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Effectiveness of interventions to prevent violence against women and girls: A Summary of the Evidence



A Summary of the Evidence

About this brief

This summary presents the evidence on the effectiveness of interventions to prevent violence against women and girls (VAWG). It is based on a rapid review of the existing evidence through a review of reviews and online searches of academic databases.

Strengths, gaps and limitations in the body of evidence

There has been an impressive increase in the evidence base for violence prevention interventions within the last 10 years. We now have several well conducted RCTs in low and middle income countries showing some success in preventing VAWG. The evidence base is continually expanding and there are many rigorous impact evaluations of programmes in the pipeline.

However, there are still many gaps and limitations in the evidence base.

- Most rigorous evaluations of interventions to prevent VAWG are from High Income Countries (HICs) and there has been little testing of how these programmes might be adapted or applied in Low and Middle Income Countries (LMICs).
- Particularly limited evidence on some intervention types, i.e. transforming masculinities and social norm change.
- Majority of evaluations do not measure violence as an outcome.
- Majority of evaluations assess the impact on direct intervention recipients and not at a community level.
- Limited evidence on interventions relevant for especially vulnerable groups.
- Indicators vary widely in nature and in data collection making comparisons difficult.
- Limited synthesis across interventions of key pathways through which interventions may be achieving their impacts.
- Short follow-up means we understand little about how change is sustained.
- For multi-component interventions it is difficult to attribute outcomes between intervention components.
- Limited evidence on scalability of interventions.

Key findings

Despite the limitations in the evidence base, overall this rapid review concludes that there is fair evidence to recommend: relationshiplevel interventions such as Stepping Stones; microfinance combined with gender-transformative approaches such as IMAGE; community mobilisation interventions to change social norms; parenting programmes; and interventions that primarily target boys and men (with women and girls) through group education combined with community mobilisation. Currently there is insufficient evidence to recommend: single component communications campaigns, although it is likely that on their own these are not particularly effective and therefore should not be prioritised. Alcohol reduction programmes show promise in HICs but much more evidence is required from LMICs to see if they are transferrable. There is insufficient evidence on school-based interventions mainly because they have not sufficiently measured VAWG as an outcome but they show promise in reducing risk factors for violence. Finally, there is conflicting evidence on bystander programmes which does not allow us to make a recommendation for or against the intervention.

Table 1 presents a summary of the evidence for different types of interventions to prevent VAWG. Darker colours represent stronger evidence, ranging from no evidence to fair evidence. Blue suggests that the interventions have been shown to be effective in preventing VAWG, green suggest they are promising in that they have been found to have an impact on risk factors but not on outcomes of violence directly. Orange means the evidence is conflicting, that is, some evaluations show that they are effective and others show that they are not. Red illustrates that the interventions have been found to be ineffective. While many intervention evaluations show an impact on risk factors related to violence such as attitudes, school attendance, sexual practices, alcohol use, harsh parenting, evaluations that demonstrate a significant impact on women's experiences or men's perpetration of VAWG are still relatively rare. This is in part because many evaluations fail to measure VAWG as an outcome. In other cases when VAWG is measured, we fail to find a change in rates of violence.

Of concern is the fact that there are some areas of intervention that are receiving substantial investment, but where there is limited evidence of effect. For example, there is significant interest in improving school infrastructure, including WASH facilities, and bystander interventions however there is no robust evidence of impact on VAWG of these interventions.

Table 1: Summary of evidence for different types of interventions to prevent VAWG

EFFECTIVE	 Microfinance and gender transformative approaches Relationship-level interventions Group education with community outreach (men/boys) Community mobilisation – changing social norms 	 Collectivisation and one-to-one interventions with vulnerable groups Alcohol reduction programmes (limited evidence from LMICs) 	
PROMISING (or impact on risk factors)	Parenting programmes	Whole-school interventionsSchool curriculum based interventions	
CONFLICTING	Bystander interventions	 Proactive arrest policies (without a protection order) Second responder programmes Specialised courts Alternative and restorative justice mechanisms Screening with referral (e.g. CBT) in health facilities Single component communications came 	Women's police stations/units
INEFFECTIVE		 Single component communications campaigns WASH interventions in schools 	
	FAIR EVIDENCE	INSUFFICIENT EVIDENCE	NO EVIDENCE

STRENGTH OF EVIDENCE

We are yet to see an intervention that has effectively reduced both men's perpetration and women's experiences of violence, with evaluations tending to report a change in one but not the other. Clearly, prevention interventions have not yet been fully optimized and further work is required to improve our approaches, understand and address different pathways to violence.

Multi-component interventions are more effective than singlecomponent ones in preventing VAWG. Media campaigns were more effective when combined with locally targeted outreach efforts and training workshops. Livelihood programmes alone had significantly less impact than interventions that combined economic interventions with gender training.

Gender transformative approaches are more effective than interventions simply targeting attitude and behaviour change. Whether that be in parenting programmes and addressing gender socialization and men's roles in care giving; or economic interventions that also aim to transform gender relationships.

There is emerging evidence that interventions that work with both men and women are more effective than single-sex interventions. Typically interventions types have been segregated into those targeting women's empowerment and those working with men and boys. However there is evidence to suggest that this separation is not conducive to long-term social change. For example, there are compelling arguments for including poor, economically marginalised men in economic interventions.

Implications for the prevention agenda

The following top 10 areas and approaches should be prioritised in terms of violence prevention in the future:

- 1. Interventions that have a clear theory of change
- 2. Multi-component programmes
- 3. Interventions that work with men and women
- 4. Interventions that seek to achieve community-level impacts
- 5. Interventions that combine face-to-face work with other approaches, and include skills building elements
- 6. Interventions that take a holistic approach and are gender transformative
- 7. Different interventions to target different forms of VAWG
- 8. Interventions targeting particularly vulnerable populations or those at high risk of perpetration
- 9. Interventions targeting different age groups
- 10. Interventions that are scalable in terms of human and financial resources.

The brief is a summary of Evidence Review of interventions to prevent violence against women and girls. What Works to Prevent Violence, June 2014. Available at: www.whatworks.co.za

Figure 1: Recommendations for the What Works research and innovation agenda

Overarching research questions:					
- What is the role of contextual factors on the impact of interventions?					
- What intensity & dosage is needed for impact?					
- Does the intervention have an impact on violence at the community level not just the individual level?					
- How scaleable is the intevention and how can it be scaled? How can they be implemented affordably?					
- What are the pathways of impact, how does change happen?					
- What is the potential relevance for different age groups and situations?					
Interventions of interest:	Entry points of interest:	Populations of interest:			
- Community mobilisation	– Schools	– Marginalised groups of women			
- Whole school interventions	– Families	 Adolescent boys with multiple risk factors for perpetration e.g. gang involved 			
- Peer or relationship interventions	– Workplaces – Communities	– Younger boys & girls			
 Parenting interventions 		– Couples			
 Small group interventions 		- Very high prevalence settings			
 Economic interventions combined with gender training 		– Parents & children			
- Social change media & communication					
- Psychotherapeutic /counselling interventions					