What do we know about VAWG and what more do we need to know to prevent it? A Summary of the Evidence

Violence against women and girls (VAWG) is preventable. However, to address it effectively we need to understand it in all its complexity. To develop and implement effective prevention interventions globally researchers and practitioners need to understand: the scale, scope and nature of the problem; variations across and within countries; women's experiences and men's perpetration of different forms of violence; and the underlying drivers, risk and protective factors that influence the occurrence of VAWG.

About this brief

It outlines our current knowledge base regarding VAWG and identifies where our understanding needs to be expanded in order to deliver the most sophisticated interventions and impact on the prevalence of VAWG globally. This brief is designed to provide an overview of what we know about intimate partner violence, non-partner sexual violence and child abuse, based on the literature. It can be used by programmers, policymakers and researchers to inform theories of change for violence prevention interventions. This is not a systematic review, but designed to inform the research agenda for the What Works programme.

What do we know about intimate partner violence, non-partner sexual violence and child abuse?

	IPV	NP sexual violence	Child abuse
Prevalence and patterns	IPV is a significant social problem worldwide, with estimates that 30% of women over the age of 15 have experienced physical or sexual violence by an intimate partner at least once in their lifetime (1). However, the level of violence varies greatly between countries and even within countries. For example, data on men's perpetration from the Asia-Pacific region shows a dramatic range between 26% (Indonesia rural site) and 80% (Bougainville, PNG) of ever-partnered men aged 18-49 reported perpetrating physical and/or sexual violence against an intimate partner in their lifetime (2).	Sexual violence is a global problem - the global estimate for the proportion of women who have experienced non-partner sexual violence is 7.2% - but levels of violence vary significantly across and within countries (3). The WHO Multi-country Study on Women's Health and Domestic Violence found that reported levels of sexual violence by non-partners from the age of 15 years varied from under 1% in Ethiopia and Bangladesh (where a majority of women are married by age 15 years) to 10–12% in Peru, Samoa and urban Tanzania (4).	In high-income countries (HICs), the annual prevalence of physical abuse ranges from 4% to 16%, and approximately 10% of children are neglected or emotionally abused (5). A recent meta-analysis estimates that 18% of women and 7.6% of men worldwide have experienced sexual abuse in childhood (6). Girls typically report rates two to three times higher than boys in high income settings (7). However, in some settings boys reports higher rates of CSA than girls (2).
Perpetrators	In low and middle-income countries (LMICs), the majority of partner violence in perpetrated by men against women. In higher income countries, a greater proportion of violence appears to be	The majority of sexual offences are committed by men known to the victim, with approximately half being serial offenders. Perpetration of non-partner	The majority of child abuse takes place in the home and in schools, perpetrated primarily by someone known to the victim. Eighty percent of physical abuse and

Overlap with other forms of violence	mutual, although the health and social consequences of men's violence remain more severe for women. Universally, types of violence (sexual, physical, emotional, economic) overlap in relationships, although the patterning of violence varies among countries. In most countries sexual violence usually occurs with physical violence, however in a	adolescence. Data suggests that between 50-75% of rape do so for the first time as teenagers (2, 5). There is a strong overlap between the perpetration of non-partner sexual violence and intimate partner sexual violence. There is also a strong overlap between men's perpetration of rape against women and	maltreatment is perpetrated by parents or caregivers in HICs (5). Types of violence against children and adversity in families frequently overlap. This means that researchers must understand family environments that put children at risk rather than studying one type of violence at
	number of countries in South East Asia sexual violence occurs on its own (2, 4).	against other men (2).	a time.
Causes and risk factors	No single factor causes partner violence, nor is there a single pathway to perpetration. Rather, violence emerges from the interplay of multiple interacting factors at different levels of the social 'ecology'. Some factors appear consistently potent in their power to elevate risk of partner violence in LMICs. These include: exposure to violence in childhood; presence of community norms that support wife abuse; binge drinking; and harmful notions of masculinity and rigid gender roles. Some factors, such as education and women's employment, appear to have a complex relationship to partner violence that varies by level achieved, social context, and other country-level factors. The factors that determine the prevalence of partner violence at a population level may be different than those that drive risk at an individual-level.	The perpetration of non-partner sexual violence is motivated primarily by sexual entitlement. Some factors appear consistently potent in their power to increase risk of non-partner sexual violence in low and middle income settings. These include: adverse childhood experiences, personality disorders and peer influences, delinquency, prevalent inequitable ideals of masculinity that emphasise the importance of heterosexual performance, and control of women, depression and substance misuse.	Different types of violence against children have different constellations of risk and protective factors. Common risks factors include poverty, approval of corporal punishment, mental health problems, low educational achievement, alcohol and drug misuse, having been maltreated oneself as a child, and family breakdown or violence between other family members.

There is a gap in data on sexual violence as compared to physical violence against women	Child sexual abuse, especially against boys and perpetrated by women	There is a gap in men's perpetration of VAWG as compared to women's victimization	There is a large geographical gap in the literature on VAWG in Middle East and Central Asia
There is limited data on VAWG in fragile states	We need more information on what helps buffer and protect individuals from risk. For example, what promotes resilience among children who have experienced abuse?	The current evidence base is highly skewed toward individual level predictors of abuse. More evidence is needed on relationship and community level risk and protective factors	Macro-level factors influence the geographic distribution of different types of violence and how global, economic and political processes feed into and affect the dynamic of VAWG
There is a substantial data base on risk factors for VAWG, but its unclear which are merely "markers" for other variables and which are causally related to the outcome	Interaction between factors across and within levels of the ecological model. e.g. protective effect of education is dampened when violence is highly acceptable in the community	Little is know about whether risk factors vary by age group	It is well established that adverse childhood experiences increase the risk of VAWG, however, we need to better understand how the experience of child abuse relates to other adverse childhood environments
The timing of risk factors and what is cause and effect	We must explore the extent of overlap between pathways to perpetration for different types of violence.	More evidence is needed on the impact of mental health/PTSD/antisocial behaviour on the perpetration of and experiences of violence	There has been limited research into the role that environment X gene interactions (epigenetics) play in the aetiology of different types of abuse.

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