PREVENTING GBV: BREAKING THE CYCLE OF VIOLENCE AGAINST WOMEN AND GIRLS IN CONFLICT SETTINGS

Gender-based violence (GBV) is one of the most prevalent and persistent issues affecting 1 in 3 women and girls globally, greatly impacting the long-term health and well-being of violence survivors, their families, and communities.

Conflict and other humanitarian emergencies intensify already dangerous environments for women and girls, placing them at a greater risk of many forms of violence. To address this grave human rights, public health, and development emergency, innovative primary prevention programmes are being developed to change the harmful social norms that perpetuate GBV.

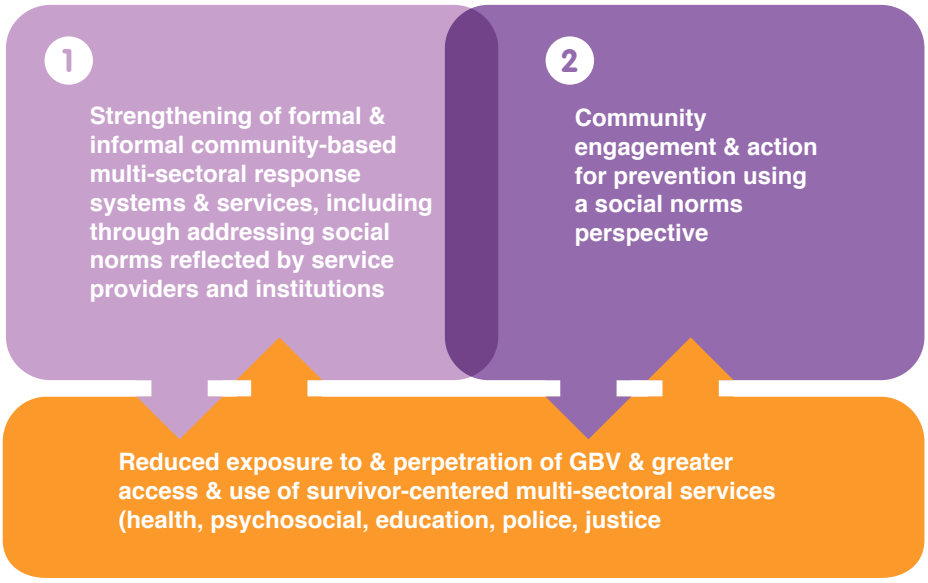
GBV is an umbrella term for harmful acts perpetrated against a person based on socially-ascribed differences between females and males. It includes acts that inflict physical, sexual and/or mental harm or suffering, including threats of such acts, coercion, and other deprivations of liberty.

COMMUNITIES CARE: A THEORY-DRIVEN SOLUTION TO ENDING GBV

The United Nations Children's Fund (UNICEF) Communities Care: Transforming Lives and Preventing Violence programme is an effective prevention and response intervention against GBV. It has been designed to empower people in conflict-affected and other humanitarian settings to create safer and healthier communities by addressing harmful norms that promote violence against women and girls, and fostering dignity, equality, and non-violence.

Communities Care follows a well-established, feminist-informed, public health approach to GBV prevention and response, acknowledging the need to address multiple factors at the individual, family, community, institutional, and societal levels that lead to destructive beliefs, attitudes, and violent acts towards women and girls.

PROGRAMME OBJECTIVES AND STRATEGIES



IMPACT EVALUATION

The Communities Care programme pilot was implemented in Mogadishu, Somalia in 2015-2016 by the Non-governmental organization International Committee for the Development of Peoples (CISP). Johns Hopkins University conducted a rigorous evaluation of the pilot.

- 24-month evaluation using a longitudinal (base-, mid- and end-line) community-based design.
- Compared changes in norms over-time and confidence in service sectors, in both intervention and control communities, with 387 randomly-selected community members in Mogadishu.
- Developed a brief, reliable, and valid social norms index, giving researchers the ability to measure changes in the norms that sustain sexual violence and other forms of GBV in humanitarian settings.

NOTABLE RESULTS

The evaluation showed positive changes in social norms and confidence in service providers in the district that participated in the Communities Care programme.

1 HARMFUL SOCIAL NORMS CHANGED

Participants in the intervention district showed statistically significant improvements in GBV associated norms versus in the control district:

14.2% ↓	REDUCTION IN SOCIAL NORMS THAT SUPPORT HUSBANDS' RIGHT TO USE VIOLENCE AGAINST THEIR WIVES	For example, participants report that fewer influential people in their lives would expect them to think is okay for a husband to beat his wife to discipline her
22.3% ↓	REDUCTION IN SOCIAL NORMS THAT SUPPORT PROTECTING FAMILY HONOR	For example, participants report that fewer influential people in their lives would expect them not to support a woman/girl to report rape to protect family honor
11.1% ↓	REDUCTION IN SOCIAL NORMS THAT SUPPORT NEGATIVE RESPONSES TOWARDS SEXUAL VIOLENCE SURVIVORS	For example, participants report that fewer influential people would expect them to blame the woman or girl if she is raped

2 CONFIDENCE IN SERVICES INCREASED

Participants in the intervention district showed a greater increase in confidence in GBV services across diverse service sectors than the control district.

POLICE	↑ 12.9%
JUSTICE	↑ 11.8%
TRADITIONAL ELDERS	↑ 8.9%
PSYCHOSOCIAL PROVIDERS	↑ 7.7%
HEALTHCARE PROVIDERS	↑ 3.9%
COMMUNITY HEALTH WORKERS	↑ 2.1%
BELIEF THAT HEALTH SERVICES ARE HELPFUL	↑ 30%

IMPLICATIONS

The evaluation of Communities Cares showed the programme's promise in changing harmful social norms associated with GBV and strengthening quality services for survivors in complex humanitarian settings. The promising outcomes from the pilot demonstrate that Communities Care can be scaled-up effectively in other settings to prevent sexual violence and other forms of GBV, promoting safer and healthier communities.

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Learn more about the Communities Care programme and toolkit by contacting:
Catherine Poulton, United Nations Children's Fund: cpoulton@unicef.org

Learn more about the evaluation of the Communities Care program by contacting:
Nancy Glass, PhD, MPH, RN, Johns Hopkins School of Nursing: nglass1@jhu.edu.