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Inclusion, Accountability, Reducing Exploitation

Understanding Behavioural Change

Preventing Gender-Based Violence and Child Marriage in Punjab and Khyber Pakhtunkhwa

Research Study

May 2026

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Acknowledgements:

This document is one of a series of research studies commissioned by Aawaz II, British Council. We acknowledge the efforts of Akademos, the research supplier for Aawaz II. The technical guidance and extensive support of the Aawaz II team throughout the process were invaluable. The research would not have been completed without the field support of Aawaz II district and provincial partners. Most of all, we acknowledge the insights, time and contributions of Aawaz II community members. Their spirit of volunteerism and commitment to social change are inspiring.

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Acronyms

AAC	Aawaz Aagahi Centre
AC	Assistant Commissioner
ACA	Aawaz Change Agent
ASI	Assistant Sub-Inspector
BISP	Benazir Income Support Programme
CEO	Chief Executive Officer (District Education)
DC	Deputy Commissioner
DF	District Forum
DPO	District Police Officer
EWS	Early Warning System
FGD	Focus Group Discussion
GBV	Gender-Based Violence
KAP	Knowledge, Attitudes and Practices
KII	Key Informant Interview
KP	Khyber Pakhtunkhwa
NADRA	National Database and Registration Authority
NCHR	National Commission for Human Rights
PSER	Punjab Socio-Economic Registry
PSLM	Pakistan Social and Living Standards Measurement Survey
PST	Primary School Teacher
PWD	Person with Disability (or Persons with Disabilities if used collectively)
RP	Resource Person
RTI	Right to Information
SIG	Special Interest Group
SMO	Social Mobilization Officer
VF	Village Forum
VSO	Volunteer Support Officer

Executive Summary

This qualitative study investigated behavioural change processes related to child marriage (CM) and gender-based violence (GBV) prevention in communities where Aawaz II is implemented in Pakistan. Using an iterative outcome harvesting methodology, the research was conducted between July and October 2025 across seven districts in Punjab (Sheikhupura, Bahawalnagar, Sialkot, Okara and Sahiwal) and Khyber Pakhtunkhwa (Abbottabad and Nowshera). Data was collected through 9 Focus Group Discussions with community members (98 participants) and 9 Key Informant Interviews with programme staff, community leaders, religious minorities, persons with disabilities and transgender individuals. The sample comprised representatives of 3 religious communities (Islam, Christianity, Hinduism) and included 14 persons with disabilities (13%). Most participants (83%) were aged between 18 and 45 years.

The findings demonstrate that Aawaz II's multi-component approach is generating observable behavioural change at three interconnected levels: individual attitude shifts, household decision-making dynamics and community-level collective action. These shifts are consistent with the programme's behaviour change model, which aims to move communities from information dissemination through awareness building to commitment, action and ultimately social transformation around two specific themes: child marriage and gender-based violence. The study identifies both the mechanisms driving change and the persistent structural barriers that constrain it.

Key Findings

Child Marriage Prevention

The analysis reveals significant shifts in attitudes and practices related to child marriage across multiple programme districts.

1. **Increased female agency in marriage decisions:** Women and girls are increasingly speaking up and taking active roles in marriage decisions, a fundamental departure from past norms where marriages were arranged without their input. This shift is evident in both Punjab and KP, suggesting it is not limited to one cultural context. Girls themselves are now articulating refusal to marry young, indicating internalised awareness that was largely absent before programme engagement. In Abbottabad, women reported:

   "Previously anyone would impose their decision on us… Now there is so much awareness, at the minimum, we can speak up to convey our point of view."

   Girls themselves now articulate refusal, as one young woman from KP commented:

   "Girls themselves are aware and say we won't marry, it's not our age to marry."

   This shift is significant given that child marriage remains prevalent at alarming rates: according to the Punjab Multiple Indicator Cluster Survey (MICS) 2024, 14.5% of women aged 20–24 were first married before age 18 and 2.8% before age 15. Female agency in marriage decisions represents a direct challenge to these entrenched norms, particularly in rural and peri-urban communities where the Aawaz II KAP baseline found that 85.6% of respondents believed child marriage is justified.

2. **Household and parental change:** Both fathers and mothers are changing attitudes towards early marriage of their daughters. Aawaz II video screenings of specially produced public service messages emphasising positive behaviours have emerged as a very effective intervention driving this change. The visual and narrative nature of videos creates emotional resonance that verbal awareness sessions alone do not achieve, bridging a critical literacy gap in behaviour change communication. In one documented case, a father publicly changed his position on his daughter's engagement after viewing programme videos.

As a result of the combination of behaviour change communications, interpersonal engagement and discussion sessions, mothers are emerging as protective decision-makers who exercise agency to delay or prevent child marriages, contrary to the established perception of men as the sole gatekeepers of significant household decisions, such as the marriage of offspring. In documented cases across KP, women empowered through Aawaz II community awareness sessions rejected marriage proposals for their underage daughters, including economically advantageous proposals, prioritising daughters' wellbeing and education over financial gain.

3. **Collective community interventions:** Active community forum members and volunteers have evolved from engaging in dialogue to undertaking direct collective intervention. Forum members, together with community leaders and programme volunteers, are actively visiting families to negotiate delays in planned child marriages, using health-based arguments. As male participants in Sialkot described it:

   "We informed them (the parents), if you take this step, it is very harmful for the girl's health… we all met and explained it to them and they understood."

   In moving from passive spectators to active participants of change, communities draw on legal requirements as tools of persuasion. Legal awareness, particularly knowledge of the minimum legal age for marriage and the requirement of the government-issued identity card which provides age verification for nikah (Islamic marriage contract) registration, has become a powerful mechanism enabling community members to challenge harmful practices with institutional authority rather than subjective cultural argument.

Gender-Based Violence Prevention

4. **Breaking the culture of silence:** The data indicates a robust shift from a culture of silence around GBV to active help-seeking and community intervention. Women are increasingly reaching

out to Aawaz Aagahi Centres (AACs)[1], managed by a female and male volunteer from the community, for guidance, support and referrals to relevant institutions and services. AACs function as culturally acceptable intermediate spaces that bridge the gap between private suffering and formal justice systems:

"Before we were scared to go to the police station. But now since this centre [AAC] was made, we go there and register our complaints."

This is particularly significant in KP, where the absence of female police officers creates barriers to direct engagement with law enforcement.

A notable normative shift is also occurring where men are now openly discussing women's rights in community forums, aptly described by one man as something he had never witnessed in his lifetime:

"I am 45 years old and for the first time in my life I see people talking about women's rights."

This represents more than mere participation; it signals a change in attitudes and social norms regarding women's empowerment, with men beginning to confront gender bias and extend actionable support to protect women's rights. Communities are also moving from passive observation of violence to active intervention, with forum members facilitating access to legal recourse in severe domestic violence cases.

Community members are developing broader understandings of violence that extend beyond physical abuse to include economic violence, verbal abuse and psychological harassment, representing significant cognitive change in how GBV is understood and recognised.

1 The Aawaz Aagahi Centre is a community based, volunteer managed space (provided by the community) that functions as an information and referral hub. The female and male volunteers managing the AAC also engage with households, hold sessions on child marriage, GBV and social cohesion, disseminate behaviour change messages and information about government services. They link communities with duty bearers, guiding them to relevant individuals.

Social Inclusion

Village Forums have brought Christians, Hindus and Muslims onto shared platforms, normalising cross-religious interaction in governance spaces that were previously segregated. Religious minorities are not merely participating but assuming facilitating and leadership roles within programme structures. Persons with disabilities have moved from isolation to active participation, including leadership roles within Early Warning Systems. Transgender persons have experienced a shift from ridicule and exclusion to respect and formal roles as Victim Support Officers and District Forum members.

These inclusion outcomes connect directly to child marriage and gender-based violence prevention: marginalised groups face heightened vulnerability to child marriage, domestic violence and other forms of gender-based violence and their exclusion from community platforms previously prevented them from accessing the awareness, support and institutional linkages available to others.

Gendered Resistance and Structural Barriers

These gains face persistent structural barriers. Male resistance, rooted in perceived threats to traditional authority and privilege, remains the most significant obstacle, with some men actively preventing female family members from attending awareness sessions. Deep-rooted traditions sustained by generational conformity to unequal gender roles and masculine norms create powerful inertia against change. Economic hardship continues to drive child marriage, particularly when families face acute distress, a barrier that awareness interventions alone cannot overcome. Community-level agency is often not matched by the desired institutional response; effectiveness frequently depends on individual officials' willingness rather than systematic mechanisms, revealing a gap between community demand and governance supply.

Recommendations

For Child Marriage Prevention

Recommendation 1: Scale video-based behaviour change communication systematically as the most effective intervention for low-literacy populations. This should include regular screening schedules integrated into community activities, new locally produced content featuring success stories and structured post-screening discussion sessions that link visual content to participants' own circumstances.

Recommendation 2: Strengthen legal awareness dissemination through simple, visual information materials explaining the minimum legal age for marriage, CNIC requirements for nikah registration and available helplines, distributed at all programme sites, AACs and key community spaces and reinforced through community volunteer training.

Recommendation 3: Create dedicated engagement strategies targeting mothers as protective decision-makers, including mother-focused sessions, peer networks among women who have successfully delayed daughters' marriages and provision of legal, health and economic information that enables women to exercise agency. Targeted engagement of mothers is a high-impact strategy that merits systematic investment.

Recommendation 4: Develop structured dialogues for men specifically addressing fatherhood, the health and economic benefits of daughters' education and the legal consequences of child marriage, with male peer role models identified and amplified within existing community meeting structures.

Recommendation 5: Address economic drivers through formal referral pathways connecting families at risk to existing social protection and livelihood programmes (BISP, microfinance, skills training) and advocate for child marriage prevention criteria in social protection targeting.

Recommendation 6: Pilot formal linkages between community action plans related to child marriage and Union Council planning processes, to institutionalise community voice and integrate programme evidence into local governance and development planning. Integrate child marriage prevention into nikah registration by working with Auqaf and Religious Affairs Departments to develop standardised training for Nikah Khawans (Muslim marriage officiant) and advocate for stronger age verification mechanisms in marriage registration.

For GBV Prevention

Recommendation 7: Strengthen AAC linkages with police and protection services by establishing formal referral protocols, service mapping and advocacy for Women Police Desks where absent, ensuring that community trust in AACs translates into effective institutional response rather than remaining at the community level.

Recommendation 8: Develop differentiated male engagement strategies for GBV, including structured dialogue sessions on masculinity, power dynamics and men's roles as allies, delivered by male community facilitators within existing community meeting structures and targeting GBV beyond the domestic sphere.

Recommendation 9: Build capacity among programme field staff and protection service partners for survivor-centred crisis response, including referral protocols, basic case documentation and coordination with protection services (Darul Amans (women's shelters), VAWCs, Tahaffuz Markaz (Protection Centre)).

For Government Integration and Cross-Cutting Recommendations

Recommendation 10: Advocate for government utilisation of Village Forums, AACs and community volunteers as partners in protection response, extending the reach of formal services into communities through existing programme infrastructure and strengthening the interface between duty bearers and rights holders through joint planning and accountability mechanisms.

Recommendation 11: Strengthen inclusion of marginalised groups as a programme delivery strategy, creating pathways for these community members to move into facilitating and leadership roles in the formal, government mechanisms and committees as well as informal village/ neighbourhood processes and groups.

Recommendation 12: Strengthen citizen-state engagement and institutional accountability, with regular the interface between duty bearers and rights holders through District Forums, advocacy for government visibility at community activities and structured joint planning mechanisms and special interest groups for inclusion and visibility of marginalised people.



1. Introduction

1.1 Project Background

Aawaz II is a community-based programme managed by the British Council and funded by the Foreign, Commonwealth and Development Office (FCDO), operating across 37 districts in Punjab and Khyber Pakhtunkhwa (KP) provinces since 2020. The programme connects community, district and provincial levels of engagement through a coordinated structure. At the community level, 226 Aawaz Aagahi Centres (AACs) provide safe spaces for information dissemination, guidance, support and referrals, while Village/Neighbourhood Forums (V/N Fs) bring together diverse community members to deliberate on local issues, particularly Aawaz II thematic areas: gender-based violence, child marriage, social inclusion and social cohesion. These are linked with District Forums (DFs), which coordinate across multiple AACs and V/N Fs to ensure wider advocacy and escalation of issues beyond the village level. At the highest tier, Provincial Forums (PFs) consolidate district-level insights and facilitate policy dialogue with provincial governments and institutions. Complementing these structures are youth volunteers called Aawaz Change Agents (ACAs) who play a cross-cutting role in awareness-raising, community mobilisation and addressing harmful social practices.

Central to the programme's approach is the Aawaz II behaviour change model, which targets harmful practices and negative social norms through a five-stage process: (1) Information Dissemination, (2) Awareness and Consciousness, (3) Commitment to Act and Influence, (4) Taking Actions for Change and (5) Social Transformation. This model is implemented through various mechanisms including monthly community dialogues at AACs and Village Forums, video screenings featuring dramatised scenarios and real stories, Collective Community Action Plans (CCAPs) developed by communities to address local priorities, Social Action Projects (SAPs) led by youth volunteers, communications collateral including posters, pamphlets and social media content, engagement of religious leaders and community influencers, Early Warning Systems/Early Response Mechanisms (EWS-ERM) for identifying and responding to cases and referral pathways linking communities to government services. Together, these mechanisms form the foundation of the programme's efforts to reduce child marriage and gender-based violence. This study's findings provide empirical evidence of how these mechanisms are facilitating progression from awareness and consciousness towards adopting and exhibiting new behaviours, illustrating the significance of the behaviour change model in practice, specifically in preventing child marriage and gender-based violence.

1.2 Rationale and Objectives of the Study

Despite significant investments and legal frameworks prohibiting these practices, both child marriage and gender-based violence remain deeply entrenched in Pakistani society, demanding urgent understanding of effective behavioural change mechanisms. National statistics reveal the scale of these challenges. The Pakistan Demographic and Health Survey (PDHS) 2017–18 found that 34% of ever-married women aged 15–49 have experienced spousal violence (physical, sexual or emotional), while 28% of all women aged 15–49 have experienced physical violence since age 15 (NIPS & ICF, 2019). According to the Punjab Multiple Indicator Cluster Survey (MICS) 2024, 14.5% of women aged 20–24 years were first married before age 18 and 2.8% before age 15 (Bureau of Statistics Punjab, 2024). Complementary national data from the Household Integrated Economic Survey (HIES) 2024–25 further shows that 10% of girls aged 15–19 are already married, indicating the continued prevalence of adolescent marriage.

Provincial-level data underscores these challenges in Aawaz II programme areas. In Punjab, which accounts for over 60% of

Pakistan's population, domestic violence remains the most reported form of GBV, yet the Punjab Protection of Women Against Violence Act 2016, despite establishing Violence Against Women Centres (VAWCs), faces significant implementation gaps due to limited resources and coverage (National Commission for Human Rights, 2023). In Khyber Pakhtunkhwa, restrictive gender norms and limited mobility for women compound challenges, with the province having some of the highest rates of child marriage and lowest rates of female education in the country (Pakistan Bureau of Statistics, 2020).

The Aawaz II KAP baseline survey, with a total sample of 4,578 respondents from 11 programme districts in KP and Punjab, reveals concerning patterns. Regarding child marriage, only 10.8% of respondents could identify the minimum legal age for girls as 16 years, while the majority (85.6%) believed marriage of girls under 18 years is justified. The widespread nature of the problem is evident: 29.1% reported child marriage as prevalent in their communities, yet less than 25% expressed willingness to intervene to prevent such marriages. On GBV, only 11% of survey respondents were aware of laws addressing violence against women, while 45.7% described such violence as 'quite common' in their communities. The normalisation of violence is striking, only 32.8% considered violence against women unacceptable under any circumstances and nearly half (48.4%) disclosed instances of violence within their own households. Most concerning is the lack of help-seeking behaviour and intervention, with only 8.7% having ever taken action to prevent violence against women, while 95% remained unaware of available support services. (British Council, 2024)

Research Objectives

With Pakistan having nearly 19 million child brides (UNICEF, 2021) and pervasive gender-based violence, there is a critical need for understanding effective behavioural change mechanisms that enable sustainable norms change to drive social transformation in these complex local contexts. Aawaz II presents a window for learning from a major programme intervention at scale. Understanding what works, why and under what conditions will be essential for maximising the impact of future investments in addressing these deeply entrenched harmful practices that affect millions of women and girls across Pakistan.

This study aims to understand the behavioural change processes, pathways and sustainability mechanisms related to GBV and child marriage prevention within Aawaz II communities. Secondary objectives include identifying specific Aawaz II interventions that have been most effective in shifting attitudes and practices, documenting unintended consequences of programme interventions, understanding contextual factors that facilitate or hinder behavioural change and generating recommendations for scaling effective strategies within government and development programming.

The primary research questions guiding this investigation are:

- What observable shifts in attitudes and practices related to child marriage and gender-based violence have occurred at the individual, household and community levels since the implementation of Aawaz II interventions?
- What contextual and programmatic factors have contributed to positive behavioural change regarding harmful social norms and practices of GBV and child marriage?

Secondary questions examine:

- Which specific Aawaz II activities have been most influential in shifting community perceptions and behaviours?
- How can effective strategies be scaled by government actors? Which entry points within the government are most suited to take up different elements of the Aawaz model?
- What unintended outcomes have emerged and what drivers and barriers affect the sustainability of positive behavioural changes?

1.3 Approach and Methodology

The study adopted a social constructivist paradigm (Creswell & Poth,

2018), recognising that social norms and behaviours are constructed through social interaction and can be reconstructed through deliberate interventions. It employed outcome harvesting (Wilson-Grau & Britt, 2012), a utilisation-focused evaluation method designed to identify, verify and interpret observable changes in the behaviour, relationships, actions or practices of individuals and communities that a programme has influenced.[2] Unlike conventional approaches that measure progress towards predetermined outcomes, outcome harvesting works backward from observed changes to determine whether and how an intervention contributed to them. This approach is particularly suited to complex social change contexts where outcomes are emergent and difficult to predict in advance (Quinn Patton, 2011).

A detailed account of the research design, sampling strategy, data collection procedures, outcome harvesting process, verification approach, data analysis, ethical considerations and limitations is provided in Annex A. A two-phase iterative design was used for analysis; full details of both phases, the analytical codebook and the contribution analysis procedures are provided in Annex A.

Sample and Participants

Seven districts were purposively selected, five in Punjab (Sheikhupura, Bahawalnagar, Sialkot, Okara and Sahiwal) and two in Khyber Pakhtunkhwa (Abbottabad and Nowshera), to reflect diverse implementation contexts including varied socioeconomic conditions, cultural and religious compositions and differing levels of programme engagement. While the study does not claim statistical representativeness across all programme districts, these seven were selected for information richness and contextual diversity, encompassing both rural and urban settings across two provinces (see Annex A for full selection rationale). Data were collected through nine Focus Group Discussions (FGDs) and nine Key Informant Interviews (KIIs), engaging a total of 107 participants (60 female, 44 male, 3 transgender persons). Participants represented three religious communities (56 Muslim, 45 Christian, 5 Hindu) and included 14 persons with disabilities (13% of total sample). Ages ranged from 18 to 75 years, with the majority (83%) aged between 18 and 45. Education level was not systematically captured during data collection. Full participant demographics, disaggregated by gender, age, religion and disability status, including Table 1: Overview of Data Collection Activities, are provided in Annex A.

2 A fuller explanation of outcome harvesting as a methodology is provided in Annex A.

Limitations

Several limitations should be acknowledged. First, purposive sampling through programme channels may have resulted in a bias. Second, the geographical scope of the study was limited to seven programme districts, which while selected for diversity, may not fully capture all programme contexts. Third, self-reported qualitative data on sensitive topics such as gender-based violence and child marriage may be subject to social desirability bias, particularly in community settings. Fourth, the cross-sectional design captures a snapshot rather than change over time, though the outcome harvesting approach partially addresses this through retrospective questioning about before-and-after situations. Fifth, it should be noted that findings throughout this report reflect the programme's contribution to observed changes within a broader ecosystem of social, economic and institutional factors; the study does not claim direct causal attribution.

Despite these constraints, the triangulation of FGD data with KII perspectives from implementers and officials, combined with systematic coding and team-based analysis, strengthens confidence in the validity of findings.

1.4 Theoretical Framework

This study draws on four established theories of behavioural and social change, each illuminating a distinct dimension of how

community-based interventions can shift attitudes and practices around child marriage and gender-based violence. The theories were selected because they correspond to different levels and mechanisms of change that Aawaz II targets: individual intention formation, observational learning, collective norm negotiation and the spread of new practices through social systems.

- **Social Learning Theory** (Bandura, 1977, 2001) emphasises that people learn new behaviours through observation and modelling, particularly when role models are culturally credible and when modelled behaviours are seen to produce positive outcomes. This theory is central to interpreting the impact of video screenings and local role models, two of the programme's most frequently cited mechanisms and positions Aawaz II youth volunteers and Change Agents not merely as facilitators but as observational models whose shared cultural context makes their actions particularly influential.

- **Social Norms Theory** (Bicchieri, 2017, 2020; Cislaghi & Heise, 2018, 2020) distinguishes between descriptive norms (what people actually do) and injunctive norms (what people believe they ought to do) and identifies pluralistic ignorance, where individuals privately reject a norm but publicly conform, mistakenly believing everyone else accepts it (Duque, 2017), as a key barrier to change. This concept is directly relevant to the Aawaz II baseline data, where low willingness to intervene (less than 25%) persists despite high private awareness of violence (48.4% reporting it in their own households). The programme's community forums can be understood as spaces designed to reveal this gap and enable collective re-negotiation of norms. Bicchieri (2017) further distinguishes social norms (behaviours maintained by social expectations and potential sanctions) from moral norms (behaviours maintained by internalised values) and customs (behaviours maintained by tradition and habitual practice). Whether a given practice carries active normative weight or persists primarily through convention has direct implications for intervention design: practices sustained by social sanctions may require collective re-negotiation, those sustained by moral conviction may require value reframing and those sustained by unreflective habit may respond to awareness and deliberation alone.

- **The Theory of Planned Behaviour** (Ajzen, 1991, 2020) explains individual-level change through the interaction of personal attitudes, subjective norms (perceived social expectations) and perceived behavioural control (beliefs about one's capacity to act). This framework helps interpret why community members may privately oppose harmful practices yet refrain from acting and how programme platforms that build confidence and collective backing can shift the perceived costs of intervention.

- **Rogers' Diffusion of Innovation (DOI)** theory, as elaborated by García-Avilés (2020), views behavioural change as a collective process in which new practices spread through social systems over time, with identifiable categories of adopters and a critical role for opinion leaders and communication channels. For Aawaz II, the "innovations" being diffused are positive practices, delaying marriage, valuing girls' education, rejecting violence and including marginalised groups and the programme's interventions (AACs, Village Forums, Change Agents) function as communication channels that position active members as early adopters who model new behaviours.

- The framework emerging from these four theories, notably Social Norms Theory and Social Learning Theory, which do the heaviest analytical work across the findings, aligns with the Aawaz II behaviour change model, which enables progression from awareness and critical reflection to adoption and exhibition of new behaviours through dialogue, community platforms and institutional linkages, a progression that the study's findings illustrate in practice. Full theoretical expositions with detailed citations are provided in Annex B, along with a summary Theory and Evidence Mapping table [B1].

1.5 The Context of Child Marriage and Gender-Based Violence in Pakistan

1.5.1 Scale and Drivers of Child Marriage

Violence against women and girls (VAWG) is sustained by deep-rooted patriarchal structures, cultural norms and systemic neglect. Research from South Asia underscores how this violence, including child marriage, domestic abuse and trafficking, demands programmatic interventions that address both individual and structural determinants.

Solotaroff and Pande's (2014) comprehensive World Bank analysis established that South Asia has some of the world's highest rates of early marriage, attributing this to a combination of weak legal enforcement, poor economic conditions and deeply internalised patriarchy. More recent data confirms that while progress has occurred, it remains slow and inequitable. Globally, the proportion of young women married before 18 has declined from 22% in 2014 to 18.6% (UN Women and UN DESA, 2025) and South Asia has seen prevalence fall from 46% to 26% over the past decade, with Pakistan specifically noted as having halved prevalence over two decades (UNICEF, 2023). However, at the current pace, elimination would take approximately 300 years and progress must accelerate twenty-fold to meet the SDG 2030 target (UNICEF, 2023).

Research specific to Pakistan confirms that gender norms are root causes of both child marriage and GBV, with qualitative studies indicating that family honour concerns are paramount in driving early marriage decisions (ALIGN, 2019; Jabeen & Van Zaal, 2019). The Population Council and UNFPA (2021) political economy analyses of child marriage in Punjab and Balochistan add a structural dimension to this picture: marriage also functions as a mechanism for consolidating biradari (extended kinship network) alliances and social standing and as a household economic risk-management strategy within patronage networks, not simply a consequence of poverty but a deliberate calculus embedded in local governance and kinship systems. These analyses further highlight that fathers and

male elders retain primary decision-making power over marriage, that formal law competes with parallel informal justice systems that communities often treat as more legitimate and that birth registration gaps and CNIC disparities between men and women create structural barriers to age verification and enforcement (Population Council & UNFPA, 2021).

The severe consequences of child marriage are well-documented: marriage at age 13 increases a woman's average lifetime fertility by approximately 30% compared to marrying at 18 or later, significantly increases risks of domestic violence and child mortality and constrains educational and economic opportunities (Wodon et al., 2017). On a national scale, eliminating child marriage could lower Pakistan's total fertility rate from over five children per woman to a more sustainable level (Wodon et al., 2017). Nasrullah, Zakar and Zakar (2014) demonstrate the interplay between early marriage, spousal control and violence using local data, finding that girls marrying before 18 are more likely to face emotional, physical and severe physical violence, child marriage being both a byproduct of gendered subordination and a mechanism for controlling women's freedom.

These gains are also fragile. The COVID-19 pandemic hindered progress against child marriage through school closures, increasing poverty and reduced access to health services (UNFPA & UNICEF, 2020). UNICEF (2023) estimates an additional 10 million girls may become child brides by 2030 due to pandemic impacts and models that the 2022 Pakistan floods produced an estimated 18% increase in child marriage prevalence, equivalent to erasing five years of progress. The evidence identifies specific crisis-to-marriage pathways: insecurity, fear of sexual violence, household financial distress and interrupted schooling lead families to perceive child marriage as a protective measure offering financial or social security (UNICEF, 2023). For programming in Punjab's agriculture-dependent districts, even moderate climate variability has measurable effects on child marriage prevalence, a 10% deviation in rainfall in either direction is associated with a 1% increase in child marriage levels

(UNICEF, 2023). This underscores the importance of building resilience into awareness-based interventions, as gains that do not address the protective logic families deploy during shocks may be reversed.

1.5.2 Scale and Drivers of Gender-Based Violence

The most recent global prevalence estimates indicate that approximately 27% of ever-partnered women aged 15–49 have experienced physical or sexual violence by spouse in their lifetime, with South Asia recording one of the highest regional rates at 35% (Sardinha et al., 2022). For Pakistan specifically, the WHO (2021) estimates lifetime physical and/or sexual domestic violence at 29% and past-12-months prevalence at 16%.[3] Crucially, violence starts early: globally, 24% of young women aged 15–19 years have already experienced domestic violence in their lifetime (Sardinha et al., 2022). These prevalence estimates predate COVID-19; increases in reports to helplines and service providers during the pandemic reflect service-use data rather than representative prevalence data and population-based surveys are needed to capture the full effect (WHO, 2021; Sardinha et al., 2022). This distinction is methodologically relevant for this study, which documents increased reporting through AACs and helplines, a shift in reporting behaviour rather than necessarily a change in violence prevalence.

Ali, Naylor, Croot and O'Cathain (2014) offer a context-specific examination of domestic violence in Pakistan, synthesising findings from 23 studies. They reveal how social stigma, economic dependency and weak institutional support lead to physical, psychological, sexual and economic abuse. Women's reluctance to report violence due to shame, fear and limited legal support further exacerbates the problem and creates hurdles for survivors seeking help.

3 This report uses 'domestic violence' and 'spousal violence' in accordance with terminology appropriate for the Pakistan context. International prevalence data cited in this section was originally collected under the category 'intimate partner violence' (IPV), which measures violence specifically between current or former intimate partners, a subset of the broader category of domestic violence.

Heise's (2011) evidence overview emphasises the importance of curbing domestic violence through proactive, evidence-based strategies, identifying an interplay of factors, rigid gender norms, exposure to substance abuse, childhood exposure to violence, that reinforce cycles of abuse. Sardinha et al. (2022) build on this by identifying a cluster of structural conditions associated with higher prevalence and reduced ability to leave abusive relationships: economic insecurity, gender-inequitable norms, high societal stigma, discriminatory family law and inadequate support services. Importantly, the most recent global evidence treats these as co-constitutive structural conditions operating as a system, not as a checklist of independent risk factors, a framing consistent with the multi-component, community-based approach that Aawaz II employs.

Gender-transformative interventions, as described by Dworkin et al. (2013, 2015), go beyond addressing individual behaviours to actively challenge and reshape the power relations, norms and structures that sustain gender inequality. Evidence suggests that group education, community mobilisation and awareness campaigns significantly reduce instances of violence against women, but only when adequately resourced and supported by policy. Recent evidence from the What Works to Prevent VAWG programme, which included Pakistan among its study countries, confirms that community mobilisation approaches targeting harmful gender norms are cost-effective for violence prevention, though fidelity may decline at scale (Ferrari, Vassall, & Torres Rueda, 2022). This finding is directly relevant to scaling considerations for any community-based programme.

Jewkes et al. (2015) highlight that inequitable masculinities persist as socially learned patterns rooted in patriarchy, perpetuated through power and control. These masculinity norms normalise aggression and shape men's sense of entitlement. Gender norms must be transformed through promoting equitable masculinities based on respect, tolerance and consent rather than domination.

The Pakistan Cost of Violence Against Women study quantifies the economic burden of GBV, demonstrating that violence against women

costs Pakistan approximately 0.5% to 2% of GDP annually through direct costs (healthcare, legal services, social services) and indirect costs (lost productivity, reduced human capital, intergenerational effects). This economic framing can strengthen advocacy with government stakeholders who may be less responsive to rights-based arguments alone.[4] (SDPC, 2019)

Unintended Consequences

A systematic review on child marriage prevention by Kalamar et al. (2016) emphasises that effective interventions must be multi-faceted but also warns that even well-intentioned efforts can have unintended side effects, like higher dowry demands after reducing early marriages. This makes Aawaz II's research design, using outcome harvesting to capture both intended and unintended changes, particularly valuable.

It should also be noted that the existing evidence base on violence prevention for women and girls with disabilities is disproportionately drawn from the Global North and whether mainstreamed versus targeted prevention strategies are more effective for people with disabilities remains an open question (Ferrari, Vassall, & Torres Rueda, 2022). This study includes participants with disabilities and their findings are presented in the relevant sections, but they should be interpreted with appropriate caution given this evidence gap.

1.5.3 Government Policy and Institutional Framework

Legal Framework for Child Marriage

Pakistan's legal framework on child marriage is complex and varies by province. The Child Marriage Restraint Act 1929 sets the minimum age of marriage at 16 for girls and 18 for boys, with penalties for those who solemnise or contract child marriages. However, enforcement has been weak and the law's provisions have been criticised as insufficient.

4 Social Policy and Development Centre (SPDC), NUI Galway, Ipsos Mori, and International Centre for Research on Women (ICRW). 2019. Economic and Social Costs of Violence Against Women in Pakistan: Summary Report. Galway: NUI Galway

In Sindh, the Child Marriage Restraint Act 2013 raised the minimum age for both boys and girls to 18 and increased penalties. Punjab's Child Marriage Restraint (Amendment) Act 2015 increased penalties but maintained the minimum age at 16 for girls. In KP, no provincial legislation has been passed and the 1929 federal law applies with limited enforcement. This patchwork of laws is not the result of passive legislative inertia but of active political contestation: a National Assembly bill to raise the minimum age to 18 was rejected due to opposition from religious authorities and advocacy efforts across provinces remain inconsistent, with religious leaders exercising direct influence on legislative decision-making within assemblies (Population Council & UNFPA, 2021).

A critical issue identified in the literature is the gap between law and practice. This gap is structural: formal law operates alongside parallel informal justice systems and social arbitration mechanisms that communities often treat as more legitimate, with limited interpretation of formal provisions and widespread impunity (Population Council & UNFPA, 2021). Marriage registration systems are weak, birth registration is incomplete, in Balochistan, only 22.9% of children under five had birth registration and nearly half of 15–18-year-olds lacked birth records, while a significant CNIC gender gap persists (Population Council & UNFPA, 2021) and Nikah Khawans face limited oversight. The requirement of CNIC for nikah registration provides a potential enforcement mechanism, but this is inconsistently applied and the coexistence of verbal nikah alongside formal registration further complicates regulatory oversight.

Legal Framework for Gender-Based Violence

Pakistan has multiple laws addressing GBV, including the Pakistan Penal Code provisions on assault and domestic violence, the Prevention of Anti-Women Practices Act 2011 (criminalising practices like Vani (the giving of a woman as compensation for a crime committed by her family), Swara (the same practice as observed in Pashtun communities) and forced marriage), the Protection of Women Against Violence Act 2016 (Punjab) establishing protection centres and enforcement mechaniZd frequently by study participants,

provides a national reporting mechanism for GBV cases. Aawaz II's linkage of communities to this helpline represents an important connection between community-level awareness and formal state response mechanisms.

Government Departments and Entry Points

Several government departments are relevant for scaling and institutionalising child marriage and GBV prevention, as outlined below:

- **Auqaf and Religious Affairs Departments** oversee Nikah Khawans and Registrars and have mandate for their training and registration. Integration of child marriage prevention messages into Nikah Khawans training represents a high-potential entry point.
- **Social Welfare Departments** manage protection services, including shelter homes (Darul Amans) and in Punjab, the SWD and Punjab Women Protection Authority (PWPA) are responsible for Violence Against Women Centres (VAWCs). They also administer social protection schemes that reach vulnerable populations. However, limited local governance capacity and weak oversight systems constrain institutional responsiveness to community-level needs (Population Council & UNFPA, 2021).
- **Women Development Departments** have policy mandate on women's issues and coordinate gender-related programming across government.
- **Local Government Departments** oversee Union Councils, which are the lowest tier of elected local government and have mandate for community development planning. Integration of community action plans into UC planning processes could institutionalise community voice. The department is also responsible for civil registration and verification services, including issuing birth, marriage and death certificates.

- **Child Protection Commissions and Units** operate under Social Welfare in KP and with the Home Department in Punjab. Child Protection Units (CPUs) in KP are present in 12 districts, with district and community-level committees being operationalised. In Punjab there are fewer CPUs, though plans are underway to increase the number. The mandate of the CPUs is prevention and response to child protection issues including child marriage.
- **Education Departments** have a potential role in keeping girls in school as an alternative to early marriage and in life skills education.
- **Women Police Desks:** Establishment of dedicated spaces for women in police stations to report crimes, though coverage remains limited, particularly in KP.
- **Virtual Women Police Station and Helpline 15:** Digital reporting mechanisms that address access barriers, particularly for women unable to visit police stations in person.
- **Women Safety App and Punjab Safe Cities Authority (Punjab):** Technology-based initiatives for women's protection and handling of violence complaints, providing real-time response mechanisms.
- **Tahaffuz Markaz (Punjab):** Housed in police stations, the Tahaffuz Markaz caters to transgender persons and women, providing services to GBV survivors, with potential for linkage with community structures.
- **Social Protection Programmes:** The Benazir Income Support Programme (BISP) and other cash transfer programmes have the potential to address economic drivers of harmful practices.

1.6 Evidence on Community-Based Interventions

1.6.1 Multi-Component Approaches

The global evidence base increasingly identifies community mobilisation as the most promising approach for preventing violence against women and girls and other harmful social practices. A landmark 2015 review in The Lancet by Ellsberg et al. concludes that successful interventions, particularly in low- and middle-income contexts, are participatory, engage multiple stakeholders and focus on transforming the underlying social norms that perpetuate harm. The Aawaz II programme is a direct operationalisation of this evidence-based model.

Systematic reviews indicate that programmes combining community dialogue, education and economic empowerment show the greatest impact on delaying marriage age (Kalamar, Lee-Rife, & Hindin, 2016; Malhotra & Elnakib, 2021). Research by Erulkar (2013) and more recently by Wodon et al. (2017) demonstrates that structured community dialogues can shift social norms when they engage diverse community stakeholders including religious leaders, parents and youth. These findings support the Aawaz II approach of utilising multiple intervention points, AACs, forums and Change Agents, rather than relying on single-component strategies.

Denno, Hoopes and Chandra-Mouli (2015) provide validation for the architectural design of Aawaz II. They find that the most successful strategies are comprehensive "packages" that address both the 'supply' of services and information and the 'demand' from an engaged community. Aawaz II's three-tier structure reflects this: the AACs function as accessible hubs for information and support (supply side), while Village Forums and ACAs act as a powerful engine for generating demand and community acceptance (demand side). However, Denno et al. (2015) also note that it is "nearly impossible to disentangle the attributable contributions of each component" within these successful packages, directly informing this study's research question about which specific activities have been most influential.

1.6.2 The SASA! Study

The effectiveness of community mobilisation is supported by rigorous quantitative evidence. The SASA! study in Uganda, a cluster randomised controlled trial, demonstrated that a community mobilisation approach can achieve profound and measurable results: a 52% reduction in past-year physical domestic violence among women and significantly lowered social acceptability of violence (Abramsky et al., 2014).

This empirical validation provides a powerful lens through which to interpret qualitative shifts observed in Aawaz II communities. The documented change from "passive acceptance to active community intervention" and "increased agency and voice for women" align directly with the normative change processes demonstrated by SASA, though it should be noted that the Aawaz II KAP baseline survey (British Council, 2024), in which only 25% of respondents expressed willingness to intervene, establishes a starting point against which quantitative change will be assessed in the endline. The present qualitative study captures the nature and mechanisms of emerging shifts; population-level measurement of their scale remains for future assessment.

1.6.3 Youth as Change Agents

Recent studies highlight the critical role of youth as change agents, with research showing that youth-led interventions are particularly effective because young people can challenge norms while remaining culturally embedded in their communities (John et al., 2019; Villa-Torres & Svanemyr, 2015). Young people occupy a unique position: they are less invested in maintaining traditional practices than older generations, yet they possess intimate knowledge of community dynamics and speak with cultural authenticity.

However, Villa-Torres and Svanemyr (2015) caution that many youth engagement initiatives risk falling into tokenism and often have weak

evidence bases for creating systemic change. Using frameworks like Hart's 'Ladder of Participation,' they call for analysis of whether youth are truly empowered to co-design and lead interventions or are primarily instruments for delivering pre-defined messages. For Aawaz II ACAs to effectively challenge norms held by the majority of their community, their role must transcend mere information dissemination to embody genuine leadership.

1.7 Scaling Up and Sustainability

1.7.1 Why Interventions Fail to Scale

Successfully translating pilot interventions into sustainable, widespread practice remains one of the most difficult challenges in social development. While many initiatives show promising results, research suggests that nearly two-thirds of organisational change efforts fail to achieve lasting impact (Damschroder et al., 2009). Understanding why this occurs requires attention to implementation science, which examines the conditions under which effective interventions can be sustained and expanded.

The Consolidated Framework for Implementation Research (CFIR) (Damschroder et al., 2009) identifies five domains affecting implementation success: intervention characteristics (complexity, relative advantage), outer setting (external policies, community needs), inner setting (organisational culture, readiness), characteristics of individuals (knowledge, beliefs) and process (planning, executing, reflecting). Aawaz II's experience can be understood through this framework: the programme operates in communities marked by low literacy and strong patriarchal traditions (outer setting challenges), yet also by growing "tension for change" (opportunity). It introduces mechanisms such as video screenings and legal awareness, tools making complex ideas accessible and socially legitimate, generating outcomes like greater female agency.

1.7.2 Fidelity versus Adaptation

Traditional implementation models often view local adaptations as

"programme drift" risking decline in effectiveness. However, newer approaches such as the Dynamic Sustainability Framework (Chambers et al., 2013) argue that adaptation is essential for sustained impact. The key is distinguishing between adaptations that maintain the intervention's core function versus those that dilute its active ingredients.

For Aawaz II, when families use legal loopholes or communities adapt approaches to local customs, this is feedback from context requiring response. Rather than rigidly adhering to initial design, effective programmes respond dynamically. The Village Forums' evolution from discussion bodies to active intervention units may reflect both programme design, which enabled community forums to evolve and perform dialogue as well as intervention functions, and organic community adaptation as participants gained confidence and capacity. Whether understood as designed flexibility or emergent adaptation, the core function (community engagement for norm change) is maintained while the form (intervention rather than just dialogue) has evolved.

1.7.3 Pathways to Scale

The WHO framework (2010) defines scaling up not as replication but as planned institutionalisation of effective innovations. For Aawaz II, this involves two pathways:

- **Horizontal expansion:** Replicating forums and awareness activities in new areas, maintaining the community-based model.
- **Vertical integration:** Embedding principles within government systems so that changes become part of public sector functioning independent of programme support.

The latter is the bigger challenge. While communities have grown more active, their efforts often remain disconnected from formal governance structures. This disconnect likely results in part from the programme's primary focus on the demand side of community engagement and the absence of deliberate, sustained planning to

directly engage with and influence government leadership, systems and policy processes. It also stems from broader contextual factors, including government's own top-down approaches and limited institutional responsiveness to community-level agency. The political economy analyses of child marriage (Population Council & UNFPA, 2021) suggest that addressing this gap requires not only institutional design solutions but deliberate political coalition-building, media engagement and strategic reframing of discourse, implying that technical programme interventions without accompanying political strategy will face structural ceilings on scale. Aawaz II's proposal to link community action plans with Union Council processes represents a promising step towards institutionalisation, but sustained engagement with the supply side of governance remains essential.

1.7.4 Sustainability Considerations

For long-term sustainability, Aawaz II's changes must ultimately become part of the public system. Engaging government departments such as Auqaf to train Nikah Khawans reflects this goal. Following CFIR and WHO principles, Aawaz II must also build the capacity of government institutions to manage and sustain reforms independently. This requires aligning programme goals with government priorities, ensuring resources are allocated, establishing clear leadership and accountability and creating feedback mechanisms for continuous improvement.

As the Dynamic Sustainability Framework reminds us, alignment between intervention and institutional environment must be continuously revisited, sustainability is an active, ongoing process rather than an end state.

2. Findings And Analysis

This section presents findings and analysis of nine Focus Group Discussions (FGDs) and nine Key Informant Interviews (KIIs) conducted across Punjab and Khyber Pakhtunkhwa. Findings are organised thematically around the study's primary research questions, with separate treatment of child marriage and GBV.

The observed shifts can be understood at three intersecting levels: individual (changes in personal attitudes, knowledge and confidence), household (changes in family decision-making dynamics and intra-household power relations) and community (changes in collective norms, public discourse and coordinated action). These levels correspond to the Aawaz II behaviour change model, which enables progression from awareness and critical reflection to adoption and exhibition of new behaviours through dialogue, community platforms and institutional linkages. The findings illustrate this progression in practice, from individuals gaining new knowledge through awareness sessions and video screenings, to households renegotiating marriage and violence norms, to communities organising collective interventions and engaging formal institutions.

2.1 Child Marriage: Observable Shifts and Analysis

2.1.1 Increased Female Agency in Marriage Decisions

A dominant theme across the data is that women and girls are increasingly speaking up and taking active roles in marriage decisions, a significant departure from past norms where marriages were arranged without their input. This shift appears in both Punjab (Sialkot, Sheikhupura, Bahawalnagar) and KP (Abbottabad, Nowshera), suggesting it is not limited to one cultural context.

Women in Abbottabad provided testimony of this change:

"Pehle toh yeh tha ke koi bhi hum pe faisla apna dalta tha… Ab itni awareness aa gayi hai, kam se kam hum apni baat manwane ke liye… bolte hain."

("Previously anyone would impose their decision on us… Now there is so much awareness, at least we speak up to have our say.") — Female participant, FGD, Abbottabad

The shift extends to girls themselves articulating refusal. In Nowshera, women reported:

"Jankai khpal am da na raghashwa ch ay way ch sa baro te laamde zmu rawado umar na de."

("Girls themselves are aware and say we won't marry, it's not our age to marry.") — Female participant, FGD, Nowshera

In Sheikhupura, participants linked this change directly to programme structures:

"Ab jo hai, jab se aagahi center bana hai… ab bachon se poocha jata hai. Zyadatar faisle bachon ke liye jate hain."

("Now since the Aagahi centre was built… children are asked. Mostly decisions go to children.") — Female participant, FGD, Sheikhupura

Male family members can also function as allies. A woman in Sheikhupura described her brother's support:

"Mere bhai ne kaha ke nahi, abhi iski umar padhne ki hai. Hum isko padhayenge, abhi shaadi nahi karni."

("My brother said no, her age is to study right now. We will educate her; we won't marry her yet.") — Female participant, FGD, Sheikhupura

At the individual level, this represents a shift in personal confidence to voice dissent. At the household level, it indicates renegotiation of

who participates in marriage decisions, a direct challenge to the norm of unilateral male elder decision-making. This shift is significant given that child marriage remains prevalent at alarming rates: according to the Punjab MICS 2024, 14.5% of women aged 20–24 were first married before age 18 and the Aawaz II KAP baseline found that 85.6% of respondents believed child marriage to be justified. Voiced refusal and family deliberation, where previously there was none, represent a meaningful departure from this baseline. This shift is also analytically significant in terms of Social Norms Theory: the baseline data revealed a pattern of pluralistic ignorance, less than 25% of respondents expressed willingness to intervene to prevent child marriage, yet 29.1% reported it as prevalent in their communities. The programme's community platforms are creating the conditions for private opposition to become visible and collective and the evidence of girls themselves articulating refusal suggests that internalised awareness, not merely social pressure, is beginning to shift.

2.1.2 Parental Attitude Change: Health, Education and Daughters' Wellbeing

Video screenings emerged consistently as the most effective intervention for shifting parental attitudes, particularly among low-literacy populations. The visual and narrative nature of videos bridged a gap where verbal awareness sessions had limited impact, enabling parents to vividly see the health and social consequences of early marriage and the benefits of alternatives, creating the cognitive dissonance that purely verbal messaging could not achieve. Locally produced, culturally situated content activates Social Learning Theory's (Bandura, 1977) modelling mechanism most powerfully: when role models share the audience's social and cultural world, the observational learning is deepest.

In Abbottabad, a striking example of this emerged: a father publicly changed his position on his daughter's engagement after viewing programme videos:

"Woh banda baqaida utha hai us madam ke paas gaya hai, usne kaha

hai ke main apni beti ka rishta tay kar raha tha... lekin abhi video dekhne ke baad maine apni soch ko badla hai."

("That man stood up and went to the madam, he said I was arranging my daughter's engagement... but after watching the video I have changed my mind.") — Female participant, FGD, Abbottabad

Community leaders confirmed in KIIs that video screenings through AAC meetings were the mechanism that shifted awareness where verbal communication had not:

"Pehle jo tha kam umar ki shaadi mein... logon ko pata hi nahi tha. Jab Aawaz Do Aagahi Center ke saath humne meeting logon mein video screen ke saath jaa ke baat ki. Ab unko pata chala hai."

("Before, people didn't know about child marriage... When we went with video screens through AAC meetings... now they know.") — Male Community Leader, KII, Sheikhupura

The visual medium also served as a mobilisation tool, making it easier to gather men who might otherwise avoid awareness sessions:

"Jab hum gaon mein video lagate hain... toh log khud ba khud ikathe ho jate hain. Mardon ko bulaana aasaan ho jata hai."

("When we play a video in the village... people gather automatically. It becomes easy to call the men.") — Male participant, FGD, Nowshera

Alongside video-based communication, the programme's framing of health, education and legal rights as interlocking messaging pathways has contributed to a broader shift in how parents, particularly fathers, understand their responsibilities towards daughters. Parents are increasingly prioritising education over early marriage, viewing a daughter's education not just as a credential but as a safeguard against future poverty and vulnerability.

In Bahawalnagar, women reported a clear pattern of change:

"Logon ne apni bachiyon ko parhana shuru kar diya hai... unko ghar ke faislon mein bhi jaise ke pehle agar bachi ki shadi karni hai... ab in cheezon ki... kami ayi hai."

("People have started educating their daughters... involve them in household decisions like marriage... now these things have decreased.") — Female participant, FGD, Bahawalnagar

A father in Sialkot articulated the internal conflict and shift in thinking:

"Main apni beti ki shaadi thoda sa multawi kar raha hu... Abhi bachchi padhna chahti hai toh hum uske education khatam karke toh uske sath zyatti nahi kar rahe?"

("I am postponing my daughter's wedding... The girl wants to study, so aren't we doing injustice by ending her education?")

— Male participant, FGD, Sialkot

KIIs provided evidence of concrete outcomes where programme engagement resulted in education continuation. A Resource Person in Nowshera detailed a specific case:

"Ek minority ki bachi thi... taqreeban 13 saal ki thi... taqreeban teen sessions hum ne unke saath kiye... woh bachi dobara school mein dakhil karwayi gayi 6th class mein."

("There was a minority girl... about 13 years old... we did about three sessions with them... the girl was re-admitted to school in 6th class.") — Female Resource Person, KII, Nowshera

This case demonstrates the programme's capacity to deliver tangible life-path corrections. It is best understood as a *programmatic outcome*, achieved through sustained direct engagement, operating within a *contextual enabler* of rising community valuation of girls' education.

2.1.3 Women's Shifting Role in Marriage Gatekeeping

In the literature on social norms, "gatekeepers" are those who uphold

norms, exercise social sanctions against those who deviate and determine what is accepted within a community. In the context of child marriage, mothers and mothers-in-law have traditionally functioned as gatekeepers for the practice, facilitating and enforcing early marriage as a normative expectation. A significant finding from this study is that some women who previously upheld these norms are now using their gatekeeping influence to resist child marriage, leveraging awareness gained through the programme to intervene in family decisions.

A Resource Person in Nowshera explicitly noted:

"Taqreeban 4–5 cases roke gaye hain, us mein sab se zyada role jo hai khawateen ka raha hai."

("About 4–5 cases have been stopped and in that, the biggest role has been of women.") — Female Resource Person, KII, Nowshera

A compelling example involves a mother rejecting a financially lucrative proposal:

"Suria Khel VF mein... bachi 10th class ki student thi... 44 saal ka banda tha, America mein rehta tha... lekin uski walida ne kaha ke nahi, hum ne yeh rishta nahi karna."

("In Suria Khel VF... the girl was a 10th grade student... the man was 44, lived in America... but her mother said no, we will not do this marriage.") — Female Resource Person, KII, Nowshera

Despite the economic appeal of a proposal from abroad, the mother vetoed the marriage to prioritise her daughter's wellbeing. This shift is attributable to the programme's targeted engagement of women through awareness sessions and Village Forum participation, which provided both the knowledge base (legal age, health consequences) and the social backing (collective community support) to challenge decisions that would previously have been accepted. This complicates the assumption that child marriage is solely a product of patriarchal male decision-making: within households, mothers exercise significant influence over marriage timing and when equipped with awareness and community support, they can exercise that influence

protectively, consistent with evidence from other contexts showing that mother-daughter communication and maternal support are protective factors against child marriage (Malhotra and Elnakib, 2021). The connections documented in F.2, fathers changing their minds after video screenings, brothers advocating for sisters' education and this finding together indicate that programme engagement is shifting the position of both parents, not only fathers.

This finding should be read with two caveats. First, the shift places additional social and emotional burden on women, who must navigate resistance from male family members and community expectations while exercising this new influence, the very gatekeeping role that enables intervention also exposes them to backlash. Second, the conditions under which women are able to exercise this influence (degree of male opposition, household economic circumstances, strength of community platform support) require further investigation.

2.1.4 Collective Community Intervention and Legal Awareness as Tools of Prevention

Collective community interventions have yielded significant results in child marriage prevention. Village Forums have evolved from dialogue spaces into active intervention platforms. The Aawaz II approach of collective community action aligns well with Social Norms Theory (Bicchieri, 2017), as the deliberate, public rejection of child marriage by communities shifts the descriptive norm from "everyone accepts this practice" to "our community actively opposes it." This visibility is critical for dissolving the pluralistic ignorance identified in the baseline data. From a number of specific accounts, collective action of forum members has prevented child marriages in the intervention districts.

These collective interventions are participatory in nature and intended to support shared, positive change, not to police communities. Forum members use health-based arguments to help families understand the consequences of early marriage, approaching them with care and using accessible evidence about wellbeing. As male participants in Sialkot described:

"Humne unko bataya ke aap jante hain ke agar aap aisa qadam uthate hain tou bachi ki sehat ke liye boht zyada nuqsan de hai... hum sab ne mil ke phir unko samjhaya tou woh unki samajh mein hamari baat a gai hai." (Male, FGD, Sialkot)

("We told them do you know if you take this step, it is very harmful for the girl's health... we all met and explained it to them and they understood.")

In Abbottabad, men described using medical arguments in a similarly supportive spirit:

"Toh humne kaha tha ke medically bhi aap jayenge toh female ko bohot se effect ka saamna karna padega... Alhamdulillah se unhone phir is kaam ko avoid kiya."

("We told them medically the female will face many effects... Alhamdulillah they avoided this marriage.") — Male participant, FGD, Abbottabad

A KII from Bahawalnagar documented a powerful example of multi-stakeholder intervention. When a grandmother openly challenged the programme, stating she would marry off her underage granddaughter the next month, Village Forum members, Resource Persons and a local Nikah Khawan collectively visited the family and successfully negotiated to delay the wedding until the girl reached the legal age.

A Community Facilitator in Sialkot captured the shift from individual opinion to collective action:

"The change is that first people used to enforce their own decisions. But since the program started, people have accepted it and their attitudes have changed. And with awareness, they say, 'Come, let's make a decision together.'"

— Male Community Facilitator, KII, Sialkot

Interwoven with collective intervention is a growing command of legal frameworks as tools of community empowerment. Community

members and stakeholders are choosing not to participate in the normalisation of harmful practices, increasingly citing legal requirements and potential consequences of child marriage. This reflects not just awareness but a shift in how community members position themselves relative to the law, from bystanders subject to custom, to agents who can invoke state authority to protect children's wellbeing.

In Bahawalnagar, women explained how legal requirements have become practical tools:

"Hum log unko batate hain ke dekhein, jo shanakhti card ki ahmiyat hai... ab toh agar aap nikah khawan ke paas jayein tou woh sab se pehle maangta hi ID card hai."

("We tell them look, the importance of ID card... now if you go to a Nikah Khawan, the first thing he asks for is the ID card.") — Female participant, FGD, Bahawalnagar

Religious leaders are now operationalising law as part of their practice. In Abbottabad, women described a Pastor refusing to conduct an underage nikah and using the refusal as leverage:

"Pastor sahab ne kaha ke agar aap is cheez ko karenge tou jo bacchi jiski age hai hum uska bhi nikah nahi karenge."

("The Pastor said if you do this [underage marriage], we will not perform the nikah for the older daughter either.") — Female participant, FGD, Abbottabad

This shift from moral argument to procedural legitimacy backed by religious and state authority is significant as it moves intervention from subjective cultural debate to objective legal requirement.

A Christian community member in Sheikhupura noted similar changes across religious communities:

"Ek law pass hua hai... Christian logon ke liye... ke jo bachi jiski ID card nahi hai uska nikah nahi hoga... Ab Pastor Sahab bhi... jab tak ID card nahi, nikah nahi karte."

("A law has been passed... for Christian people... that a girl without an ID card won't have her nikah... Now the Pastors also... until there is an ID card, they do not perform the nikah.") — Community Member, KII, Sheikhupura

When communities collectively reject the normalisation of child marriage and invoke legal frameworks to do so, they make visible that private opposition is widely shared, dissolving the pluralistic ignorance that sustains harmful practices even when individuals privately oppose them.

2.2 GBV: Observable Shifts and Analysis

2.2.1 Breaking the Culture of Silence

The establishment of safe, accessible community-level platforms has allowed women to increasingly reach out to AACs for guidance, support and referrals to relevant institutions and services and to utilise the 1043 helpline. This indicates an observable shift from a culture of silence to active help-seeking, driven largely by AACs.

"Pehle humein darr lagta tha thane jaane se. Lekin ab jab se yeh center bana hai, hum wahan ja kar apni baat rakh sakte hain." (Female Participant, FGD, Bahawalnagar)

("Before we were scared to go to the police station. But now since this centre is made, we can go there and share our concerns.")

The role of AACs is distinct from formal complaint-registration bodies: they provide guidance, support and referrals to relevant institutions and services. Their significance lies in creating a community-level access point that women feel confident approaching, addressing the gap between awareness of rights and actual access to formal systems. This is consistent with evidence that effective GBV interventions create multiple entry points for support rather than relying solely on formal systems that may be inaccessible or mistrusted (Heise, 2011). The shift in women's self-efficacy is notable:

"Ab aurton ko is cheez ka pata chal gaya hai ke agar hamare sath koi masla hota hai... to hum aawaz utha sakti hain." (Female participant, FGD, Bahawalnagar)

("Now women have realised that if there is an issue with us... we can raise our voice.")

In KP, programme platforms play a particularly important role as community-level access points for guidance and referral, given the structural barriers to direct engagement with police:

"Jab se AAC Center bana hai... Aawaz II program ke zariye logon ko maloom hua ke madad mil sakti hai. Ab mashallah log khud bhi samajhte hain aur madad talash karte hain."

("Since AAC Centre was built... through Aawaz II people learned help is available. Now people understand and seek help.") — Female participant, FGD, Nowshera

A structural barrier remains that constrains the full effectiveness of this progress: the absence of female officers in police stations means that women cannot always engage with formal mechanisms even when motivated to do so.

"Hamare thano mein abhi khawateen nahi hain aisi... Woh nahi us tarah bata sakti hain apni baat."

("In our police stations there are no females like that... She cannot speak her heart out like that to a male officer.") — Female participant, FGD, Abbottabad

This quote points to a persistent institutional gap: AACs have successfully brought GBV out of the private realm and into community-level discussion, but the formal response system, particularly in KP, has not kept pace. The significance is that for many women, the journey from silence to disclosure ends at the AAC rather than reaching formal justice mechanisms. This is not a programme failure; it is a supply-side constraint that community-level demand-building alone cannot resolve.

What has been cracked, if not fully broken, is the cultural norm that GBV is a private or "hush-hush" personal matter. Through continuous

engagement, audio-visual campaigns, door-to-door outreach and network-building, the programme has created space for dialogue, acknowledgement and community-level action. GBV is now increasingly acknowledged and discussed, by both women and men, as an issue that warrants collective concern, not private silence.

This progress coexists with a persistent barrier: the culture of silence around domestic matters continues to constrain the programme's reach in some households. In Bahawalnagar, women described this directly:

"Bohot sare log aise hain ke woh chahte hain ke hamare ghar ki baat jo hai bahir na nikle... Bas unhone ek mindset bana rakha hai."

("Many people want that their household matters don't go outside... They have just made a mindset.") — Female participant, FGD, Bahawalnagar

This 'mindset' operates through what Bicchieri terms pluralistic ignorance: individuals may privately recognise that domestic violence is wrong, but believe community consensus favours non-disclosure and therefore conform to the perceived norm of silence. The culture of silence is analytically distinct from patriarchal resistance: where male resistance involves active opposition to women's empowerment, the culture of silence can be maintained by women themselves, mothers who discourage daughters from speaking out, neighbours who choose not to intervene, survivors who weigh the costs and decide that silence is the safer option. Addressing this barrier requires not only continued awareness work but visible evidence that speaking out leads to supportive outcomes rather than further harm, reinforcing why the community response cases documented in F.8, despite their limitations, carry significance as signals that breaking silence can produce results.

2.2.2 Men's Collaboration to Amplify Women's Voices

A significant normative shift is occurring where men are not merely discussing women's rights in forums but actively changing attitudes and extending actionable support to protect women's rights, confronting male bias and amplifying women's voices in spaces

where these topics were previously absent.

A community facilitator in Sialkot reflected on this unprecedented change:

"Main 45 saal ka hoon, aur maine apni zindagi mein pehli baar dekha hai ke log aurton ke huqooq par baat kar rahe hain."

("I am 45 years old and for the first time in my life I see people talking about women's rights.") — Male Community Facilitator, KII, Sialkot

This goes beyond mere involvement or discussions. Community engagement has shifted norms: when men publicly engage with women's rights, particularly men with social authority such as community facilitators and religious leaders, they shift the injunctive norm from "men should not concern themselves with women's issues" to "supporting women's rights is part of responsible community membership." Consequently, by engaging men and women in discussion and sessions around GBV, the programme has enabled communities to renegotiate norms and reinforce GBV as a harmful and unacceptable practice.

2.2.3 From Bystander to Intervener: Expanded Understanding and Inclusion

Communities are moving from passive observation of domestic violence to active intervention. In Abbottabad, men described this shift:

"Pehle toh hum yeh dekhte the toh bas jaan chhuda dete the... Lekin jab se yeh thoda shaoor aaya hum mein... hum us pe contribute karte hain aur koshish karte hain usko hal karne ki."

("Before we used to see it and just get rid of it... But since we got this awareness... we contribute and try to resolve it.") — Male participant, FGD, Abbottabad

This transition from bystander to intervener represents a shift in descriptive norms, when community members see others intervening, it normalises intervention and raises the social cost of passive acceptance.

Accompanying this behavioural shift is a broader cognitive change: community members are developing an understanding of GBV that extends beyond physical violence.

"Sinfi tashaddud aapka sirf maar peet nahi hai, aapke verbal alfaaz bhi... khawateen ko kam mazdoori milti hai... yeh main samajhta hun ke muaashi tashaddud hai." — Male Community Facilitator, KII, Sialkot

("Gender-based violence is not just beating, it's your verbal words too... women get less wages... I consider this economic violence.")

Men in Abbottabad explicitly categorised the public harassment of transgender persons as a form of violence:

"Bazaar mein aksar transgenderon ke saath bohot buray naam se pukara jaata hai... Unhein zehni tor par tashaddud ka nishana banaya jaa raha hota hai."

("In the bazaar transgenders are often called by bad names... They are being targeted with psychological violence.") — Male participant, FGD, Abbottabad

This expanded definition, recognising economic violence, verbal abuse and psychological harassment as forms of GBV, represents significant cognitive change consistent with gender-transformative intervention literature (Dworkin et al., 2013, 2015), which emphasises that sustainable change requires not just behaviour modification but fundamentally different ways of understanding gender relations. The evidence base is concentrated in a few sites and further investigation would strengthen confidence in its breadth.

This broadened understanding of violence is directly connected to the inclusion of marginalised groups in programme platforms. The Transgender Victim Support Officer (VSO) in Sahiwal exemplifies this transformation:

"Wahan se maine teen transgender ko wahan pe bheja, unhon ne mukammal training li, aur bohot zyada mutmain hue."

("I sent three transgenders there [Tahaffuz Markaz], they took full

training and were very satisfied.") — Transgender VSO, KII, Sahiwal

Through her role as VSO, this individual has facilitated referrals to the Tahaffuz Markaz (protection centre), where transgender community members received training on rights awareness, service navigation and peer support, enabling them to serve as points of contact for others facing violence or discrimination. This role reversal, with transgender persons facilitating access to protection services rather than being only recipients, builds trust between marginalised communities and formal institutions. When communities begin to recognise harassment of transgender persons as psychological violence and create formal pathways for their protection, it reflects the programme's broader impact on how violence is understood and addressed.

2.2.4 Community Response to Severe Cases

Programme engagement has contributed to community-level responses to severe domestic violence cases, moving beyond awareness to crisis action. These responses are primarily community-driven rather than institutionally initiated, forum members and programme participants mobilise their networks and confidence, gained through Village Forum participation and awareness sessions, to support survivors in accessing formal systems.

> *"Her teeth were broken, there was blood in her mouth... she filed an FIR against him and her husband is still in jail." — DF/SIG Member, KII, Abbottabad*

The same DF member described responding to harassment near a girls' school, prioritising girls' access to public space rather than withdrawing them from education:

"Some men used to come there... I went to the police station with the girls and their families... they also put a traffic officer's duty there." — DF/SIG Member, KII, Abbottabad

Within Diffusion of Innovation theory, highly visible outcomes of this kind accelerate adoption by demonstrating that action is possible and consequential, that community members who speak out are not alone and that intervention can produce results. While these cases demonstrate the programme's contribution to building confidence and collective capacity for community members to engage formal justice mechanisms, they should not be presented as a settled pathway to addressing GBV. Survivors who pursue formal complaints face significant risks including social ostracization and potential retaliation and the outcomes of legal processes remain uncertain. The finding is that community platforms can enable action that was previously unthinkable, not that the institutional system reliably delivers justice.

2.3 Social Inclusion

Village Forums have brought Christians, Hindus and Muslims onto shared platforms, normalising cross-religious interaction in governance spaces that were previously segregated. Religious minorities are not merely participating but assuming facilitating and leadership roles within programme structures. In Sialkot, forum members held a dedicated meeting to understand the specific problems of Christian community members and participants reported that cross-religious deliberation had become standard practice:

"No one discriminates. Whether someone is Hindu or Christian, everyone sits together and talks equally." — Male participant, FGD, Sialkot.

In Nowshera, a Hindu community member introduced Right to Information literacy to his community through the programme. These developments carry significance for the programme's core work: when rights-based messages on child marriage and GBV are carried by community members across religious lines, they signal that these are shared community concerns rather than externally imposed values.

Persons with disabilities have moved from isolation to active participation, including leadership roles within programme structures.

In Bahawalnagar, a PWD member is now considered "an equal part" of the forum, with the forum organising collectively to send disabled children to school and arrange wheelchairs. (Female participant, FGD, Bahawalnagar.) In Nowshera, a woman with a disability described the shift in her own terms:

"Mujhe bahar nikalne ki himmat nahi thi... Ab main EWS focal person ban gayi."

("I didn't have the courage to go out... Now I have become an EWS focal person.") — Woman with Disability, KII, Nowshera

An EWS focal person is positioned to identify community problems early and escalate them. Her inclusion in the programme is therefore a direct extension of its protective reach. In Abbottabad, a PWD District Forum member described the advocacy effort behind this:

"We worked very hard for the disabled... now in our area, disabled people are also included in the forum." — DF/SIG Member, KII, Abbottabad.

Transgender persons have experienced a shift from ridicule and exclusion to respect and formal roles as Victim Support Officers and District Forum members. In Sahiwal, participants described a shift in how transgender persons are perceived:

"People used to laugh seeing a transgender... now we explain to people that they too are Allah's creation." — Mixed FGD, Sahiwal.

In Abbottabad, forum members described deliberate efforts to include transgender persons in sessions where they can speak their mind. The Transgender VSO in Sahiwal's formal role, which produced the GBV protection outcome documented in F.7, was made possible by this prior shift in community acceptance.

Village Forums are also connecting marginalised communities to government services and social protection entitlements they were previously unaware of. In Okara, a participant described discovering that Rs. 4 lakh in Easter welfare funds had gone unclaimed annually:

"The Social Welfare department told me that at Easter money comes for us... They said 4 lakh rupees was left over because no one comes to us." — (Female participant, FGD, Okara.)

In Sheikhupura, a Christian community member described learning for the first time that minority cards entitle holders to government schemes:

> *"We didn't know we also had rights... Now we've learned that minority cards are made and through them schemes are available."*
>
> — (Female participant, FGD, Sheikhupura.)

Connecting marginalised communities to social protection entitlements is relevant to the study's primary mandate because economic vulnerability is a documented driver of child marriage. The study does not establish a direct causal link between scheme access and reduced harmful practices in specific cases, but notes that addressing economic exclusion reduces the structural conditions under which such practices become a perceived necessity.

These inclusion outcomes connect directly to child marriage and gender-based violence prevention: marginalised groups face heightened vulnerability to child marriage, domestic violence and other forms of gender-based violence and their exclusion from community platforms previously prevented them from accessing the awareness, support and institutional linkages available to others. Full social inclusion findings with supporting evidence are provided in Annex C.

2.3.1 The Question of Mechanism: Awareness, Platforms or Both?

An important analytical question that cuts across both the child marriage and GBV findings is whether the observed changes are driven by: (a) raised awareness about the harmful impacts of GBV and

child marriage; (b) pre-existing opposition that gained expression through new confidence and platforms; or (c) both operating simultaneously.

The data suggests both mechanisms are present, but in different proportions for different individuals. The father who changed his mind after a video screening represents genuine attitude change driven by new information, awareness-driven change. The women who said "we can raise our voice" and the communities that moved from silence to intervention may have already opposed harmful practices but lacked the platform, peer support, and institutional backing to act, the programme provided the infrastructure for latent opposition to become active intervention. For most participants, the change likely involves both: awareness creates or strengthens attitudes, while platforms and collective action inspire people to take concrete steps by building social approval and a sense of shared values (addressing subjective norms) and by demonstrating that intervention is possible and supported (strengthening perceived behavioural control).

This distinction has programmatic implications. Where attitudes are already progressive but action is constrained, providing platforms and collective legitimacy may be sufficient. Where attitudes themselves support harmful practices, awareness work through visual media and structured dialogue remains essential. Most communities likely require both, a finding that supports the programme's multi-component design and aligns with the global evidence on community mobilisation reviewed in Section 1.6.

2.4 Contextual and Programmatic Factors

2.4.1 Distinguishing Enablers from Barriers

The findings above document *what* changed. Understanding *why* requires distinguishing programmatic factors, specific interventions and design elements, from contextual factors, broader social, economic and institutional conditions. The programme's most

powerful programmatic contributions were not discrete activities but structural conditions that enabled change: video screenings activated observational learning where literacy barriers had previously excluded populations from behaviour change communication; Village Forums created the collective visibility that Social Norms Theory identifies as the mechanism for dissolving pluralistic ignorance; AACs built the intermediate access points that converted raised awareness into actual help-seeking; and door-to-door engagement reached families who would not attend group sessions. These elements are effective precisely because they operate in combination, each addressing a different constraint that no single approach could overcome alone, consistent with the global evidence on multi-component community mobilisation approaches (Ellsberg et al., 2015).

2.4.2 Patriarchal Power Ideology (Contextual Barrier across Child Marriage and GBV)

One of the biggest barriers to the programme is patriarchy in the wider society. In both child marriage and GBV, many men see women's empowerment as a threat to their power and status. This is not only about individual beliefs. Men are also under pressure from other men to follow traditional masculine norms and preserve the existing order. One participant captured this dynamic by describing the defense of what he called the "sultanate of masculinity":

"Those people think that women are like the shoe on your foot, if you give her attention, she will become too unbearable to handle... They say that if women become educated or they have awareness about these things then it will destroy this sultanate of masculinity." — PWD DF Member, KII, Abbottabad

This resistance manifests across several domains. At the household level, men actively prevent female family members from attending programme activities:

"Mere husband ne... kaha ke khabardar, main aapko unke sath kahin bhi dekhun... ya is tarah ki meetings mein aapko jate hue dekhun."

("My husband said beware, if I see you with them anywhere... or going to such meetings.") — Female participant, FGD, Abbottabad

At the community level, it takes the form of accusations that facilitators are misguiding women:

"Woh yeh kehte hain ki aap humari aurton ko galat baatein batati hain ki sinfi tashaddud se yeh hota hai woh hota hai."

("They say that you tell our women wrong things, that this happens and that happens because of gender-based violence.") — Community Facilitator, KII, Bahawalnagar

At the ideological level, some men normalise violence as a natural expression of authority:

"Agar hum aurton ko kuch keh bhi dein, toh yeh sinfi tashaddud nahi hai. Hum unhein itna pyar bhi toh karte hain... unpe haath utha dein, toh yeh koi badi baat nahi hai."

("If we say something to women, it's not gender-based violence. We love them so much too... if we raise a hand on them, it's not a big deal.") — Community Facilitator reporting male attitudes, KII, Bahawalnagar

Patriarchal resistance also extends to challenging facilitators from minority religious backgrounds, a dynamic that mixed-identity facilitation teams can navigate but that requires preparation. The Theory of Planned Behaviour illuminates the mechanism across all these manifestations: even when attitudes and subjective norms shift in favour of seeking help or refusing early marriage, the practical ability to act is constrained by male gatekeeping of mobility, participation and information access.

2.4.3 Tradition and Generational Inertia

Long-held beliefs, intergenerational hierarchies and ancestral practices constitute a powerful contextual barrier that limits full community engagement. The programme's design directly challenges these norms, particularly through including women and minorities

and creating space for discussions previously considered private family matters. These efforts enable positive change in many households while generating resistance in others. Participants in Sialkot described how inherited practices constrain the current generation's capacity for change:

"Hathi ka bacha hota hai, usko agar shuru se rassi ke sath bandh diya jaye… woh nikal nahi sakta yahan se… aise hi hamare maa baap hain… unka mind ek point par hota hai."

("Like a baby elephant tied with a rope… it cannot escape… similarly our parents' minds are stuck on one point [tradition]."") — Male participant, FGD, Sialkot

In some areas, families circumvent legal requirements through fraudulent birth certificates, satisfying legal form while violating its substance, representing practices in Bicchieri's sense of *customs* that persist even where individuals are aware of legal alternatives. Persistent refusers represent "laggards" in Diffusion of Innovation terms:

"Kuch log hamare purane khayalat ke hain… Kuch aise log bhi humein dekhne ko milte hain jo humein darwazon se bhi bhej dete hain."

("Some people are of old thoughts… We see some people who send us away from their doors.") — Male participant, FGD, Nowshera

This raises the strategic question of whether resistant households will eventually be drawn along by shifted community norms or require differentiated engagement approaches.

2.4.4 Institutional Weakness

For *child marriage*, institutional gaps centre on weak enforcement of legal age requirements, inconsistent oversight of Nikah Khawans and incomplete birth registration infrastructure, the conditions that make fraudulent age documentation possible. For *GBV*, the institutional gaps are distinct: the absence of female police officers in many stations (particularly in KP) creates barriers to disclosure; inconsistent

policy implementation, weak accountability mechanisms and limited leadership commitment to gender-responsive service delivery mean that community-level demand for protection cannot reliably be met by formal institutional response.

Participants emphasised the need for trained staff in GBV response:

"First of all, the staff should be trained. If you don't have trained capacity building staff, they won't be able to work." — DF/SIG Member, KII, Abbottabad

There is also recurring demand for government official visibility at programme activities to signal that communities' rights claims are backed by state authority:

"Along with this, the local government should be involved in this. Local DCs and commissioners should be involved." — DF/SIG Member, KII, Abbottabad

This demand for state backing is analytically significant: communities recognise that community-level norm change is necessary but insufficient without institutional response, the "supply side" of protection and enforcement that the programme's demand-side approach alone cannot deliver.

2.4.5 Key Strategic Tensions

Three tensions emerge from the findings that have direct implications for programme design and government engagement.

Awareness versus economic drivers. The programme has demonstrably shifted attitudes, but economic hardship remains a driver of child marriage that awareness alone cannot overcome. The evidence suggests a ceiling on behaviour change effectiveness when families are in acute economic distress. Addressing this requires integrating livelihood components into programming or establishing formal linkages with economic empowerment programmes, including BISP, microfinance initiatives and livelihood programmes operating in the same communities.

Patriarchal resistance versus male engagement. Men emerged as both the primary obstacles and potentially the most powerful allies for change. Some privately supported gender equality and needed platforms to act; others genuinely changed attitudes through awareness. Both pathways matter. This suggests differentiated strategies: protective measures for women facing backlash alongside constructive engagement targeting men open to change through male peer role models and structured dialogue on fatherhood and family wellbeing. Male engagement for child marriage and for GBV require distinct approaches: for child marriage, engaging fathers and brothers as supporters who prioritise daughters' education has shown clear effectiveness in the data; for GBV, the challenge extends to young men who perpetrate violence as brothers, in public spaces and in workplaces, requiring different entry points and recognition that GBV is not confined to the domestic sphere.

Community agency versus institutional response. The programme's work is strongest on the demand side, building social capital and empowering communities to articulate and pursue rights claims. The supply side, government responsiveness, trained personnel, functioning referral pathways and accountability mechanisms, requires continued and deliberate strengthening. Aawaz II implementing partners are working on supply-side interventions in some districts, including standardised Nikah Khawan training and criteria. The interface between duty bearers and rights holders is the critical juncture: community mobilisation is not sufficient if institutions cannot respond to the demands, it generates and supply-side improvement alone is not sufficient if communities are not active partners in prevention.

2.4.6 Government Entry Points: Field Evidence

The study's secondary research question, which entry points within government are most suited to take up different elements of the Aawaz model, was not fully addressed in the field data and this should be noted as a gap. The findings support the government entry point analysis presented in Section 1.5.3, but direct field evidence of

government actors assessing the feasibility of integrating the behaviour change model into existing programmes is limited.

The available field evidence centres on two areas. First, community demand for government engagement is clearly documented: participants called for DC and commissioner visibility at programme activities and for child marriage awareness desks in government hospitals (Community Facilitator, KII, Bahawalnagar). These represent community-level articulations of which government actors and settings would be most credible and accessible for extending the programme's reach. Second, the role of the 1043 helpline, a government mechanism, as a recognised and used resource demonstrates that government-community linkages on GBV are functional where they exist and that community members will use formal mechanisms when they are accessible and known.

2.5 Programme Contribution

The outcome harvesting methodology does not seek to prove causation but to identify the programme's plausible contribution to observed changes within the broader ecosystem of social, economic and political factors. Detailed contribution reasoning is presented in Annex D. Three levels of confidence distinguish the programme's contribution.

- At the **high-confidence** level, participants directly attribute change to specific programme elements: video screenings changing parental attitudes (participants describe the moment of shift after watching); Village Forums as the platforms through which collective interventions against child marriage are organised; and AACs as the community-level access points through which women have gained guidance, support and referral. These are programme structures, the changes occur through them, with participants able to trace the specific session, screening or platform that enabled the change.
- At the **medium-confidence** level, the programme interacts with

other factors: broader attitude shifts towards women's rights (where media, education and generational change also play a role); the breaking of the culture of silence around GBV (where the programme contributes but broader social trends also operate); and community responses to severe cases (where individual officials' willingness remains an independent variable).

- At the **low-confidence** level sit outcomes where the programme's direct contribution is limited: economic drivers of child marriage (which the programme does not directly address) and government service improvements (where the programme advocates but government capacity and political will are independent variables). These are precisely the areas where the tensions identified in Section 2.4 most constrain impact, reinforcing the case for complementary economic empowerment and supply-side institutional strengthening. The programme's overall effectiveness derives from its multi-component design: no single mechanism operates in isolation and the interaction of awareness, platforms, community action and legal knowledge is what produces the pattern of change documented here.



3. Conclusions And Recommendations

3.1 Conclusions

This study provides evidence that the Aawaz II multi-component approach is generating meaningful shifts in attitudes and practices related to child marriage and gender-based violence across programme areas in Punjab and Khyber Pakhtunkhwa. The programme's community-based interventions, such as the Aawaz Aagahi Centres, Village Forums, District Forums and youth Change Agents, are functioning as intended: creating spaces for dialogue, enabling collective action, building bridges between marginalised groups and mainstream communities and beginning to create interfaces between rights holders and duty bearers.

Three overarching conclusions frame the recommendations that follow.

First, the programme's demand-side approach has demonstrably shifted attitudes and generated community-level agency for child marriage and GBV prevention. The evidence of collective community intervention, women's shifting gatekeeping role and men's growing engagement as allies represents genuine social change. However, these gains are not self-sustaining; they depend on continued programme infrastructure and their impact is constrained by supply-side gaps in institutional responsiveness.

Second, the most significant barriers, patriarchal power ideology, economic hardship and institutional weakness, operate at different levels and require differentiated responses. No single intervention can address all three. The programme's strength lies in its multi-component design, but the evidence suggests that complementary economic empowerment and institutional strengthening components would extend the reach of what awareness and community mobilisation alone can achieve.

Third, the findings carry relevance beyond Aawaz II. The principles that emerge, the power of visual communication in low-literacy contexts, the effectiveness of intermediate community mechanisms that bridge trust gaps with formal institutions, the importance of collective visibility for norm change and the potential of social dialogue through community platforms, are transferable to development programming addressing harmful practices in comparable contexts. The recommendations below are framed accordingly: specific enough to guide community-based programming, grounded in principles applicable to the broader field.

3.2 Recommendations for Child Marriage Prevention

Programme-Level Recommendations

Recommendation 1: Scale video-based behaviour change communication systematically

Video screenings were consistently identified as the most effective intervention across all sites, particularly for low-literacy populations. Programmes addressing child marriage should:

- Ensure systematic deployment of video content to all community engagement points, with regular screening schedules integrated into routine activities
- Develop new video content featuring local success stories: communities that stopped child marriages, fathers who changed views on daughters' education, girls who refused underage marriage
- Produce content in local languages and dialects for cultural authenticity
- Create facilitation guides ensuring videos are followed by structured discussion that connects the visual content to participants' own circumstances

Who: Programme implementation teams; communications departments **How:** Integrate into existing community dialogue schedules; train facilitators in post-screening discussion **Resources:** Video production costs; screening equipment where needed

Recommendation 2: Strengthen legal awareness dissemination through accessible IEC materials

Legal awareness functions as a key behaviour change mechanism, providing institutional authority for community intervention. Programmes should:

- Develop and distribute simple, visual IEC materials explaining: legal age of marriage (province-specific), CNIC requirements for nikah registration, penalties under the Child Marriage Restraint Act and helpline numbers
- Create materials in multiple formats: wall posters for AACs and community spaces, pocket-sized reference cards for forum members, illustrated pamphlets for low-literacy audiences
- Ensure materials are displayed at all programme sites and distributed to key community spaces
- Train community volunteers to explain legal provisions accurately

Who: Programme teams; government partners where possible **How:** Develop materials based on actual legal provisions; test with community members for comprehension **Resources:** Design and printing costs; distribution system

Recommendation 3: Target mothers through dedicated engagement in child marriage prevention

The evidence that women are shifting their gatekeeping role and using their influence to resist rather than support child marriage is grounded in a broad pattern across the data. Programmes should:

- Create dedicated spaces for mother-daughter communication about marriage, education and futures

- Provide mothers with specific knowledge: health consequences of early marriage, girls' rights and the economic benefits of daughters' education
- Build peer networks among mothers who have successfully delayed daughters' marriages

Who: Community facilitators; women's groups **How:** Integrate into existing women's forums; create mother-specific sessions **Resources:** Minimal additional cost if integrated into existing activities

Recommendation 4: Develop male engagement strategies specifically for child marriage prevention

The findings demonstrate that men play a critical role in child marriage prevention. This male engagement is distinct from GBV-specific male engagement (see Recommendation 8) and requires its own strategy. Programmes should:

- Develop structured dialogues for men's forums addressing fatherhood, the economic and health benefits of daughters' education and the legal consequences of child marriage
- Identify and amplify male peer role models, fathers who delayed marriages, brothers who supported sisters' education, as positive deviants whose stories normalise changed behaviour

Who: Programme teams; male community facilitators **How:** Integrate into existing Village Forum activities and community dialogue schedules; develop male-focused discussion guides **Resources:** Discussion guide development; facilitator orientation; minimal additional cost if integrated into existing activities

Recommendation 5: Address economic drivers through strategic linkages

Economic hardship remains a powerful driver of child marriage that awareness alone cannot overcome. A mapping exercise should precede referral pathway establishment to confirm what is available in each programme area. Programmes should:

- Map existing economic empowerment and social protection programmes (BISP, microfinance, skills training) operating in programme areas, including livelihood enhancement programmes operated by other civil society organisations
- On the basis of the mapping, establish formal referral pathways connecting families at risk of child marriage to economic support
- Explore partnership opportunities with CSOs working on livelihood enhancement to create joint programming or cross-referral systems
- Advocate with government for child marriage prevention criteria in social protection targeting
- Document and share evidence on economic drivers to inform policy dialogue

Who: Programme management; social protection partners; government social welfare departments; CSO partners **How:** Partnership agreements; joint planning; data sharing **Resources:** Coordination costs; potential co-funding of integrated interventions

Government Engagement Recommendations

Recommendation 6: Pilot formal linkages between community action plans and Union Council processes

Community structures have built significant capacity for collective action, but weak formal linkages with government limit sustainability. Programmes should:

- Identify 2–3 pilot districts with receptive local government
- Develop mechanisms for presenting approved community action plans related to child marriage at quarterly Union Council meetings
- Partner with other CSOs working with local government on community participation initiatives to build institutional linkages, influence local policy and planning and support recognition and

integration of community action plans into local development planning as a collective community voice

- Document pilot experiences to inform scale-up

Who: Programme teams; Local Government departments; Union Council officials; CSO partners **Why government should act:** Strengthens local government responsiveness; utilises existing community data; improves targeting of local development resources **Resources:** Facilitation and coordination costs; documentation

3.3 Recommendations for GBV Prevention

Programme-Level Recommendations

Recommendation 7: Strengthen AAC linkages with formal protection and justice services

AACs are functioning as trusted community-level access points for guidance, support and referral. To ensure that community trust translates into effective institutional response, programmes should:

- Establish formal referral protocols between AACs and local police stations, including Women Police Desks where they exist
- Train AAC staff in case documentation, referral procedures and survivor support, clarifying that AACs provide guidance and referral, not formal complaint registration
- Develop service mapping of available GBV response resources in each district
- In areas lacking female officers, advocate through District and Provincial Forums for Women Police Desk establishment and implementation of standard operating procedures on dealing with and investigating crimes of violence against women

Who: Programme teams; Police departments; Women Development departments **How:** Develop standard referral protocols; establish

contact points in police stations; conduct joint training **Resources:** Training costs; coordination time; protocol development

Recommendation 8: Develop differentiated male engagement strategies for GBV prevention

Male resistance is the most significant barrier, yet male allies are powerful enablers. Programmes should develop GBV-specific male engagement (distinct from child marriage engagement in Recommendation 4) including:

- Dedicated sessions addressing masculinity, power dynamics and men's roles as allies, delivered as a series of structured dialogues by male community facilitators within existing community meeting structures, not as separate or additional programming
- Use of male peer role models: men who have changed behaviours, supported survivors or challenged other men
- Focus on spousal relationships specifically, including communication, conflict resolution and non-violent parenting
- Engagement beyond the domestic sphere, recognising that GBV includes violence perpetrated by young men as brothers, in public spaces and in workplaces, requiring different entry points and strategies

Who: Programme teams; male community leaders **How:** Develop male-focused curricula; train male facilitators; create men's discussion groups within existing structures **Resources:** Curriculum development; facilitator training; session materials

Recommendation 9: Build capacity for crisis response among programme staff and service partners

As communities gain confidence to report severe GBV cases, both programme field staff and protection service providers need enhanced capacity. Priorities should be sequenced based on feasibility within the programme's remaining mandate and timeframe.

In the near term, programmes should:

- Develop clear referral protocols and basic case documentation procedures for programme field staff who are the first point of contact
- Conduct orientation sessions for field staff on survivor-centred principles and safe referral
- Establish contact points and coordination mechanisms with protection services (Darul Amans, VAWCs, Tahaffuz Markaz) in each district
- Ensure staff wellbeing support given their exposure to traumatic cases

As a medium-term investment, programmes and their partners should:

- Provide specialised training on trauma-informed approaches and psychological first aid to protection service partners
- Develop comprehensive case management protocols including documentation, referral and follow-up
- Strengthen supervision systems for staff handling GBV cases

Who: Programme management; training providers; protection service partners **How:** Referral protocol development; orientation sessions; coordination agreements **Resources:** Training costs; ongoing supervision; staff support

Government Engagement Recommendations

Recommendation 10: Advocate for government utilisation of community-based volunteers and structures in protection response

Community-based volunteers, including Village Forum members, have demonstrated effectiveness as mechanisms for awareness, prevention and early identification of GBV and child marriage cases.

Government engagement should:

- Document evidence of how community-based structures contribute to prevention and early response and use this documentation as a policy advocacy tool for integration of community structures as partners in protection response
- Support relationships between community structures and government protection agencies
- Advocate for government recognition of community-based volunteers as partners in protection response, not as replacements for formal services but as an extension of reach into communities where government services cannot penetrate alone
- Support joint planning between government and community structures, with coordination mechanisms for sustained engagement and outreach to marginalised populations using community forums and AACs

Who: Social Welfare departments; Child Protection Units; programme advocacy teams **Why government should act:** Extends reach of government services; leverages existing community infrastructure; addresses access barriers to hard-to-reach populations **Resources:** Coordination; documentation; capacity building

3.4 Cross-Cutting Recommendations

Recommendation 11: Strengthen inclusion of marginalised groups as a programme delivery strategy

The findings demonstrate that when marginalised individuals, persons with disabilities, religious minorities and transgender persons, hold visible roles in programme platforms, it expands both the reach and the legitimacy of child marriage and GBV prevention work. Their inclusion in Village Forums and AAC activities connects them to the awareness, support and institutional linkages that reduce vulnerability to harmful practices. Programmes should:

- Systematically create pathways for marginalised community members to move into facilitating and leadership roles within Village Forums, District Forums and Early Warning Systems
- Establish data collection on persons with disabilities, religious minorities and transgender persons eligible for government schemes and coordinate with Social Welfare departments to connect identified individuals with available resources
- Document and develop case studies demonstrating how marginalised leadership evolves and its impact on community reach and replicate successful models across districts

Who: Programme teams; Social Welfare departments; community forum members **How:** Intentional recruitment strategies; data collection protocols; documentation **Resources:** Data management; coordination costs; possible additional support for marginalised leaders

Recommendation 12: Strengthen citizen-state engagement and institutional accountability

The findings consistently point to a gap between community-level demand for rights and services and institutional capacity to respond. Programmes should:

- Strengthen the interface between duty bearers and rights holders through District Forums, advocacy for government visibility at community activities and structured joint planning mechanisms
- Support Special Interest Groups (SIGs) as a means for the visibility and representation of marginalised interests within citizen-state engagement processes
- Advocate for government commitment to accountability mechanisms that ensure institutional responsiveness to community demands
- Document and share evidence of successful citizen-state engagement models for replication

Who: Programme advocacy teams; Local Government departments; District administration **How:** Structured engagement forums; joint planning; monitoring of government responsiveness **Resources:** Facilitation; documentation; advocacy

3.5 Recommendations for Further Research

Recommendation 13: Investigate the interaction between economic hardship and awareness intervention effectiveness

Economic hardship was consistently cited as a driver of child marriage, but the data does not clarify whether families facing economic hardship respond differently to awareness interventions. Further research should:

- Conduct a sub-study examining whether economically stressed households show different patterns of behaviour change
- Assess whether complementary livelihood interventions enhance awareness intervention effectiveness
- Use findings to inform programme design decisions about economic integration

Who: Research teams; programme M&E teams **For whom:** Programme designers; policy makers; donors

Recommendation 14: Assess sustainability of community-level changes post-programme

Current findings capture change during active programme implementation. Longitudinal research should:

- Identify communities where programme intensity has reduced and assess whether community interventions, forum activity and legal awareness persist 12–18 months after reduced programme support
- Identify factors associated with sustained versus declining change

- Use findings to inform sustainability and exit planning

Who: Research teams; programme M&E teams **For whom:** Programme designers; sustainability planning



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Annexes

Annex A: Detailed Methodology

A.1 Research Design

This study employs a two-phase iterative approach to outcome harvesting (Wilson-Grau & Britt, 2012), recognising that outcome harvesting in complex social change contexts benefits from exploratory groundwork before formal outcome statement formulation. Outcome harvesting is a utilisation-focused evaluation method designed to identify, verify and make sense of outcomes, defined as observable changes in the behaviour, relationships, actions, policies or practices of individuals, groups, communities or institutions, that a programme has influenced (Wilson-Grau & Britt, 2012). Unlike conventional approaches that measure progress towards predetermined outcomes, outcome harvesting works backward from observed changes to determine whether and how an intervention contributed to them. This approach is particularly appropriate for complex social change work where outcomes are emergent and difficult to predict in advance (Quinn Patton, 2011).

The study adopts a social constructivist paradigm (Creswell & Poth, 2018), recognising that social norms and behaviours are constructed through social interaction and can be reconstructed through deliberate intervention. This epistemological stance is particularly suited to understanding how community-based interventions like Aawaz II work to shift collective understandings and practices around gender, marriage and violence.

Phase 1 (Preliminary Analysis): The initial phase used Braun and Clarke's (2019) six-phase thematic analysis to systematically identify patterns of observable change across qualitative data from FGDs and KIIs. Braun and Clarke's approach involves: (1) familiarisation with data through repeated reading and noting initial ideas; (2) generating initial codes systematically across the dataset; (3) searching for themes by collating codes into potential themes; (4) reviewing themes to ensure coherence and distinctiveness; (5) defining and naming themes with clear scope and focus; and (6) producing the report with compelling extract examples. This exploratory approach allowed for inductive identification of outcome clusters and change patterns that emerged in programme communities. Thematic analysis served as the analytical tool for 'harvesting', systematically mining the qualitative data to identify what changes have occurred, where and among whom. The themes identified in this phase represent preliminary outcome categories that were refined into specific outcome statements in the final analysis.

Phase 2 (Final Analysis): The final analysis transformed preliminary thematic findings into formalised outcome statements specifying who changed what, where, when and by how much. Verification of outcomes was built into the data collection process itself: FGD and KII guides included specific outcome harvesting questions asking participants to provide concrete examples of change, describe before-and-after situations and identify turning points. Field researchers systematically documented who verified or contested specific outcomes during discussions. Criteria for verification included repetition across multiple sources, corroboration between FGD and KII data and attention to contradictions or contested claims. The distinction between perceived change and observed behavioural change was maintained throughout the analysis, with the report noting where evidence rests on participant perceptions versus documented behavioural shifts. This embedded verification data was synthesised with thematic analysis to produce outcome statements and conduct systematic contribution analysis assessing the relative influence of different programme interventions and contextual factors in producing the identified outcomes.

The research questions were addressed through specific data collection methods as follows:

Research Question	Primary Data Source	Secondary Data Source
RQ1: Observable shifts in attitudes/ practices	FGDs with community members	KIIs with implementers
RQ2: Contextual and programmatic factors	KIIs with implementers and leaders	FGDs (enablers/ barriers discussion)
Secondary: Most influential activities	Both FGDs and KIIs	Field notes
Secondary: Government scaling	KIIs with government officials	Programme documentation
Secondary: Unintended outcomes	FGDs (open-ended exploration)	KIIs

A.2 Sampling Strategy and Selection of Districts

The study employed a purposive and convenience sampling strategy, consistent with qualitative exploratory research that seeks to capture a wide range of perspectives and experiences rather than statistical representativeness (Creswell & Poth, 2018; Palinkas et al., 2015).

Seven districts were purposively selected, five in Punjab (Sheikhupura, Bahawalnagar, Sialkot, Okara and Sahiwal) and two in Khyber Pakhtunkhwa (Abbottabad and Nowshera). The selection was informed by the impact areas identified through the programme's Annual Progress Report (British Council, 2025). These districts were chosen to reflect diverse implementation contexts, encompassing both rural and urban settings, varied socioeconomic and cultural dynamics, different religious and ethnic compositions and differing levels of programme engagement and maturity. While seven districts cannot fully represent all fifteen programme districts, the purposive selection was designed to maximise contextual diversity within the study's resource constraints.

By 'contextual factors,' this study examined:

- **Geographic factors:** rural/urban location, accessibility, infrastructure
- **Socioeconomic factors:** poverty levels, livelihoods, economic opportunities
- **Cultural/religious factors:** traditional practices, religious interpretations, ethnic norms
- **Educational factors:** literacy rates, school access, female education levels
- **Governance factors:** leadership structures, law enforcement presence, government service delivery
- **Social structural factors:** family systems, gender roles, caste/ biradari dynamics

A.3 Data Collection Tools and Procedures

Focus Group Discussions: A total of nine Focus Group Discussions (FGDs) were conducted, each comprising 8–17 participants to allow for inclusive yet manageable group interaction. The FGDs included four women-only groups (Abbottabad, Bahawalnagar, Sheikhupura, Nowshera), three men-only groups (Abbottabad, Sialkot, Nowshera) and two mixed-gender groups (Sahiwal, Okara), reflecting gender-responsive and culturally sensitive data collection practices. FGD guides were structured around outcome harvesting principles, asking participants to identify specific changes they had observed, describe concrete examples, compare before-and-after situations and discuss what contributed to changes.

Key Informant Interviews: Nine Key Informant Interviews (KIIs) were conducted with purposively selected individuals representing diverse perspectives on programme implementation: community facilitators, resource persons, community leaders, District Forum and Special Interest Group members, persons with disabilities, transgender community members and religious leaders. KII guides included both structured outcomes harvesting questions and open-ended

exploration of mechanisms, barriers and institutional dynamics, allowing for deeper exploration of how programme structures interact with community dynamics, institutional frameworks and individual agency in creating (or impeding) norm change and institutional perspectives on how programme mechanisms interact with state structures.

Data collection was conducted in July–August 2025 by trained field researchers fluent in local languages (Urdu, Punjabi, Pashto). All interviews and discussions were audio-recorded with participant consent and transcribed in Roman Urdu before translation and analysis.

Table A1: Summary of Data Collection

Category	Punjab	KP	Total
Districts covered	5	2	7
FGDs conducted	5	4	9
KIIs conducted	5	4	9
Women-only FGDs	2	2	4
Men-only FGDs	1	2	3
Mixed-gender FGDs	2	0	2
FGD participants	59	39	98
KII Participants	5	4	9

Table A2: Participant Demographics (All Participants, Disaggregated)

Characteristic	FGDs (n=98)	KIIs (n=9)	Total (N=107)
Gender			
Female	57	3	60
Male	39	5	44
Transgender	2	1	3
Religion			
Islam	51	5	56
Christianity	42	3	45
Hinduism	4	1	5
Not recorded	1	0	1
Disability Status			
Persons with disabilities (PWDs)	12	2	14
Without disability	86	7	93
Age Group			
18–25 years	25	2	27
26–35 years	27	3	30
36–45 years	28	4	32
46–55 years	9	0	9
56+ years	5	0	5
Not recorded*	4	0	4
Province			
Punjab	59	5	64
Khyber Pakhtunkhwa	39	4	43

A.4 Data Analysis

Analysis proceeded through multiple stages. First, all transcripts were reviewed for familiarisation, with initial observations recorded. Second, systematic coding was conducted using a codebook developed both deductively (from the concept note and interview guides) and inductively (from patterns emerging in the data). The codebook included categories for Observable Shifts (attitude change, practice/behaviour change, household dynamics, community discourse, education as alternative, increased female agency), Change Mechanisms (Aawaz II interventions, role models/influencers, support systems, legal awareness) and Contextual Factors (barriers/resistance, enablers, role of men/boys). Contextual drivers such as poverty and governance were treated as co-determinants of change, not secondary factors.

Third, codes were collated into themes corresponding to the research questions. Fourth, themes were reviewed for coherence and refined through discussion between analysts. Fifth, themes were organised into outcome statements following the outcome harvesting format: Actor + Change + Evidence + Contribution. Sixth, contribution analysis was conducted to assess the relative influence of programme interventions versus contextual factors.

Rigour was ensured through multiple strategies aligned with Lincoln and Guba's (1985) trustworthiness criteria as updated by Nowell et al. (2017): credibility through triangulation across FGDs, KIIs and field notes; transferability through thick description of context; dependability through clear audit trails and systematic documentation; and confirmability through team analysis and peer debriefing. Key themes were repeated across multiple FGDs and KIIs, providing confidence in the robustness of the findings, though the study does not claim formal thematic saturation.

A.5 Ethical Considerations and Safeguards

The study adhered to the "Do No Harm" principle central to Aawaz II programming, with particular attention to:

- Voluntary participation with informed consent obtained from all participants
- Confidentiality and anonymity protections, with identifying information removed from transcripts
- Sensitive topic protocols for discussing GBV experiences, including option to skip questions
- Trained research assistants in trauma-informed interviewing
- Referral protocols for participants requiring support services
- Secure data storage protocols
- Community entry protocols respecting local customs

No safety or safeguarding concerns were reported during data collection.

Annex B: Literature Review And Theoretical Framework

This annex provides full theoretical expositions and extended evidence reviews that underpin the condensed summaries in Sections 1.4 through 1.7 of the main report. Sections B.1 through B.5 correspond to those body sections respectively and elaborate on the analytical and evidentiary basis for claims made there.

B.1 Theoretical Foundations

Understanding behavioural change in community-based interventions require grounding in established psychological and sociological theories that explain how individuals and communities adopt new attitudes and practices. Four theoretical frameworks are particularly relevant to this study and are deployed in the analysis as follows.

B.1.1 Theory of Planned Behaviour

Ajzen's (1991, 2020) Theory of Planned Behaviour (TPB) provides a foundational framework for understanding individual-level behaviour change. TPB posits that human behaviour is shaped by intentions, which are in turn influenced by three factors: attitude towards the behaviour (evaluation of its consequences), subjective norms (perceived social pressures from significant others) and perceived behavioural control (beliefs about one's ability to perform the behaviour and about external facilitating or constraining factors).

This framework is particularly relevant for understanding why community members may hold progressive individual attitudes while conforming to harmful social norms due to perceived community expectations. Fishbein and Ajzen (2010) demonstrate that effective interventions must address not only individual beliefs but also perceptions of what others expect and do. For this study, TPB provides a structured lens to interpret community action: an individual's attitude reflects their evaluation of child marriage's or GBV's consequences, which Aawaz II targets through awareness sessions; subjective norms capture the perceived social pressures

from family, community and religious leaders that Aawaz II's community forums aim to reshape; and perceived behavioural control explains why community members might hesitate to intervene in cases of harmful practices, fearing backlash, a barrier the programme's collective action plans aim to reduce by building confidence and providing institutional backing. The study notes that evidence for increased perceived behavioural control, while present in accounts of legal awareness empowering action, is not as strong as the evidence for attitudinal and normative shifts. The study's evidence engages most directly with attitude change and subjective norms; evidence of increased perceived behavioural control is more limited and is treated as an area for further investigation.

B.1.2 Diffusion of Innovation Theory

Rogers' Diffusion of Innovation (DOI) theory, as elaborated by García,Avilés (2020), views behavioural change as a collective process whereby new ideas spread through social systems over time. The theory identifies categories of adopters (innovators, early adopters, early majority, late majority, laggards) and emphasises the role of opinion leaders and communication channels in accelerating diffusion.

For Aawaz II, the "innovations" being diffused are positive practices: delaying marriage, valuing girls' education, recognising women's rights, rejecting violence and including marginalised groups. The programme's structures, AACs, Village Forums and particularly Aawaz Change Agents (ACAs), act as the primary communication channels and position ACAs and active forum members as early adopters who model new behaviours. The theory is used in the analysis to interpret the uneven distribution of acceptance across communities, the role of religious leaders as opinion leaders whose adoption signals legitimacy and the persistence of "laggard" segments who resist change.

B.1.3 Social Norms Theory

Social Norms Theory distinguishes between descriptive norms (what

people actually do) and injunctive norms (what people ought to do), providing insight into how community interventions can create new reference points for acceptable behaviour (Bicchieri, 2017, 2020). Recent research by Cislaghi and Heise (2018, 2020) demonstrates that effective norm change requires addressing both individual beliefs and collective expectations simultaneously and identifies eight common pitfalls in social norms interventions, including assuming that harmful behaviours are entirely norm-driven and failing to nurture positive alternatives.

Duque's (2017) concept of pluralistic ignorance, where individuals privately reject a norm but publicly conform out of a mistaken belief that everyone else accepts it, provides a lens for interpreting situations where communities shift rapidly once collective action becomes visible. Aawaz II's core strategy of creating forums for dialogue can be understood as a direct countermeasure to this coordination problem, aiming to create safe spaces where the gap between perceived and actual community norms can be revealed.

Bicchieri (2017) further distinguishes social norms (behaviours maintained by social expectations and potential sanctions) from moral norms (behaviours maintained by internalised values) and customs (behaviours followed through habitual practice and intergenerational transmission rather than active normative deliberation). This distinction is relevant because effective interventions may need different strategies depending on whether a practice like child marriage is maintained primarily by fear of social sanction, by genuine belief in its rightness or by unreflective tradition. The analysis uses this framework to distinguish between barriers operating through active patriarchal resistance (social norms) and those operating through generational inertia (customs).

Social Norms Theory and Social Learning Theory do the heaviest analytical work in this report. The Theory of Planned Behaviour and Diffusion of Innovation complement them by providing individual-level and systemic-level lenses respectively.

Table B1: Theory Operationalisation and Evidence Mapping

Theory	Primary Analytical Use	Key Evidence in Findings	Overlap Areas
Social Learning Theory (Bandura)	Interpreting video screening impact; role model effects	Father changing mind after video; emergence of local positive deviants; cascade of visible behaviour change	Overlaps with DOI on role model/opinion leader effects
Social Norms Theory (Bicchieri)	Interpreting collective action; barrier analysis; norm shift mechanisms	Village Forum interventions dissolving pluralistic ignorance; culture of silence as barrier; tradition as custom	Overlaps with TPB on subjective norms
Theory of Planned Behaviour (Ajzen)	Interpreting legal awareness impact; barrier analysis at individual level	Legal awareness enhancing perceived behavioural control; male gatekeeping constraining women's PBC	Overlaps with SNT on subjective norms component
Diffusion of Innovation (Rogers)	Interpreting uneven adoption; opinion leaders; resistance	Religious leaders as opinion leaders; laggard segment resisting engagement; youth as accelerators	Overlaps with SLT on role modelling

(This table is referenced in the main report as Table B1 in Section 1.4.)

B.1.4 Social Learning Theory

Bandura's (1977, 2001) Social Learning Theory emphasises that learning occurs through observation, imitation and modelling. People learn new behaviours not primarily through direct instruction but through observing others, particularly credible, relatable role models, perform those behaviours and experience consequences. Bandura identified key mediating processes: attention (noticing the behaviour), retention (remembering it), reproduction (having the ability to enact it) and motivation (having reasons to do so). When role models share cultural and social similarities with the audience, they are more powerful influences.

For this study, Social Learning Theory is the primary framework for interpreting the impact of video screenings, the programme element most consistently identified as effective. Videos function as observational modelling tools that present culturally relatable scenarios of alternative behaviour. The theory also applies to the cascade effect of local role models (fathers who changed views, religious leaders who refuse underage marriages, mothers who reject proposals), whose visible behaviour provides models others can observe and emulate.

Annex C: Social Inclusion Findings

The following findings document broader social inclusion outcomes observed during the study. As discussed in the main report (Section 2.3), these outcomes contribute to the enabling environment within which GBV and child marriage prevention occurs. The inclusion content that directly relates to violence, men recognising harassment of transgender persons as psychological violence and the Transgender VSO facilitating access to protection services at the Tahaffuz Markaz, is presented in the main report findings (Section 2.2, F.7).

C.1 Bridging Religious Divides

Evidence strength: Strong (multiple FGDs and KIIs)

Village Forums have created platforms where Christians, Hindus and Muslims work together on shared civic issues, a development participants describe as unprecedented. In Sialkot, male participants described deliberate efforts to include minority communities:

"Christians ke liye hamare gaon mein, humne unke liye alag se meeting ki thi ke unke kya masail hain."

("For Christians in our village, we held a separate meeting to listen to their problems.") — Male participant, FGD, Sialkot

In the same district, participants reported that interfaith collaboration had become normalised:

"Koi bhaid bhaav nahi karta. Agar koi Hindu hai, koi Christian hai, sab barabar baith ke baat karte hain."

("No one discriminates. Whether someone is Hindu or Christian, everyone sits together and talks equally.") — Male participant, FGD, Sialkot

In Nowshera, a Hindu participant credited a fellow Hindu community member with introducing a culture of civic engagement:

"Dilraj jo hai hamare sath... RTI ki taaleem de rahe hain... Yeh hamari community ke liye bohot acha kaam ho raha hai."

("*Dilraj, who is with us... is giving us education on the Right to Information... This is very good work for our community.*") - Female participant, FGD, Nowshera

In Bahawalnagar, a Hindu community facilitator described initial resistance from the majority community but persistence through colleague support:

"Kyunki main ek Hindu community se talluq rakhti hu, toh mere saamne jab baat ki na ki aap yeh kaise keh sakte hain, hamara Islam toh yeh keh raha hai."

("Because I belong to the Hindu community, they asked me 'how can you say this, our Islam says this?'") — Female Community Facilitator, KII, Bahawalnagar

"Wahan main ek minute tha, main ruk gayi ki mere paas iska koi jawab nahi. Khair, mere saath mere baqi colleague the, toh unhone iska jawab diya."

("I stopped for a minute because I didn't have an answer. Anyway, my colleagues were with me, so they answered.") — Community Facilitator, KII, Bahawalnagar

When minority community members hold visible roles in forums that address child marriage and GBV, it normalises both cross,religious collaboration and the legitimacy of rights-based discourse across faith communities.

C.2 Restored Social Dignity

Evidence strength: Medium (single FGD)

A tangible marker of inclusion is the shift from using derogatory nicknames based on caste or occupation to using real names. In Bahawalnagar, women described this change:

“Awaz Do ke program ki wajah se yeh bhi changing aayi hai ke log pehle nickname se bulate thay jaise mochiyon ka ghar, kasai ka ghar. Ab log unko asal naam se bulate hain.”

(“Due to the Aawaz Do programme, this change has also come, people used to call by nicknames like ‘cobbler’s house,’ ‘butcher’s house.’ Now people call them by their real names.”) — Female participant, FGD, Bahawalnagar

While this finding rests on limited evidence, it reflects a shift in how marginalised caste groups are perceived within the community, a precondition for their meaningful participation in forums where norms around harmful practices are negotiated.

C.3 Persons with Disabilities Gaining Voice

Evidence strength: Medium (multiple sources)

Persons with disabilities are experiencing increased visibility and participation in programme platforms. In Bahawalnagar, a PWD member has been integrated into forum activities:

“Bobby Shahid [PWD member] … woh hamare sath barabar baithte hain aur hum unko barabar ka hissa samajhte hain.”

(“Bobby Shahid [PWD member] … he sits with us equally and we consider him an equal part.”) — Female participant, FGD, Bahawalnagar

In the same district, women described concrete support being extended to disabled community members:

“Hamare darmiyaan jo mazoor bache hain… hum unko school bhejne ki koshish karte hain, wheelchairs ka intezaam karte hain.”

(“For disabled children amongst us… we try to send them to school, arrange wheelchairs.”) — Female participant, FGD, Bahawalnagar

In Nowshera, a woman with a disability described a personal transformation from isolation to leadership:

“Mujhe bahar nikalne ki himmat nahi thi… Ab main EWS focal person ban gayi.”

(“I didn’t have the courage to go out… Now I have become an EWS focal person.”) — Woman with Disability, KII, Nowshera

This progression, from stigma to participation to leadership to concrete community support, demonstrates a pathway that, while not directly about GBV or child marriage, expands the programme’s reach by ensuring marginalised groups are present in the spaces where norms are renegotiated.

A PWD District Forum member in Abbottabad also reported advocacy leading to district-level representation:

“Disable ke liye hum ne bahut mehnat ki… ab hamare area mein disable log bhi forum mein shamil hain.”

(“We worked very hard for the disabled… now in our area, disabled people are also included in the forum.”) — DF/SIG Member, KII, Abbottabad

C.4 Transgender Persons: Community Acceptance

Evidence strength: Medium (multiple sources)

Beyond the violence, related findings presented in the main report, recognition of transgender harassment as GBV and the Transgender VSO’s service provider role, the data documents broader shifts in community attitudes towards transgender persons. In Abbottabad, male participants described deliberate inclusion:

“Transgenders ke liye… humne unko bhi shamil kiya hai. Woh bhi hamare sessions mein aate hain aur apni baat rakhte hain.”

(“For transgenders… we have involved them too. They also come to our sessions and speak their mind.”) — Male participant, FGD, Abbottabad

In Sahiwal, a participant described a shift from ridicule to understanding:

“Log khawaja sira ko dekh ke haste thay… ab hum logon ko samjhate hain ke yeh bhi Allah ki makhlooq hain.”

("People used to laugh seeing a transgender... now we explain to people that they too are Allah's creation.") — Mixed FGD, Sahiwal

The Transgender VSO in Sahiwal described a personal transformation from community outsider to service provider:

"Wahan se maine teen transgender ko wahan pe bheja, unhon ne poori training li... Ab hum logon ki madad kar rahe hain."

("I sent three transgenders there [Tahaffuz Markaz], they took full training... Now we are helping people.") — Transgender VSO, KII, Sahiwal

This broader attitudinal shift, from ridicule to recognition of shared humanity, creates the enabling conditions within which violence against transgender persons can be recognised and addressed. The inclusion pathway enables protection outcomes that would not otherwise be possible.

C.5 Access to Government Services and Resources

Evidence strength: Medium (multiple sources)

Village Forums are serving as conduits connecting marginalised communities with government services and resources, they were previously unaware of. In Okara, a participant described discovering government support schemes through the programme:

"Social Welfare department ne mujhe bataya ke Easter pe humein paise aate hain... Toh unhone kaha yeh 4 lakh rupay bach gaya, hamare paas koi aata hi nahi."

("The Social Welfare department told me that at Easter money comes for us... They said 4 lakh rupees was left over because no one comes to us.") — Female participant, FGD, Okara

In Sheikhupura, a Christian community member described gaining awareness of rights for the first time:

"Humein nahi pata tha ke hamare bhi haqooq hain... Ab pata chala ke minority card banta hai, isse schemes milti hain."

("We didn't know we also had rights... Now we've learned that minority cards are made and through them schemes are available.") — Female participant, FGD, Sheikhupura

When marginalised communities gain access to government services and social protection, their vulnerability to economic drivers of child marriage and GBV is reduced, addressing structural conditions documented in the literature review. However, this connection is indirect and the evidence for a causal link between scheme access and reduced harmful practices is not established by this study.

Annex D: Detailed Contribution Analysis

D.1 Analytical Approach

The outcome harvesting methodology does not seek to prove causation but to identify the programme's plausible contribution to observed changes within the broader ecosystem of social, economic and political factors. This annex presents the detailed reasoning behind the contribution confidence levels summarised in the main report (Section 2.5).

For each outcome area, the analysis considers: (a) the strength and consistency of participant attribution to specific programme elements; (b) the plausibility of alternative explanations; (c) the degree to which the outcome depends on programme infrastructure versus broader trends; and (d) the triangulation of evidence across FGD and KII sources.

D.2 High Confidence in Programme Contribution

Video screenings changing attitudes towards child marriage

Participants in multiple FGDs and KIIs directly attributed attitude change to watching programme videos. The attribution is specific: participants describe the moment of watching, the emotional impact and the subsequent shift in their position. The Abbottabad father who publicly changed his mind during a screening is the most vivid case, but the pattern is consistent across sites. Alternative explanations (media exposure, generational change) cannot account for the specificity of attribution to programme video content, the timing of change relative to screening events or the particular content recalled by participants.

Legal awareness enabling community intervention

Participants consistently cite programme awareness sessions as the source of their knowledge about minimum marriage age, CNIC requirements, domestic violence laws and helpline numbers. The attribution chain is traceable: participants identify the programme session, name the legal provision and describe using it in a specific intervention. While legal information is theoretically available from other sources, the consistency of attribution to programme sessions and the fact that participants describe learning these provisions for the first time through the programme, supports high confidence in programme contribution.

Village Forums as collective intervention platforms

Village Forums are programme structures. When a forum collectively intervenes to stop a child marriage or support a GBV survivor, the intervention occurs through programme infrastructure. The organisational capacity, the collective identity and the coordination mechanisms are programme contributions. While the willingness to act may reflect pre-existing opposition (see the discussion of mechanism question in Section 2.2), the platform through which action occurs is attributable to the programme.

AACs as community-level access points for guidance and referral

AACs are programme infrastructure. Women's descriptions of approaching AACs for guidance and referral are descriptions of using programme structures. The programme created the access point; the outcome, increased help-seeking, flows through it.

Marginalised leadership in programme platforms

The programme explicitly recruits and trains marginalised persons for leadership roles, the Transgender VSO, the PWD EWS focal person, the Hindu community facilitator. These appointments are direct programme decisions. The outcomes they generate (expanded reach, challenge to stereotypes, access to marginalised communities) are attributable to the programme's deliberate inclusion strategy.

D.3 Medium Confidence in Programme Contribution

Broad attitude shifts towards women's rights

The programme is one factor among many influencing attitudes towards women's rights. Media exposure, education, generational change, urbanisation and other NGO programming all contribute to a broader environment of change. While participants attribute specific attitude shifts to programme activities, the overall direction of change may have been occurring independently. The programme's contribution is to accelerate and deepen a shift that broader social trends support, but it would be overclaiming to attribute the entirety of attitudinal change to Aawaz II.

Religious leader engagement

Religious leaders bring independent authority that the programme facilitates but does not create. A pastor who refuses to conduct underage nikah may have been predisposed to this position before programme engagement. The programme's contribution is to provide information (legal requirements), platforms (forums where religious leaders interact with other community members) and legitimacy (connecting religious authority to legal authority). But the moral authority and community reach of religious leaders are pre-existing assets that the programme leverages rather than creates.

Breaking the culture of silence

The programme contributes to breaking the culture of silence through creating platforms for disclosure, normalising discussion of GBV and building collective confidence for action. However, broader social trends, increased mobile phone access, media exposure, urbanisation and changing generational attitudes, also contribute to the gradual erosion of silence norms. The programme's specific contribution is to create structured, supported spaces where silence can be broken collectively rather than individually, but it operates within a broader context of social change.

D.4 Low Confidence in Attribution

Economic drivers of change

The programme does not directly address economic factors driving child marriage. Where economic hardship is the primary driver, the programme's awareness-based approach faces structural limitations that no amount of attitudinal change can overcome. The programme's contribution here is indirect at best, raising awareness that may influence decision-making at the margins, but unable to address the material conditions that drive poverty-related child marriage.

Government service improvements

The programme advocates for improved government services and creates demand for institutional responsiveness, but government capacity, political will, staffing decisions and resource allocation are independent variables outside programme control. Where government services have improved (e.g., Women Police Desk establishment, Tahaffuz Markaz access), the programme may have contributed through advocacy and demand generation, but the government's own priorities and processes are the primary determinants.

D.5 Alternative Explanations Considered

The analysis considered several alternative explanations for observed changes:

Social desirability bias: Participants may overstate programme impact because they know they are speaking to researchers associated with the programme. This was partially addressed through triangulation across sources and attention to specific, verifiable examples rather than general claims. However, this bias cannot be fully eliminated in qualitative research with programme beneficiaries.

Selection effects: The study reached participants through programme channels, meaning those most positively affected may be overrepresented. The limitations section in Annex A acknowledge this constraint.

Broader social trends: Pakistan is undergoing broader social change through media, education, urbanisation and civil society activity. Some observed changes may reflect these trends rather than programme-specific impact. The contribution analysis addresses this by distinguishing outcomes with high programme specificity (e.g., video screening attribution) from those where broader trends are co-factors (e.g., attitude shifts).

Hawthorne effect: Participants may have changed behaviour because they knew they were being observed/studied rather than because of programme interventions. This is less likely given the retrospective nature of the inquiry, asking about changes that occurred before the research, but cannot be entirely ruled out.

The analysis concludes that while alternative explanations are plausible for some outcomes, the specificity of participant attribution, the consistency across sites and the clear connection between programme structures and observed changes support the contribution claims at the confidence levels assigned.

Annex E: Summary of Barriers to Change

The following table presents the five primary barriers to change identified in this study, together with their theoretical framing, descriptive detail, evidence strength and primary locations. This provides the full typological detail that supports the narrative summary in Section 2.4 of the main report.

Table E1: Summary of Barriers by Type, Theoretical Framing and Frequency

Barrier Type	Theoretical Framing	Description	Frequency	Primary Location(s)
Patriarchal power ideology	Injunctive norms sustaining male authority (Bicchieri); perceived behavioural control undermined when men restrict women's participation (Ajzen)	Men viewing women's empowerment as threat to authority; forbidding attendance at meetings; backlash against facilitators; conformity to societal expectations of masculine dominance; resistance to minority-identity facilitators delivering rights-based messaging	Strong (7/9 FGDs)	Universal; noted in KP and Punjab
Tradition and generation-al inertia	Customs operating through intergenera-tional transmission of normative expectations (Bicchieri); resistance to innovation adoption among "laggards" (Rogers)	Deeply rooted ancestral practices that supersede legal knowledge; elders dismissing or circumventing legal requirements through fraudulent documentation; persistent refusal to engage with programme despite communi-ty-level shifts	Strong (7/9 FGDs)	Universal; strongest in men's groups

Barrier Type	Theoretical Framing	Description	Frequency	Primary Location(s)
Economic hardship	Structural constraints limiting perceived behavioural control (Ajzen); material conditions overriding attitudinal change	Poverty driving early marriage to reduce household expenditure; economic vulnerability increasing exposure to exploitation; awareness unable to overcome acute material need	Strong (5/9 FGDs)	Sahiwal, Sheikhupura, Sialkot, Bahawalna-gar
Institutional weakness	Gap between changed social norms (demand) and institutional responsive-ness (supply); systemic inertia in citizen-re-sponsive accountabili-ty	Inconsistent police response; absence of female officers in many stations, particularly KP; limited government visibility at programme activities; staff capacity gaps in GBV response; weak referral pathways for CM enforcement	Medium (multiple KIIs)	Primarily KP; also, Punjab
Culture of silence	Pluralistic ignorance (Bicchieri) , individuals privately oppose harmful practices but believe others accept them; reluctance to make household matters public	Belief that domestic matters should not be made public; reluctance to seek help or report GBV; social cost of disclosure persisting even where awareness has increased; maintained by women themselves as well as by patriarchal pressure	Medium (3 FGDs)	Bahawalna-gar, Sialkot

Note: "Frequency" denotes the number of FGDs or KIIs in which the barrier was prominently raised. Evidence strength labels reflect analytical judgements made during coding; they are not claims of statistical prevalence. The body of the report discusses the analytical distinction between contextual barriers (patriarchal ideology, tradition, institutional weakness) and persistent social barriers (culture of silence) in Section 2.4

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