance of Congolese security forces?* February 2016. Brussels: EURAC.
- Glaser, B.G., & Strauss, A.L. (2006). *The Discovery of Grounded Theory Strategies for Qualitative Research*. New Brunswick: Aldine Transaction.
- Hamber, B., Gallagher, E., & Ventevogel, P. (2014). Narrowing the gap between psychosocial practice, peacebuilding and wider social change: An introduction to the Special Section in this issue. *Intervention*, 12(1), 7-15.
- Ikanga, J. (2014). Psychology in the Democratic Republic of the Congo: Its struggles for birth and growth. Current state of psychology in the Democratic Republic of Congo is discussed. *Psychology International*. Retrieved from: <http://www.apa.org/international/pi/2014/12/congo-birth-growth.aspx>

- Immigration and Refugee Board of Canada. (2006). *Democratic Republic of the Congo: Prevalence of domestic violence, the availability of legal protection, methods of punishing or deterring offenders, and presence of support systems for survivors*. Retrieved from: <http://www.refworld.org/docid/45f147152d.html>
- Inter-Agency Standing Committee (IASC). (2007). *IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings*. Geneva: IASC.
- Johnson, K., Scott, J., Rughita, B., Kisielewski, M., Asher, J., Ong, R., & Lawry, L. (2010). Association of sexual violence and human rights violations with physical and mental health in territories of the Eastern Democratic Republic of the Congo. *Journal of the American Medical Association*, 304(5), 553-562. doi:10.1001/jama.2010.1086.
- Kelly, J. T., Kabanga, J., Cragin, W., Alcayna-Stevens, L., Haider, S., & Vanrooyen, M. J. (2012). "If your husband doesn't humiliate you, other people won't": Gendered attitudes towards sexual violence in eastern Democratic Republic of Congo. *Global Public Health*, 7(3), 285-298. doi:10.1080/17441692.2011.585344.
- Kohli, A., Perrin, N. A., Mpanano, R. M., Mullany, L. C., Murhula, C. M., Binkurhorhwa, A. K., & Glass, N. (2014). Risk for family rejection and associated mental health outcomes among conflict-affected adult women living in rural eastern Democratic Republic of the Congo. *Health Care for Women International*, 35(7-9), 789-807. Doi:10.1080/07399332.2014.903953.
- Kozaric-Kovacic, D., Ljubin, T., & Grappe, M. (2000). Comorbidity of posttraumatic stress disorder and alcohol dependence in displaced persons. *Croatian Medical Journal*, 41, 173-8.
- Lamarchand, R. (2009). *The Dynamics of Violence in Central Africa*. Philadelphia: University of Pennsylvania Press.
- Liebling, H., Slegh, H., & Ruratotoye, B. (2012). Women and girls bearing children through rape in Goma, Eastern Congo: Stigma, health and justice responses. *Itupale Online Journal of African Studies*, 4.
- Lwambo, D. (2013). "Before the war, I was a man": Men and masculinities in Eastern Democratic Republic of Congo. *Gender and Development*, 21(1), 47-66.
- Michalopoulos, L. T. M. (2014). *Exploration of cross-cultural adaptability of PTSD among trauma survivors in Northern Iraq, Thailand, and the Democratic Republic of Congo: Application of item response theory and classical test theory*. University of Maryland, Baltimore, MD.
- Miller, K.E., & Rasmussen, A. (2010). Mental health and armed conflict: The importance of distinguishing between war exposure and other sources of adversity: A response to Neuner. *Social Science Medicine*, 71, 1385-1389.
- Miller, K.E., & Rasmussen, A. (2014). War experiences, daily stressors and mental health five years on: Elaborations and future directions. *Intervention*, 12, Supplement 1, 33 - 42.
- MONUSCO/OHCHR. (2016). *Accountability for Human Rights Violations and Abuses in the DRC: Achievements, Challenges, and Way Forward (1 January 2014-31 March 2016)*. Retrieved from: [http://www.ohchr.org/Documents/Countries/CD/UNJHROAccountabiliteReport2016\\_en.pdf](http://www.ohchr.org/Documents/Countries/CD/UNJHROAccountabiliteReport2016_en.pdf)
- Norman, J., & Niehuus, R. (2015). *18 Years displaced: An anthropological study of protection concerns facing Congolese refugees in Nyarugus Refugee Camp, Tanzania*.
- Peterman, A., Palermo, T., & Bredenkamp, C. (2011). Estimates and determinants of sexual violence against women in the Democratic Republic of Congo. *American Journal of Public Health*, 101(6), 1060-1067. doi:10.2105/AJPH.2010.300070

- Prunier, G. (2009). *From Genocide to Continental War*. London: Hurst Publishers, Ltd.
- Scott, J., Rouhani, S., Greiner, A., Albutt, K., Kuwert, P., Hacker, M. R., & Bartels, S. (2015). Respondent-driven sampling to assess mental health outcomes, stigma and acceptance among women raising children born from sexual violence-related pregnancies in eastern Democratic Republic of the Congo. *BMJ Open*, 5(4). doi:10.1136/bmjopen-2014-007057.
- Slegh, H., Barker, G., & Levto, R. (2014). *Gender relations, sexual and gender-based violence and the effects of conflict on women and men in North Kivu, eastern Democratic Republic of the Congo: Results from the International Men and Gender Equality Survey (IMAGES)*. Washington, DC and Cape Town, South Africa: Promundo-US and Sonke Gender Justice.
- Slegh, H., Vess, J., Kimonyo, A., & Ruratotoye, B. (2014). *Living Peace Groups Implementation manual and final project report: GBV prevention and social restoration in the DRC and Burundi*. Prepared by Promundo-US and LOGiCA. LOGiCA study series. Washington, DC: World Bank Group.
- Staub, E. 2007. *The Roots of Evil*. Cambridge: Cambridge University Press. Stearns, J.K., Vogel, C. (2015). *The landscape of armed groups in the Eastern Congo*. Congo Research group: New York University. Retrieved from: <http://congoreserchgroup.org/essay-the-landscape-of-armed-groups-in-eastern-congo-2/>
- Steel, Z., Chey, T., Silove, D., Marnane, C., Bryant, R.A., & van Ommeren, M. (2009). Association of torture and other potentially traumatic events with mental health outcomes among populations exposed to mass conflict and displacement: A systematic review and meta-analysis. *Journal of the American Medical Association*, 302, 537–49.
- Strauss, A., & Corbin, J. (1994). Grounded theory methodology. In N. K. Denzin & Y. S. Lincoln (Eds.), *Handbook of qualitative research* (pp. 273–285). Thousand Oaks/London/New Delhi: Sage Publications.
- Tankink, M., Ventevogel, P., Ntiranyibagira, L., Ndayisaba, A., & Ndayisaba, H. (2010). *Situation and needs assessment of mental health and psychosocial support in refugee camps in Tanzania, Rwanda and Burundi*. Report of the assessment phase for the project 'Mental Health and Psychosocial Support Capacity Building for Implementing Partners of UNHCR Health Projects in Refugee Settings in Tanzania, Rwanda and Burundi'. Amsterdam: HealthNetTPO.
- United Nations High Commissioner for Refugees. (2005). *Identifying gaps in protection capacity - Tanzania*. Retrieved from: <http://www.refworld.org/docid/472896f50.html>
- World Bank, LOGiCA (2014). *Living Peace Groups Implementation manual and final project report: GBV prevention and social restoration in the DRC*. Washington, DC: World Bank.
- World Health Organization. (2005). *Multi country study on women's health and domestic violence*. Geneva: WHO.

# Annexes

# Annex 1:

## Overview of Participants

<sup>1</sup> FP = Former participant

<sup>2</sup> SV = Experienced sexual violence outside relationship

<sup>3</sup> Comments about changes as a result of the Living Peace groups

- No information available

Respondent	SV <sup>2</sup>	IPV before LPG	IPV at time of research	Alcohol use	Economic situation <sup>3</sup>	Perceived couple relationship <sup>3</sup>	Perceived by community <sup>3</sup>
<b>Pascal</b> FP <sup>1</sup> , soldier, Goma		Yes	No	Stopped	Improved, chief, commander, mutual-aid system: 'Likelemba'	Mutual respect, happiness and stability, good sexual relationship	Respected advisor
<b>Mary</b>  Wife	Yes	Yes	No	Stopped (she thinks)	Improved, sharing money, joint financial planning	Harmony, respect, care, consensual sex with joy	Example, Respected advisor
Sister		Yes	No	Stopped	Improved, sharing money	Happy family, supports wife with domestic tasks	Wise, Respected man
Niece		Yes	No	Stopped	Improved,	Happy family, FP is supportive	Respected
<b>Emanuel</b> FP, civil, Goma		Yes	No	Stopped	Improved, cell leader, supports orphans	Dialogue, mutual aid, love	Respected advisor, mediator, religious leader

<b>Louise</b> Wife	Yes	Yes	No, but can shout at wife when angry	Stopped	Improved, built a house, cell leader, sharing money	Caring, harmony, 'small errors', consensual sex	Example, respected advisor, mediator
Aunt (FGD 1 <sup>st</sup> round)		Yes	No	-	Improved	Good relationship, supports wife with the work	Example
Sister (FGD 1 <sup>st</sup> round)		Yes	No	-	-	Good relationship	Good relations with family
Nephew (FGD 1 <sup>st</sup> round)		Yes, also against nephew	No		Improved	Supports wife with domestic work, good relationship	Role model, works together with neighbors
<b>Theoneste</b> FP, civil, Luvungi		Yes	No, but does shout & blame	Stopped, wife also stopped	Improved, mutual planning and sharing money	Peace and joy in the house, consensual sex with joy	Religious leader, teaching gender attitudes, mediator
<b>Alina</b> Wife	Yes	Yes	No	Stopped	Improved, shares economic planning, pays school fees	Caring, supportive, "feels like in paradise," sharing ideas, good sex	Respected, example, advisor, mediator
Uncle (FGD 1 <sup>st</sup> round)		-	-	-	-	Very much improved	Uncle would like to change as FP has
Cousin (FGD 1 <sup>st</sup> round)		-	-	-	Well-organized	Responsibility, trust between couple	Gives image of being a real man now
Friend		Yes	Quarrels with wife and beats child when they misbehave	Stopped	Improved, joined wife in the field, bought a motorcycle	Small normal conflicts, caring man, peace at home, power sharing, accepts wife and child from rape	Role model, friend wants to copy change, help his own family to live well and maximize development

Respondent	SV <sup>2</sup>	IPV before LPG	IPV at time of research	Alcohol use	Economic situation <sup>3</sup>	Perceived couple relationship <sup>3</sup>	Perceived by community <sup>3</sup>
<b>Anicet</b> FP, civil, Luvungi		Yes	Yes, few times last year	2 bottles beer a day	Improved, has built a house, mutual support with other FPs	Relationship problems due to psychological problems and distrust, does domestic tasks	
Wife	Yes	Yes	Has beaten a few times	1-2 bottles beer, has relapses, due to unemployment	Shares money	Responsible, consensual sex, supports wife with domestic tasks and in field, peace except husband "spills money for alcohol"	Mediates, teaches others
Sister-in-law (FGD 1 <sup>st</sup> round)		Yes	Not completely calm	-	-	Has not completely taken responsibility	Advisor and role model
<b>Fabien</b> FP, civil Goma		Yes	No	Stopped	Improved, academic study, shares money	Peace in house, respects needs, supportive	Advisor and role model
Wife	Yes	Yes	No	Stopped	Improved, joint financial planning	Joy & happiness, improved sexual relationship	Responsible, advisor
Neighbor (Female)		Yes	No	Stopped	Improved	Family lives peacefully and in happiness	Role model, advisor
Neighbor (Male, FGD 1 <sup>st</sup> round)		Yes	No	Stopped	Improved	Supports wife at home	Role model
<b>Mathieu</b> FP, soldier, Goma		Yes	No	Stopped	Improved, joint financial planning	Supports wife, harmony, love, happiness, consensual sex	Mediator, educator



Wife	Yes	Yes	No	Stopped	Improved, joint financial planning, pays school fees	Supportive, dialogue, harmony, consensual sex, proud	Neighbor thinks that she has bewitched him
Neighbor & Sister-in-law		Yes	No	Stopped	Improved	Loves wife and children, peace, harmony	Mediator, advisor, wise man
Sister		Yes	No	Stopped	Improved, pays school fees	Harmony	Advisor, educator
Neighbor (Female)		Yes	No	Stopped	Improved	Manager	Advisor, educator
<b>Patrick</b> FD, civil, Luvungi		Yes	No; when angry he breaks plates	2 bottles a day	Improved	Peace, understanding, good relationship, sex with respect	Educator
Wife	Yes	Yes	No; if angry she says 'Promundo'; he breaks plates	1 bottle a day if he has money	Improved, shares money, assists in the field, pays school fees	Joy, peace, consensual sex, supportive	Supports neighbors, advisor
Neighbor (Male, FGD 1 <sup>st</sup> round)		Yes	No	-	Improved, supports wife in field and at market	Love, supportive at home	Concerned with family, advisor
Neighbor (Female, FGD 1 <sup>st</sup> round)		Yes	-	-	Improved	Supportive, peace, understanding	Role model
Neighbor (Female, FGD 1 <sup>st</sup> round)		Yes	-	-	Improved	Calm, good couple	Helped neighbors coping

Respondent	SV <sup>2</sup>	IPV before LPG	IPV at time of research	Alcohol use	Economic situation <sup>3</sup>	Perceived couple relationship <sup>3</sup>	Perceived by community <sup>3</sup>
<b>Boniface</b> FP, civil, Luvungi		Yes	No		Improved, new house, mutual financial planning	Joy, peace, consensual sex, supportive in domestic work	Pastor, mediator, advisor
Wife	?	Yes	No	No	Improved, shares money	Calm, honor, peace, joy, supportive in house, good sex	Pastor, advisor, mediator
Daughter		Yes	No, only shouts if we misbehave	No	Improved, shared planning	Love, peace, mutual respect, no marginalization	Teacher, supports others
<b>Theophile</b> FP, civil, Goma		Yes	No	A little, not excessive	Improved, shared financial planning	Joy, peace, consensual sex, supportive in domestic work	Role model
Wife	Yes	Yes	No	A little if he has money, not drunk	Improved, shared financial planning	Peace and consensual sex	Advisor, head of cell in community
Neighbor (Female)		Yes	Don't think so	No	Improved	Happiness and peace, wife doesn't complain anymore about forced sex	Role model (hopes her husband follows), elected as cell leader
<b>Mulonda</b> FP, civil, Goma		Yes	Yes, but they have conflicts	Trying to stop	Many small jobs, contributes to family income	Some peace, but wife refuses sex; she thinks he has other women; he thinks she has another man	Community conflict mediator and street chief
Wife	No? <sup>4</sup>	Yes	Conflicts, but no violence and humiliation anymore	Stopped	He contributes, she also works, but there is no good collaboration	There is some peace, because he is not violent anymore	Chief of a street; if he could leave his concubine, he would be more respected

<b>Diogene</b> FP, civil, Goma		Yes	No	Few bottles a month, asking wife for money	Saved money by stopping drinking, family can eat, pays school fees	Peace at home, collaborate and plan together	Advisor
Wife	No? <sup>4</sup>	Yes	No	Stopped, she gives money for a bottle	Improved, they bought land and pay school fees	Collaboration and trust	Others see us as a model and they imitate us
Neighbor (Female)		Yes	No	Never seen him drunk again	They are doing much better	Very much improved	Many people in military camp talk about their positive change; they are models
<b>Deo</b> FP, civil, Goma		Yes	No	Stopped	As military, he makes money by renting out motor taxi, but doesn't have enough	Improved for 80%, but he fears alcohol abuse	Role model and advisor for others
<b>Esperence</b> Wife	No	Yes	No	Stopped, she also stopped	She contributes to pay costs of the motor taxi	Yes, we have peace, my husband does all I ask him	Community thinks she gave medicine to husband; they see all changed
Neighbor (Male, FGD 1 <sup>st</sup> round)		Yes	No	No	Share money	Joy, peace, mutual respect	Role model

# Annex 2:

## Guidelines for First Round

Note: All topics were the same in the different groups of respondents. Researchers adapted the introduction of the topic by referring to the relation with the former participant if appropriate.

### Guide d'entretien ou interview du focus groupe

#### Participants/Hommes

**Nom:**

**Age :**

**Etat civil :**

**Nombre d'enfants :**

**Travail / revenu :**

**Liste de thèmes et de questions:**

**Sujet 1 :**

#### Les nouvelles des participants après 3 ans

Comment les participants ont-ils actuellement géré les problèmes de la vie?

#### EXAMPLES

- ▶ Comment allez-vous?
- ▶ Après les groupes de Living Peace, y a t-il quelque chose de positif ou négatif (évènement douloureux ou heureux) qui est arrivé pendant les trois dernières années?
- ▶ Qu'est ce qui vous est arrivé? Quelles en étaient les conséquences pour vous et pour votre famille?
- ▶ Face à ce problème, comment aviez- vous fait pour trouver la solution?

## Sujet 2 :

### Comment la perception de leur identité masculine a changé (ou n'a pas changé)?

#### EXAMPLES

- ▶ Quel est votre rôle actuel, votre responsabilité et engagement en tant qu' homme, mari et père dans votre famille? (Question sur les activités à la maison, le revenu, les décisions dans la famille)
- ▶ Est ce que vous associez votre femme dans la prise des décisions?
- ▶ Comment les autres personnes, dans votre famille et dans la communauté, vous traitent-elles comme un homme? Quel genre d'homme êtes-vous?
- ▶ Comment prenez-vous en charge (financièrement et émotionnellement) votre famille et votre femme? Comment contribuez-vous au revenu familial?
- ▶ Avez-vous de travail? Si non: que pensez vous de cette situation?
- ▶ Quels sont les principaux défis (difficultés ou problèmes rencontrés) en tant qu'homme dans la vie courante?
- ▶ Comment gérez-vous cela? (Sous questions: comment gère -t-il la honte, la perte de sa virilité)

## Sujet 3 :

### Comment les relations familiales, conjugales ont changées et ya-t-il (encore) la violence entre les couples?

Vérifiez pour chaque question s' il y a différence après LP group

#### EXAMPLES

- ▶ Comment sont vos relations avec les membres de famille? Ont-elles changé après les groupes?
- ▶ Comment votre famille vous apprécie-t-elle comme homme?
- ▶ Comment sont vos relations sexuelles avec votre partenaire? (Femme)
- ▶ Avez-vous remarqué de changement dans votre vie de couple? (Sous questions: divorce, morts, deuxième bureau...)
- ▶ Quels sont les principaux problèmes que vous rencontrez dans vos relations avec votre partenaire?
- ▶ Comment est-ce que vous les gérez? Ces relations sont-elles bonnes?
- ▶ Comment qualifiez-vous vos relations avec votre femme?
- ▶ Que faites-vous quand vous êtes en désaccord (conflit) avec votre femme? (Vérifiez s'il y a violence)

- ▶ Quelles sont les formes de violence qui se produisent dans votre maison? Comment gérez-vous cela?
- ▶ Comment sont vos relations avec les enfants? Que faites-vous pour les occuper ou les encadrer?

#### Sujet 4 :

### Comment l' intervention a t-elle contribué (ou pas) à l'amélioration de la santé, du bien-être psychosocial et socio-économique?

#### EXAMPLES

- ▶ Comment est votre état de santé? Et celui de votre famille? Y a t-il de changements?
- ▶ Qui dans ce groupe consomme-t-il encore l'alcool? Quel type d'alcool? Combien de bouteilles par jour? Voyez-vous cela comme un problème? Est-ce que les autres voient cela comme problème?
- ▶ Aviez vous eu conscience un jour que vous avez perdu le contrôle après avoir trop bu ces dernières années?
- ▶ Avez-vous bu moins ou plus qu'avant Living Peace?
- ▶ Qu'est-ce que vous faites si vous êtes stressé, en colère ou frustré?
- ▶ Est-ce que les problèmes et la pauvreté que vous aviez vécus avant Living Peace et qui étaient causés par la guerre, vous dérangent encore? Comment les gérez-vous maintenant?
- ▶ Lorsque vous avez des problèmes (ou soucis), avez-vous des personnes plus proches pour en discuter? Actuellement, vous arrive t-il d'aller avec votre femme au mariage, aux funérailles, à l'église ou dans d'autres cérémonies, etc.) Vérifiez si cela est plus ou moins qu'avant groupes LPI

#### Socio-économique :

- ▶ Après l'intervention, votre situation socio-économique a-t-elle changé? Comment? (Exemples)
- ▶ Si il n'y pas de changements positifs: quels obstacles avez-vous trouvés
- ▶ Comment votre situation socio-économique contribue-t-elle positivement ou négativement à la paix dans la famille?

#### Sujet 5:

### Quelle est l'influence de votre changement au niveau de la Communauté?

#### EXAMPLES

- ▶ Est ce que vous êtes un modèle à suivre pour les autres hommes ou familles? Comment faites vous pour être un bon modèle?

- ▶ Est ce que vous êtes respecté dans la communauté: si non, pourquoi? Expliquez.
- ▶ Est ce qu'il y a des personnes qui vous demandent des conseils? (Expliquez)
- ▶ Avez-vous plus ou moins d'amis qu'avant les groupes de LP? Avez -vous perdu des amis après les changements?
- ▶ Actuellement, qu'est ce que vous faites dans votre communauté pour prévenir la violence?
- ▶ Votre image dans la communauté a -t-elle changé positivement après les groupes? Comment?
- ▶ Pensez -vous que vous avez positivement contribué aux changements de comportement des autres?

### Sujet 6 :

**Quelles sont les compétences et les connaissances qui ont contribué à la prévention de la violence conjugale? (et s'il n'y a pas de changement, que ce qui a causé la rechute?)**

#### EXAMPLES

- ▶ Quelles sont les connaissances et compétences des groupes que vous utilisez encore? (Vérifiez, si la communication avec la femme existe, s'il contrôle sa violence et sa frustration? Observe-t-il encore l'égalité du genre, le respect et le partage des problèmes)
- ▶ Qu'est ce que l'égalité du genre pour vous et dans votre vie quotidienne?
- ▶ Pouvez-vous donner des exemples de comportements qui ont changé grâce aux compétences de Living Peace
- ▶ Quelles sont les compétences et les connaissances des groupes qui sont devenues moins utiles pour vous?
- ▶ Quels sont les changements survenus dans votre famille depuis l'intervention?
- ▶ Avez-vous besoin de nouvelles connaissances et compétences?
- ▶ Avez vous quelques recommandations pour l'avenir de notre intervention avec les hommes pour l'améliorer?

# Annex 3:

## Guidelines for Second Round

### Guide d'entretien pour les hommes bénéficiaires du projet

#### Instructions générales

1. Groupe cible :
  - L'homme bénéficiaire
  - Son épouse
  - Un membre de famille ou voisin/ami
2. Ne demandez plus aux interviewés s'il y a changement: Tous ont un changement dans un tel ou tel domaine, mais focalisez-vous à quel moment le changement est arrivé; préoccupez-vous de savoir POURQUOI et COMMENT le bénéficiaire maintient ce changement.

#### 1. Gérer les problèmes de la vie

- ▶ Comment gérez-vous actuellement les problèmes de la vie? (ex: tensions /conflits dans la famille, stress, frustration, colère, quand il n'y a pas par exemple:
  - ▶ à manger,
  - ▶ d'argent
- ▶ Avez-vous trouvé d'autres manières/façons/stratégies de gérer vos expériences de trauma/blessures antérieures?
- ▶ Vous arrive-t- il encore de perdre votre contrôle à la maison? (Exemples battre, insulter, punir votre femme/enfants.)? Pouvez vous donner les exemples?
- ▶ Quelle est votre réaction si votre femme vous provoque ou vous agresse? Pouvez- vous donner des exemples concrets qui ont suscité votre colère?
- ▶ Comparativement à votre vie avant le projet; Quel est le rôle/la place que l'alcool /drogue occupe dans votre vie? Comment régulez-vous votre consommation? Quel conseil pouvez-vous donner pour diminuer /arrêter la consommation de l'alcool/drogue?
- ▶ Comment votre changement face à la consommation de l'alcool a-t-il influencé celle de votre femme? De vos amis?



- ▶ Avez-vous connu une rechute sur tel ou tel comportement? Lequel? Pourquoi? A quel moment et que faites-vous pour contrôler/gérer cela?
- ▶ Quel thème/séance vous a-t-il aidé à changer et pourquoi? (Il peut énumérer beaucoup de thèmes mais insister pourquoi ces thèmes l'ont-ils touché/changé)
- ▶ Les exercices lors des séances et les devoirs à la maison vous ont-ils aussi aidé à changer? Comment?
- ▶ Comment le changement de vos comportements a-t-il influencé votre identité masculine?

## 2. Relations sociales

- ▶ Comment les autres participants du groupe ont-ils influencé votre estime de soi, votre perception/valeur d'être homme? Comment cela vous a-t-il aidé dans le processus de changement?
- ▶ Comment cela joue-t-il un rôle dans le maintien (renforcement) des changements même 3 ans après?
- ▶ Y a-t-il des activités qui vous mettent en relations ou en contact avec les hommes (participants) de votre groupe? Si oui, lesquelles et quelle est la fréquence de vos rencontres? Si non, pourquoi?
- ▶ La confiance et le soutien mutuel que vous avez eus dans le groupe existent-ils encore? Si oui, comment? Si non, pourquoi?
- ▶ Comment le groupe a contribué à l'amélioration de vos relations sociales? Y a-t-il des changements dans les relations familiales et/ou avec les voisins, grâce à votre participation dans le groupe?
- ▶ Comment échangez-vous vos expériences et entretenez-vous vos activités économiques avec les autres membres de la communauté?
- ▶ Avez-vous quelques responsabilités au sein de la communauté? Lesquelles? Pourquoi et comment les assumez-vous? (Précisez s'il y a eu changement/différence par rapport à la période d'avant projet)
- ▶ Quel est le thème/séance qui vous a aidé à améliorer vos relations sociales et pourquoi?
- ▶ Comment gérez-vous les conflits avec les autres? (Amis, voisins, communauté)

## 3. Relations au foyer

- ▶ Y a-t-il maintenant la paix dans votre foyer? Qu'est-ce que cela veut dire? Qu'est-ce qui a changé dans votre foyer?
- ▶ Que veut dire une bonne relation et compréhension avec l'épouse? Qu'est-ce qui a changé dans ce domaine dans votre foyer?
- ▶ Pour vous, que veut dire une bonne relation avec les enfants? Qu'est-ce qui a changé dans votre rôle de père? Quelles sont les activités que vous accomplissez actuellement que vous ne faisiez pas avant le projet?

Comment les enfants réagissent-ils par rapport à ce changements?

- ▶ Que pensez-vous d'un rapport sexuel consensuel et Quels en sont les effets dans votre vie de couple? Comment contribue-t- il au planning familial? L'appliquez vous dans votre foyer?
- ▶ Comment votre participation dans le groupe a contribué au changement de mentalité par rapport aux femmes violées? Comment cela vous a-t-il aidé à l'acceptation et à l' amélioration des relations avec votre épouse?
- ▶ Comment votre participation dans le groupe vous a-t-il aidé à accepter l'enfant issu du viol?
- ▶ Quel est le thème/séance ou expérience qui a contribué à l'acceptation de votre épouse/enfant après séparation?
- ▶ Que faites-vous pour protéger un enfant issu du viol contre la stigmatisation dans la famille (avec d'autres enfants) ou dans la communauté?

#### 4. Responsabilité et bien-être de la famille (Contribution au revenu familial, partage des tâches dans la famille, prise de décision sur l'utilisation du patrimoine familial, scolarisation des enfants...)

- ▶ Comment contribuez vous au bien -être de la famille? (Donnez des exemples concrets)
- ▶ Après les groupes de Promundo prenez-vous des décisions en collaboration avec votre femme? Partagez-vous les revenus familiaux avec votre femme? (Exemples).
- ▶ Quel intérêt/motivation avez-vous trouvé en donnant plus de pouvoir à votre femme?
- ▶ Pensez-vous que vous avez perdu votre pouvoir ou influence? Quel genre d'homme vous sentez-vous actuellement?
- ▶ Quels sont les avantages que vous avez trouvés en partageant votre pouvoir avec votre femme?
- ▶ Quels sont les avantages de partager les tâches/ travail du ménage avec votre femme?

#### 5. Changement des normes culturelles (valeurs qui alimentent les violences basées sur le genre / violence conjugale contre la femme)? Ici c'est la prévention

- ▶ Y a-t- il changement des normes culturelles sur la violence conjugale dans votre foyer? Pouvez -vous donner des exemples concrets sur ce changement des normes alimentant la violence envers les femmes et les filles?
- ▶ Comment cela contribue-t-il à la réduction des violences conjugales et de toutes les normes dans la famille élargie?
- ▶ Comment votre changement (ne pas utiliser la violence dans votre foyer) influence-il positivement les autres a stopper la violence conjugale? Pouvez-vous donner des exemples?

- ▶ Comment réagissez-vous aux critiques négatives de la communauté/famille vis-a-vis de votre changement? (Par exemple vous êtes devenu sous ordre de la femme/on vous a mis dans la bouteille, etc.)
- ▶ Comment gérez-vous les critiques négatives de votre changement auprès de la famille et communauté: (vous êtes devenu une femme, mis dans la bouteille)
- ▶ Quelles sont les réactions des voisins/communauté/famille vis-a-vis de l'acceptation de votre femme violée et /ou de votre enfant issu du viol?

## Guide d'entretien pour les femmes de participants

### 1. Gestion des problèmes de la vie

- ▶ Actuellement, comment votre mari gère-t-il les problèmes de la vie? (ex : tensions /conflits dans la famille, stress, frustration, colère, quand il n'y a pas par exemple:
  - ▶ à manger,
  - ▶ D'argent
- ▶ Votre mari a-t-il trouvé d'autres manières/façons/stratégies de gérer les expériences de trauma/blessures antérieures?
- ▶ Est-ce que votre mari perd-il encore le contrôle à la maison? (Exemples: vous battre, vous insulter, vous punir ou agresser les enfants.)? Pouvez-vous donner les exemples?
- ▶ Comment votre mari réagit-il quand vous le provoquer? Vous agresse-t-il? Pouvez-vous donner des exemples concrets qui ont suscité sa colère?
- ▶ Selon vous, quel est le rôle/la place qu'occupe l'alcool /drogue dans la vie de votre mari, comparativement avant le projet? Regule-t-il sa consommation? Quel conseil pouvez vous lui donner pour diminuer /arrêter sa consommation de l'alcool/drogue?
- ▶ Comment son changement face à la consommation de l'alcool vous a-t-il influencée/aidée, vous et vos enfants ainsi que ses amis?
- ▶ Votre mari a-t-il connu une rechute dans tel ou tel autre comportement? Lequel? Pourquoi? A quel moment et que fait-il pour contrôler/gérer cela?
- ▶ Pouvez-vous nous dire quel thème/séance a-t-il aidé votre mari à changer et pourquoi? (Elle peut énumérer beaucoup de thèmes).
- ▶ Les exercices lors des séances et les devoirs à la maison vous ont-ils aussi aidé à changer? Comment?
- ▶ Pensez-vous que le changement des comportements de votre mari a influencé son identité masculine? Comment? (Donnez quelques exemples).

## 2. Relations sociales

- ▶ Pensez-vous que les autres participants du groupe ont influencé l'estime de soi de votre mari, sa perception/valeur d'être homme? Comment cela a-t-il contribué au processus de son changement? (Elle donne quelques exemples).
- ▶ Comment cela joue un rôle dans le maintien (renforcement) des changements même 3 ans après?
- ▶ Y a-t-il des activités qui mettent en relations ou en contact votre mari avec les autres hommes (participants) de son groupe? Si oui, lesquelles et quelle est la fréquence de leurs rencontres? Si non, pourquoi?
- ▶ Pensez-vous que la confiance et le soutien mutuel qu'ils avaient eus dans le groupe existent encore? Si oui, comment? Si non, pourquoi?
- ▶ Comment le groupe a contribué à l'amélioration de ses relations sociales? Y a-t-il des changements dans les relations familiales et/ou avec les voisins, grâce à la participation de votre mari dans le groupe?
- ▶ Comment échangez-vous vos expériences et entretenez-vous vos activités économiques avec les autres membres de la communauté?
- ▶ Votre mari a-t-il quelques responsabilités au sein de la communauté? Lesquelles? Pourquoi et comment les assume-t-il? (Précisez s'il y a eu changement/différence par rapport à la période d'avant projet).
- ▶ Quel est le thème/séance qui vous a aidé à améliorer vos relations sociales et pourquoi?
- ▶ Comment votre mari gère-t-il les conflits avec les autres? (Amis, voisins, communauté)

## 3. Relations au foyer

- ▶ Ya-t-il maintenant la paix dans votre foyer? Qu'est-ce que cela veut dire? Qu'est-ce qui a changé dans votre foyer?
- ▶ Que veut dire une bonne relation et compréhension avec l'époux? Qu'est-ce qui a changé dans ce domaine dans votre foyer?
- ▶ Selon vous, comment votre mari considère-t-il une bonne relation avec vous et les enfants? Qu'est-ce qui a changé dans son rôle de père? Quelles sont les activités qu'il accomplit? Comment les enfants réagissent-ils par rapport à ces changements?
- ▶ Que pensez-vous d'un rapport sexuel consensuel avec votre mari et quels en sont les effets dans votre vie de couple? Comment contribue-t-il au planning familial? L'appliquez-vous dans votre foyer?
- ▶ Comment la participation de votre mari dans le groupe a contribué au changement de mentalité par rapport aux femmes violées? Comment cela l'a-t-il aidé à vous accepter et à améliorer vos relations? *NB: ces questions concernent les femmes ayant aussi des enfants issus du viol (le chercheur doit être prudent à poser ces questions. Pensez à les adapter)*
- ▶ Comment la participation de votre mari dans le groupe l'a-t-il aidé à accepter l'enfant issu du viol?

- ▶ Quel est le thème/séance/expériences a-t-il influencé votre mari à vous accepter vous et viol?
- ▶ Que fait votre mari pour protéger un enfant issu du viol contre la stigmatisation dans la famille (avec d'autres enfants) ou dans la communauté?

#### 4. Responsabilité et bien être de la famille (Contribution au revenu familial, partage de tâches dans la famille, prise de décision sur l'utilisation du patrimoine familial, scolarisation des enfants, ...)

- ▶ Comment votre mari contribue-t-il au bien-être de la famille? (Donnez des exemples concrets).
- ▶ Après les groupes de Promundo, prenez-vous des décisions en collaboration avec votre mari? Partagez-vous les revenus familiaux avec lui? (Pouvez-vous donner des exemples svp!)
- ▶ Pouvez-vous nous dire de quelle manière votre mari vous donne-t-il plus de pouvoir? Quels sont ses intérêts et sa motivation? (Exemples svp!)
- ▶ Pensez-vous qu'en vous donnant le pouvoir, il a perdu son identité masculine? (Pouvoir, influence)? Quel genre d'homme est-il devenu?
- ▶ Quels sont les avantages que vous avez trouvés en partageant ensemble le pouvoir avec votre mari?
- ▶ Quels sont avantages de partager les tâches/ travail du ménage avec votre mari?

#### 5. Changement des normes culturelles (valeurs qui alimentent les violences basees sur le genre /violence conjugale contre la femme)? Ici c'est la prévention.

- ▶ Y a-t-il changement des normes culturelles sur la violence conjugale dans votre foyer que vous avez constaté chez votre mari? Pouvez-vous donner des exemples concrets sur ce changement des normes alimentant la violence envers les femmes et les filles?
- ▶ Comment cela contribue-t-il à la réduction des violences conjugales et de toutes les normes dans la famille élargie?
- ▶ Comment le changement de votre mari (ne pas utiliser la violence dans votre foyer) influence-t-il positivement les autres hommes à stopper la violence conjugale? Pouvez-vous donner des exemples?
- ▶ Comment votre mari réagit-il aux critiques négatives de la communauté/famille vis-a-vis de son changement? (par exemple : il est devenu sous ordre de la femme, ...)
- ▶ Comment aidez-vous votre mari à gérer les réponses négatives de son changement auprès de famille et communauté: (Exemple : il est une femme, il a été mis dans la bouteille).
- ▶ Quelles sont les réactions des voisins/communauté/famille face à votre mari de vous avoir acceptés vous ainsi que l'enfant issu du viol? (*Soyez prudent en posant cette question*)

## Guide pour les membres de famille/les voisins

### 1. Gestion des problèmes de la vie

- ▶ Actuellement, comment votre membre de famille/voisin/ami gère-t-il les problèmes de la vie? (Ex: tensions /conflits dans la famille, stress, frustration, colère, quand il n'y a pas par exemple:
  - ▶ à manger,
  - ▶ D'argent, chômage
- ▶ Votre membre de famille/voisin/ami a-t-il trouvé d'autres manières/façons/stratégies de gérer les expériences de trauma/blessures antérieures?
- ▶ Est-ce que votre membre de famille/voisin/ami perd-il encore le contrôle à la maison? (Exemples: vous battre, vous insulter, vous punir ou agresser les enfants.)? Pouvez-vous donner les exemples?
- ▶ Comment votre membre de famille/voisin/ami réagit-il quand il est provoqué? Est-il agressif? Pouvez-vous donner des exemples concrets qui ont suscité sa colère?
- ▶ Selon vous, quel est le rôle/la place qu'occupe l'alcool /drogue dans la vie de votre membre de famille/voisin/ami, comparativement avant le projet? Régle-t-il sa consommation? Quel conseil pouvez-vous donner lui pour diminuer /arrêter sa consommation de l'alcool/drogue?
- ▶ Comment sont les changements face à la consommation de l'alcool vous a-t-il influencés ou aidés, vous et la communauté?
- ▶ Votre membre de famille/voisin/ami a-t-il connu une rechute dans tel ou tel autre comportement? Lequel? Pourquoi? A quel moment et que fait-il pour contrôler/gérer cela?
- ▶ Pouvez-vous savoir et nous dire quel thème/séance l'a-t-il aidé à changer et pourquoi? (il peut énumérer beaucoup de thèmes).
- ▶ Pouvez-vous nous dire dans quel domaine votre membre de famille/voisin/ami a changé? Pourquoi et comment?
- ▶ Les exercices lors des séances et les devoirs à la maison l'ont-ils aidé à changer? Comment?
- ▶ Pensez-vous que le changement des comportements de votre membre de famille/voisin/ami a influencé son identité masculine? Comment? (Donnez quelques exemples).

### 2. Relations sociales

- ▶ Pensez-vous que les autres participants du groupe ont influencé son estime de soi, sa perception/valeur d'être homme? Comment cela a-t-il contribué au processus de son changement? (Donnez quelques exemples).

- ▶ Comment cela joue un rôle dans le maintien (renforcement) des changements même 3 ans après?
- ▶ Y a-t-il des activités qui le mettent en relations ou en contact avec les autres hommes ex-participants de son groupe? Si oui, lesquelles et quelle est la fréquence de leurs rencontres? Si non, pourquoi? (Exemples)
- ▶ Pensez-vous que la confiance et le soutien mutuel qu'ils avaient ont eus dans le groupe existent encore? Si oui, comment? Si non, pourquoi? (Exemples)
- ▶ Comment le groupe a contribué à l'amélioration de ses relations sociales? Y a-t-il des changements dans les relations familiales et/ou avec les voisins, grâce à sa participation dans le groupe? (Exemples)
- ▶ Comment échange-t-il ses expériences et entretient-il ses activités économiques avec les autres membres de la communauté? (Exemples)
- ▶ Votre membre de famille/voisin/ami a-t-il quelques responsabilités au sein de la communauté? Lesquelles? Pourquoi et comment les assume-t-il? (Précisez s'il y a eu changement/différence par rapport à la période d'avant projet).
- ▶ Quel est le thème/séance qui l'a aidé à améliorer ses relations sociales et pourquoi?
- ▶ Pensez-vous que son changement a-t-il contribué à l'amélioration des relations sociales ? Comment et pourquoi?
- ▶ Comment votre membre de famille/voisin/ami gère-t-il les conflits avec les autres? (Amis, voisins, communauté)

### 3. Relations au foyer

- ▶ Y a-t-il maintenant la paix dans son foyer? Qu'est-ce que cela veut dire? Qu'est-ce qui a changé dans son foyer? (Exemples)
- ▶ Selon vous, comment votre membre de famille/voisin/ami considère-t-il une bonne relation avec sa femme et ses enfants? Qu'est-ce qui a changé dans son rôle de père? Quelles sont les activités qu'il accomplit? Comment les enfants réagissent-ils par rapport à ce changement? Qu'est-ce qui a changé dans ce domaine avec vous?  
NB: *Concerne les voisins et amis proches*
- ▶ Que pensez-vous d'un rapport sexuel? Comment contribue-t-il au planning familial? Est-ce que votre ami/voisin l'applique chez lui?
- ▶ Savez-vous quelque chose sur la vie sexuelle de votre membre de famille/voisin/ami dans son foyer?
- ▶ Comment la participation de votre membre de famille/voisin/ami dans le groupe a contribué au changement de mentalité par rapport aux femmes violées? (*Le chercheur doit être prudent avant de poser cette question. Peut-être le voisin ne sait pas que la femme a un enfant issu du viol*)
- ▶ Comment la participation de votre membre de famille/voisin/ami dans le groupe l'a-t-il aidé à accepter l'enfant issu du viol? (*Soyez prudent!*)

- ▶ Que fait votre membre de famille/voisin/ami pour protéger cet enfant issu du viol contre la stigmatisation dans la famille (avec d'autres enfants) ou dans la communauté? (*Soyez prudent!*)

#### 4. Responsabilité et bien-être de la famille (Contribution au revenu familial, partage de tâches dans la famille, prise de décision sur l'utilisation du patrimoine familial, scolarisation des enfants...)

- ▶ Comment votre membre de famille/voisin/ami contribue-t-il au bien-être de sa famille? (Donnez des exemples concrets).
- ▶ Après les groupes de Promundo, votre membre de famille/voisin/ami associe-t-il son épouse dans la prise de décisions? Partage-t-il ses revenus avec sa famille? (Exemple svp!)
- ▶ Pouvez-vous nous dire de quelle manière votre membre de famille/voisin/ami donne-t-il plus du pouvoir à son épouse? Quels sont ses intérêts et sa motivation? (Exemple svp!)
- ▶ Pensez-vous qu'en partageant le pouvoir avec sa femme, il a perdu son identité masculine? Quel genre d'homme est-il devenu? (Exemple svp!)
- ▶ Quels sont les avantages que vous avez trouvés chez votre membre de famille/voisin/ami en partageant le pouvoir avec sa femme? (Exemple svp!)
- ▶ Selon vous, quels sont les avantages de partager les tâches/ travail du ménage avec son épouse? (Exemple svp!)

#### 5. Changement des normes culturelles (valeurs qui alimentent les violences basées sur le genre /violence conjugale contre la femme)? Ici c'est la prévention.

- ▶ Avez-vous remarqué de changement des normes culturelles sur la violence conjugale dans le foyer de votre membre de famille/voisin/ami? Pouvez-vous donner des exemples concrets sur ce changement des normes alimentant la violence envers les femmes et les filles?
- ▶ Comment cela contribue-t-il à la réduction des violences conjugales et de toutes les normes dans la famille élargie? (*Exemples svp!*)
- ▶ Comment le changement de votre membre de famille/voisin/ami (ne pas utiliser la violence dans son foyer/famille) influence-t-il positivement les autres hommes à stopper la violence conjugale? Pouvez-vous donner des exemples?
- ▶ Comment votre membre de famille/voisin/ami réagit-il aux critiques négatives de la communauté/famille vis-à-vis de son changement? (Par exemple: il est devenu sous ordre de la femme).
- ▶ Comment aidez-vous votre membre de famille/voisin/ami à gérer les réponses négatives de son changement auprès de sa famille et certains membres de la communauté: (Exemple: il est une femme, il a été mis dans la bouteille). (*Exemple svp!*)
- ▶ Quelles sont vos réactions face à votre membre de famille/voisin/ami ayant accepté sa femme violée ainsi que l'enfant issu du viol? (*Soyez prudent svp!*)





