Here is a selection of the latest evidence on violence against women and girls (VAWG) and gender-based violence (GBV):

**COVID-19 & VAWG**

**COVID-19 and violence against women and children – what have we learned so far?** (June 2020)

This note from the Center for Global Development reviews rigorous studies of how the COVID-19 pandemic have impacted rates of violence against women and children (VAW/C), as well as service provision and public attitudes toward VAW/C.

Out of 12 studies reviewed, three reported decreases in VAW/C measures, three reported increases, three reported mixed findings, and three reported no changes. Two of the reviews used primary data, while the others relied on mainly police reports and calls to services.

In seeking to interpret the mixed findings, the authors stress that prevalence estimates from administrative sources can tell us about reporting trends, but may say little about actual violence rates as reporting is influenced by a range of factors. Lockdown orders, isolating with perpetrators, lost income and limited access to social support networks are factors that may have impacted reporting of VAW/C during COVID-19 – making it challenging to estimate actual changes in VAW/C during the pandemic.

The review of five studies of services and public attitudes about VAW/C found that service providers are worried about limited capacity to meet increasing needs of survivors – but also highlight a perceived increase in public support for response services.

The review highlights gaps in the current evidence base, which include limited evidence from low- and middle-income countries (LMICs) and few studies examining violence against children and VAW/C outside the home.

**Forced migration, SGBV and COVID-19: Understanding the impact of COVID-19 on forced migrant survivors of SGBV**

(May 2020)

Based on interviews with 52 survivors of sexual and gender-based violence (SGBV) and 45 service providers, this report explores the impact of COVID-19 on forced migrant survivors of SGBV. The majority of the SGBV survivors were women (48 women and 4 men). The interviews were conducted in Australia, Sweden, Tunisia, Turkey and the UK.

The study found that the pandemic has exacerbated pre-existing challenges in forced migrant survivors’ lives, including fear of seeking medical care, social isolation and worries about income, health and the future – with severe impact on overall mental health and wellbeing. The shift from face-to-face services to remote services has had a major impact on access to services for forced migrant survivors, as many have struggled to access support. The situation has intensified the vulnerability of forced migrant women to abuse, as finding safe accommodation is very challenging.
VIOLENCE AGAINST CHILDREN & ADOLESCENTS

Disclosure, reporting and help seeking among child survivors of violence: cross-country analysis (July 2020)

This study explores the prevalence and dynamics around disclosure, reporting and help-seeking behaviours among children who have experienced physical and/or sexual violence, by analysing data from nationally representative Violence against Children (VAC) surveys in Cambodia, Haiti, Kenya, Malawi, Nigeria and Tanzania.

The study found that the prevalence of help-seeking behaviour varied by context; ranging from 23% to 54% for informal disclosure, while knowledge of where to seek help ranged from 16% to 28%. Formal disclosure or help seeking was lower, ranging from under 1% to 25%, and from 1% to 11% for receipt of formal help.

Children’s reported reasons for not seeking help varied across the countries, however, there were some shared reasons. In Kenya, Malawi and Nigeria, the most common reason was apathy (for not seeking help for sexual or physical violence), followed by being afraid of repercussions (for not seeking help for physical violence).

Systematic review of social norms linked to the sexual exploitation of children and adolescents (June 2020)

This evidence brief from the LINEA project presents key findings from a global systematic review that summarises the existing evidence on harmful social norms linked to sexual exploitation of children and adolescents (SECA) and identifies evidence gaps.

The review found evidence that while perpetrators of SECA are socially tolerated, children and adolescents that have experienced sexual exploitation face stigma and discrimination. Gaps in the evidence include how social norms are linked to sexual exploitation of boys.

The review also found that ‘intersecting marginalisations’ such as gender, disability and homelessness increase young people’s vulnerability to SECA.

A multi-country study of the violence-related risk factors for early sexual debut and risky sexual behaviour in adolescents (June 2020)

This study explores the relationship between violence and sexual behaviour in adolescents. It analyses data from 27,513 adolescents in 43 LMICs who participated in WHO’s Global School-based Student Health Survey (2003–2016). It found that being physically attacked and being in a physical fight were associated with higher odds of engaging in sexual behaviour (measured as ever having had intercourse, having had multiple sexual partners and condom use in last intercourse).

Being physically attacked was associated with more sexual behaviour indicators than being in a physical fight, which may suggest that victimisation by violence in adolescence is a stronger predictor of sexual behaviour in adolescence than aggressive behaviour is (being in a physical fight).
The DFID-funded Safeguarding Resource and Support Hub (RSH) launched its online platform on the 1st of June, providing an open-access platform to support organisations in the aid sector to strengthen their safeguarding policy and practice against sexual exploitation, abuse and sexual harassment. The RSH brings together relevant guidance, tools and research and provides opportunities for engagement through webinars, discussions and Communities of Practice.

On the 19th of June, the International day for the Elimination of Sexual Violence in Conflict, the FCO launched the draft “Murad Code” with the Institute for International Criminal Investigations, PSVI and Nadia’s Initiative as project partners. The draft Murad Code was developed through an extensive consultation with over 160 survivors, researchers, and experts and will be open for a global online consultation until 1 December 2020.

COVID-19 related Policy & News:
This UN Inter-agency statement on VAWG in the context of COVID-19 highlights six critical areas for action if governments are to live up to the UN Secretary General’s call for all governments to make the prevention and redress of VAWG a key part of their national COVID-19 response plans. The statement emphasises the importance of funding for women’s rights organisations, access to services for VAWG survivors, police and justice response, and prevention.

This UNTF brief on the Impact of COVID-19 on VAWG presents evidence from 122 civil society organisations (CSOs) working in 69 countries. The evidence confirms the picture that VAWG is on a rapid rise and that response systems in many countries are struggling to support VAWG survivors, highlighting the urgent need for additional support and resources for front line responders.

UN Women has conducted a rapid assessment to understand the Impact of COVID-19 on VAWG and service provision in 49 countries. The report notes major challenges with data collection in the current situation, but resonates findings from other studies that VAWG is on a sharp increase, and that VAWG service providers are over-stretched.

This series of briefs developed by UN Women explores the trends and impacts of COVID-19 on VAWG. Focus areas include violence in workplaces, public spaces and in online spaces, and VAWG prevention, services and data collection.

The report Justice for Women amidst COVID-19 gives a comprehensive overview of challenges faced by women in the context of COVID-19, especially in relation to justice needs, and current efforts to address the challenges. It outlines ten policy recommendations to protect women’s access to justice during the crisis.

This toolkit calls for an intersectional approach in the COVID-19 response. Developed by a coalition of international organisations who work in collaboration with local actors on issues such as women’s rights, disability rights, and LGBTIQ rights, the toolkit intends to be a resource primarily for local groups to develop responses for violence prevention in their contexts, drawing on global strategies.

The International Finance Corporation has launched a guidance note to inform employers of the increase risk of GBV during the COVID-19 pandemic.

VAWG Helpdesk Round-up

The query service has produced short reports and expert advice to DFID and HMG staff on the following topics over the last quarter:

• Reaching women and girls most at risk of VAWG

• Conflict-related sexual violence and COVID-19

• COVID-19, food security and VAWG

• Country factsheets on gender and VAWG

• Serious and organised crime and VAWG

• Working with businesses to prevent VAWG

Want to know more about how we can help you with research or advice?

Send us an email or give us a call and we can discuss your request further.

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What Works to Prevent VAWG?

DFID’s global research programme has produced the following evidence briefs and academic articles:

**What will it cost to prevent violence against women and girls in low- and middle-income countries? Evidence from Ghana, Kenya, Pakistan, Rwanda, South Africa and Zambia**

This study from the What Works programme examines the cost of VAWG prevention interventions in LMICs – an area where data and evidence have to date been scarce. The study collected and analysed primary cost data from six different pilot VAWG prevention interventions in six countries: Ghana, Kenya, Pakistan, Rwanda, South Africa and Zambia.

The total costs of the interventions varied between US $208,000 in a small group intervention in South Africa to US $2,788,000 in a couples and community-based intervention in Rwanda. The biggest cost input across the interventions was staff cost. The cost per beneficiary in the pilots ranged from US $4 in a community-based intervention in Ghana to US $1,324 for a one-to-one counselling intervention in Zambia. When scaled up to the national level, total costs ranged from US $32million in Ghana to US $168million in Pakistan.

The study concludes that the costs of delivering VAWG interventions vary greatly and depend on factors such as geographical reach, number of intervention components, and the complexity involved when adapting an intervention to be delivered at national scale.

**Violence against younger and older women in low- and middle-income settings**

This evidence brief analyses data gathered as part of the What Works programme on the impact of age on prevalence of IPV, and the effectiveness of IPV prevention for women of different ages.

What Works baseline data suggest that young women (18-25 years) are at greater risk of experiencing physical IPV than women in older age groups (35 years and older). In three out of five baseline studies, younger women reported higher prevalence of sexual IPV than older women – with the most notable difference in DRC where the prevalence was four times higher in women under 25 than women over 35. The authors emphasise that the extent to which young women are at higher risk of IPV varies by context and type of IPV. The analysis suggests that young women in What Works interventions experienced greater reductions in sexual and economic IPV than older women, however, it found no evidence to suggest that older women cannot benefit from IPV interventions.

**Effectiveness of the Common Elements Treatment Approach (CETA) in reducing intimate partner violence and hazardous alcohol use in Zambia (VATU): A randomised controlled trial**

This study examines the effectiveness of the Common Elements Treatment Approach (CETA), an evidence-based psychotherapy intervention delivered by lay counsellors, in reducing women’s experiences of IPV and their male partner’s hazardous alcohol use in Lusaka, Zambia. Findings from the randomised controlled trial (RCT) suggest that CETA was more effective in reducing IPV and hazardous drinking than a treatment as usual plus safety checks approach (the control arm). However, there was also a significant reduction of IPV in the control group, suggesting that the safety check-in approach may also be an effective approach for couples.
Which men change in intimate partner violence prevention interventions? A trajectory analysis in Rwanda and South Africa

This article analyses whether different groups of men respond differently to interventions that work with men to prevent IPV. Using longitudinal data from three cluster RCTs, the researchers examined perpetration of IPV over two years in men enrolled in IPV prevention interventions. The interventions examined were the Stepping Stones and Creating Futures, and the Sonke CHANGE trial in South Africa, and Indashyikirwa in Rwanda.

The analysis found three IPV trajectories among the men:
- A trajectory starting with low IPV rates and staying flat
- A trajectory starting with high rates and declining sharply
- A trajectory starting high and increasing slightly

Men that reported high levels of IPV perpetration at baseline confirmed known factors for IPV perpetration, e.g. poverty, poor mental health and childhood trauma. Gender inequitable attitudes were consistently associated with high levels of IPV perpetration across the studies, suggesting that interventions to prevent IPV should have a strong focus on transforming gender norms and challenging acceptability of IPV.

Adolescent Girls Resource Pack: A Summary of the Evidence

This resource pack contains an overarching summary report as well as a set of four standalone briefs focusing on specific areas of importance for empowering girls, namely: girls’ groups/ safe spaces; humanitarian and conflict contexts; climate change; and monitoring, evaluation and learning.

The resource package is intended for programmers and policymakers working with adolescent girls. This blog post outlines how the package is also relevant and can be adapted in the context of the COVID-19 pandemic, as evidence from previous disease outbreaks have shown that inequalities experienced by adolescent girls will be exacerbated in times of crisis.

The summary report synthesises the current evidence and lessons learned on what works for adolescent girls’ empowerment. Key messages from the report include:
- The importance of adolescent girls’ participation throughout the programme cycle to understand their situation and priorities.
- The importance of providing safe spaces where adolescent girls can regularly meet with peers and mentors. Safe spaces have proved to be an effective platform to deliver a range of multi-sectoral interventions.

The report highlights several evidence gaps, including lack of evidence on the situation of the most marginalised girls, including girls with disabilities, girls who are married and those affected by conflict and crisis.