

Evidence Digest

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Latest evidence

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

INTIMATE PARTNER VIOLENCE

Financial inclusion and intimate partner violence: What does the evidence suggest? (October 2019)

This analysis of nationally representative data from 112 countries found that higher levels of women's financial inclusion were associated with lower levels of recent intimate partner violence (IPV); for every 10% increase in financial inclusion, IPV reduced by 2%.

A similar trend was found in low- and middle-income countries (LMICs), however, the correlation diminished

when additional variables were introduced. Multivariate analysis suggests that contextual factors such as gender norms and asset-based enablers of economic autonomy can explain much of the relationship between financial inclusion and IPV in LMICs. For instance, in LMICs with high levels of controlling behaviour by male spouses, financial inclusion was associated with higher levels of IPV.

The authors conclude that programming in the nexus of IPV prevention and women's financial inclusion must recognise the complexity in this relationship and due to the significance of contextual factors, these initiatives should not operate in silo from broader efforts to reduce gender inequality and shift underlying norms that fuel IPV.

Maternal exposure to intimate partner violence and breastfeeding practices in 51 LMICs: A population-based cross-sectional study (October 2019)

This study assesses the relationship between maternal exposure to IPV and breastfeeding practices using nationally representative data from 51 LMICs.

The analysis found that mothers exposed to any form of IPV were less likely to adopt WHO's recommended breastfeeding practices; i.e. initiating breastfeeding within the first hour of birth and breastfeeding exclusively in the first 6 months.

The authors conclude that the findings may support the argument for screening for IPV among women attending antenatal healthcare in LMICs; arguing that targeted IPV-screening of pregnant women coupled with service provision hold the potential to improve mothers' well-being as well as support the uptake of WHO's recommendations.

VIOLENCE BY IN-LAWS

In-law-perpetrated abuse against women in North Kivu, Democratic Republic of Congo (October 2019)

An analysis of data from an evaluation of the International Rescue Committee's (IRC) *Safe at Home Programme* found that 19% of women had experienced physical



Image: Institute for Money, Technology, and Financial Inclusion (2010)

Latest evidence

or emotional abuse perpetrated by an in-law. Younger women were more likely to report abuse by an in-law than older women.

The findings, although from a relatively small sample size, are consistent with other studies on the topic, underscoring the importance of considering how a woman's extended family might be a source of abuse within conflict settings.

TRAFFICKING

[Sexual violence at each stage of human trafficking cycle and associated factors: A retrospective cohort study on Ethiopian female returnees via three major trafficking corridors](#) (July 2019)

This study examines the prevalence of sexual violence during all stages of trafficking (predeparture, travelling, destination, detention and integration/reintegration) among 671 women who had originally been trafficked from Ethiopia.

Sexual violence varies at different stages of trafficking, with estimated prevalence levels of 10% during predeparture, 35% during travelling, 58% at destination and 19% at detention stages. Smuggling at the initial stage was found to increase the risk of sexual violence.

Adolescent girls (aged 14-17) were two times more likely than women aged 26-49 to have experienced sexual violence.

The authors conclude that further research is needed to understand the consequences of the high levels of sexual violence during trafficking, including on women and girls' sexual health.

VIOLENCE AGAINST CHILDREN

[Violence against children in Latin America and the Caribbean: What do available data reveal about prevalence and perpetrators?](#)

(October 2019)

A systematic review of violence against children (VAC) in 34 countries in Latin America and the Caribbean found that physical and emotional violence perpetrated by caregivers ranged from 30-60%, with prevalence declining with older age. Prevalence of physical violence by students at school ranged from 17-61% and physical IPV against girls aged 15-19 ranged from 13-18%.

The study highlights several data gaps, including VAC against children younger than 9 years; boys aged 16-19 years; and sexual violence against boys (all ages) and girls under age 15.

[How to conduct good quality research on violence against children with disabilities: Key ethical, measurement, and research principles](#) (August 2019)

This paper provides guidance on methodological and ethical challenges associated with research on violence against children with disabilities. The guidance covers

issues such as how to define and measure violence and disability; and ethical and child protection obligations associated with undertaking research that involves children with disabilities.

The authors highlight remaining knowledge gaps including how to represent children with disabilities in large-scale surveys and how to conduct research with children with severe communication challenges.

EMPOWERMENT

[Effects of an empowerment program for survivors of sexual violence on attitudes and beliefs: Evidence from the Democratic Republic of Congo](#) (September 2019)

This study analyses baseline and end line data from "City of Joy", a programme aiming to empower survivors of sexual and gender-based violence. Questionnaires with 175 women reveal that they held more 'empowered' views about women's political, economic and domestic roles after participating in the programme. Interviews with 30 women indicate that the programme had a positive impact on their sense of confidence, independence and ability to speak out, which they attributed to increased knowledge about rights and new skills attained from the programme.

Image: City of Joy (2019), <https://cityofjoycongo.org/>



Policy and news

DFID have announced a new seven-year, £67.5m programme [What Works to Prevent Violence: Impact at Scale](#). The programme aims to build on the previous What Works initiative by expanding, adjusting and testing successful projects in new locations. It will also design and pilot new ideas and programmes about how violence can be tackled in times of conflict and during humanitarian crises.

In September, UN Women launched [What Will it Take? Promoting Cultural Change to End Sexual Harassment](#). The discussion paper addresses the need for cultural change to end sexual harassment and provides practical guidance to policymakers, employers, and universities on how to end sexual harassment within their organisations.

The [Cash and Voucher Assistance and Gender Based Violence Compendium: Practical guidance for humanitarian practitioners](#) (developed by CARE USA) provides guidance on identifying and monitoring GBV risks and mitigation measures throughout cash and voucher assistance interventions.

The World Bank, GWI, IDB and ICRW have developed a [Land Sector Brief: Violence against women and girls resource guide](#), providing guidance on how to integrate prevention of and response to VAWG into land programming.

The Prevention Collaborative has released two new practice briefs. [Training and mentoring community facilitators to lead critical reflection groups for preventing violence against women](#) focuses on recruiting, training and supporting community members to facilitate critical reflection on gender, power and violence. [Learning from Practice: Approaches to capture and apply practice-based knowledge](#) provides practical tips for how organisation can apply key-principles, tools and resources of practice-based knowledge.

The ICRC has adopted a new toolkit on [Engaging with State Armed Forces to prevent Sexual Violence](#) which serves as a resource for staff to engage in dialogue with State armed forces on preventing sexual violence.

Raising Voices and the African Women's Development Fund have released [Preventing Violence against Women: A primer for African women's organisations](#). Grounded in feminist approaches, the primer seeks to support the leadership and participation of African women's organisations in advancing violence against women prevention.

30 years after the adoption of the Convention on the Rights of the Child, this [report](#) by the Office of the Special Representative of the Secretary-General on Violence Against Children highlights progress made toward ending VAC, including more effective ways of generating and using data.

A new [country-level benchmarking index](#) examines how countries are responding to the threat of sexual violence against children. The index is part of the research programme "Out of the shadows: Shining light on the response to child sexual abuse and exploitation" and gathers data from 60 countries.

[The UN Trust Fund's learning hub](#) now has a catalogue of 50 evaluations of projects making a difference in the lives of women and girls.

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:

- Violence in the health sector
- Serious and organised crime and VAWG in Western Balkans
- Factsheets on GBV in Africa region
- Technical expertise to DFID Nepal on infrastructure and GBV
- Policy support to the Conflict Stability and Security Fund (CSSF) in Africa

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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DFID-Funded Research

What Works to Prevent VAWG?

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

What works to prevent violence against women and girls in conflict and humanitarian crisis: Synthesis Brief. Over the last five years the What Works programme has been conducting research to expand the international community's knowledge around VAWG and the effectiveness of programmes that seek to prevent and respond to this violence in conflict and humanitarian crises.

This new **synthesis brief** brings together the key results of *What Works* studies as well as other findings from contemporaneous research efforts published since 2015. It aims to provide an up-to-date resource for practitioners, policymakers and researchers on the state of evidence on VAWG in conflict and humanitarian settings and makes recommendations for VAWG policy, programming, and future research priorities.

A comparative case study of couples programming to support relationship quality in Nepal and Rwanda. This article compares evaluation data from two programs in Nepal and Rwanda that aimed to prevent IPV through working with couples to support relationship quality.

The study found similar pathways of change in both countries, indicating enhanced quality of relationships among couples in both settings. The majority of couples in both Rwanda and Nepal reported greater communication in their relationship after participating in the programmes. As poor communication has been identified as a contributing factor to IPV, the authors conclude that the improved quality of

communication can serve as a "critical antidote" to IPV.

Test-retest Stability of Self-reported Violence against Women Measures: Results from the Stepping Stones and Creating Futures pilot. This study assesses the stability of VAWG measures amongst young people (aged 18-30) in South Africa. The analysis found that IPV and non-partner sexual violence measures at group level are considerable stable, while at the individual level, there was less stability in IPV reporting.

The authors conclude that the findings suggest that population-based estimates of prevalence of violence against women in South Africa can be done with "considerable confidence" but warrant further research for improving the stability of measures, especially measures of exposure to violence at individual level.

Evidence Review: Combined economic empowerment and gender-transformative interventions. This report which gathers evidence from four What Works project evaluations demonstrates that combining economic empowerment and gender-transformative interventions for

women and families can reduce IPV and improve individuals' and families' economic position.

The Common Elements Treatment Approach: A proven way to treat violence against women and alcohol abuse. This evidence brief from a randomised clinical trial in Lusaka, Zambia explores an intervention seeking to address IPV and alcohol abuse. The Common Elements Approach (CETA) is an integrated treatment model that addresses mental health, alcohol abuse, and violence in families.

The study found that CETA was effective in reducing alcohol abuse and IPV: there was a 53% reduction in physical IPV and a 56% reduction in sexual IPV; a 62% reduction in hazardous alcohol use among men and a 52% reduction in hazardous alcohol use among women. CETA was also effective in reducing depression and trauma among participants.

Source: What works to prevent violence against women and girls in conflict and humanitarian crisis: Synthesis Brief (2019), p. 13
[Photo credit: Prabu Deepan, Tearfund]



What Works to Prevent VAWG?

Economic and Social Costs of Violence against Women in Pakistan: Summary report.

This study explores the economic and social impacts of VAWG to women and girls, families, communities and businesses in Pakistan. 34% of women reported that they had experienced any form of violence during the last 12 months, with various effects on wellbeing and economic productivity. Most women did not seek healthcare following the violence; however, those who did (2%) incurred expenditures 2.5 times higher than the average expenditure on health.

Another significant economic impact associated with VAWG is loss in productivity; the study found that VAWG leads to about 14.5 days of productivity loss per woman annually (including paid and unpaid work). The economic impact of VAWG extends to businesses; 14% of female employees reported having experienced IPV. The figure below shows estimated days lost due to absenteeism, tardiness and presenteeism (lack of focus at work) reported by female survivors of IPV.

Image: Average days of absenteeism, tardiness and presenteeism reported by female survivors of IPV last 12 months (data from business survey 2017),

Economic and Social Costs of Violence against Women in Pakistan: Summary report (2019), p. 25

STRIVE

A social empowerment intervention to prevent intimate partner violence (IPV) against women in a microfinance scheme in Tanzania.

This paper highlights the findings of the MAISHA cluster randomised controlled trial among women taking part in a microfinance loan scheme in Mwanza city, Tanzania.

Microfinance groups were enrolled in blocks of six to receive either the intervention or be wait-listed for the intervention after the trial (the control arm).

The ten-session MAISHA (which means 'life' in KiSwahili) intervention aimed to empower women and prevent IPV. It adapts and builds on the success of the IMAGE Intervention with Microfinance for AIDS and Gender Equity (IMAGE), which was trialled in South Africa.

Results show that women in the intervention arm were less likely to report physical IPV. They were also less likely to express attitudes accepting of IPV or believe that IPV is a private matter or should be tolerated.

Evidence from the trial also shows that the impact was greatest for women who participated in seven or more intervention sessions. However, there is no reported effect on sexual or emotional IPV.

The MAISHA findings confirm other evidence that IPV can be prevented by integrating a relatively short social empowerment into an existing economic empowerment platform.

Women's income and risk of intimate partner violence: secondary findings from the MAISHA cluster randomised trial in North-Western Tanzania.

This paper analyses data from women enrolled in the MAISHA trial to explore associations and potential pathways between women's income and IPV. The study finds that women's higher income was protective against physical IPV, and to a lesser extent IPV. However, women who contributed more financially to the household than their partner did were at increased risk of both physical and sexual IPV. The findings highlight the need for interventions to address men's livelihoods, male gender roles and norms around masculinity.

