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.

**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**

1. Strengthening of formal & informal community-based multi-sectoral response systems & services, including through addressing social norms reflected by service providers and institutions

2. Community engagement & action for prevention using a social norms perspective

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.
IMPACT EVALUATION

The Communities Care programme pilot was implemented in 2015-2017 in two areas of South Sudan (Yei and Warrap) by local Non-governmental organizations Voice for Change (VFC) and The Organization for Children’s Harmony (TOCH). Johns Hopkins University conducted a rigorous evaluation of the pilot.

- 24-month evaluation using a longitudinal community-based design.
- Compared changes in personal beliefs over-time with 212 programme participants in Yei and with 202 program participants in Warrap. Measured the spread of community dialogue messaging with 678 randomly selected community members in Yei.
- 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 personal beliefs and the successful spread of community dialogue messaging to the community in the areas that participated in the Communities Care programme.

1. HARMFUL PERSONAL BELIEFS CHANGED

- **REDUCTION IN PERSONAL BELIEFS THAT SUPPORT HUSBAND’S RIGHT TO USE VIOLENCE AGAINST HIS WIFE (WARRAP)**
  - 20% reduction
  - For example, participants report that they do not believe that a husband should have the right to use violence to discipline his wife.

- **REDUCTION IN PERSONAL BELIEFS THAT SUPPORT PROTECTING FAMILY HONOR (YEI)**
  - 18.0% reduction
  - For example, participants report that they think it is wrong that women/girls are not supported to report rape in order to protect family honor.

- **REDUCTION IN PERSONAL BELIEFS THAT SUPPORT PROTECTING FAMILY HONOR (WARRAP)**
  - 41.9% reduction
  - For example, participants report that they do not believe that a husband should have the right to use violence to discipline his wife.

- **REDUCTION IN PERSONAL BELIEFS THAT SUPPORT NEGATIVE RESPONSES TOWARDS SEXUAL VIOLENCE SURVIVORS (WARRAP)**
  - 13.2% reduction
  - For example, participants report that they think it is wrong to blame the women or girl if she is raped.

2. MESSAGING FROM DIALOGUES WERE SPREAD TO THE COMMUNITY (YEI)

- **HAD SOMEONE TALK TO THEM ABOUT THE PROBLEM OF GBV IN THE COMMUNITY**
  - 46.9%

- **HAD HEARD MESSAGE ABOUT THE PROBLEM OF GBV IN THE COMMUNITY**
  - 72.6%

- **FELT THE DISCUSSION ABOUT GBV HAD INCREASED FROM LAST YEAR**
  - 34.6%

- **THOUGHT THAT THE COMMUNITY’S ATTITUDE ABOUT GBV HAD CHANGED FOR THE BETTER IN THE LAST YEAR**
  - 39.2%

IMPLICATIONS

The evaluation of Communities Care showed the programme’s promise in changing personal beliefs about harmful social norms associated with GBV and the spread of messaging from community dialogues 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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