NEW DIRECTIONS IN GENDER-BASED VIOLENCE RESEARCH

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New directions:

• In measurement and understanding of IPV: importance of emotional (and related) abuse

• In prevention: feminist approaches to building women’s resilience
Figure 2. Global map showing regional prevalence rates of intimate partner violence by WHO region* (2010)

* Regional prevalence rates are presented for each WHO region including low- and middle-income countries, with high income countries analyzed separately. See Appendix 1 for list of countries with data available by region.
Physical and/or sexual IPV prevalence: intra-regional differences in Asia and Pacific
Conceptualising and measuring IPV

- Overlaps between physical, sexual and emotional are well described
- Far less work has been done on emotional IPV measurement
- Also economic abuse
- Also controlling behaviours
- All of these are often treated as IPV lite
Growing evidence from the health impact that this attitude may be mistaken

- Data from South Africa, Stepping Stones trial (Lancet 2010)

- Evidence on HIV incidence and severe IPV and relationship control points to importance of both

- Also seen in cross-sectional research
Evidence of associations with mental health

- Ludemir et al, cohort study in Brazil (The Lancet 2010)

- Post-natal depression most strongly associated with pre-natal psychological violence, rather than P/S IPV
Impact of emotional abuse on cellular immunity: (South Africa, Stepping Stones (Plos One 2015))

- Emotional abuse was associated with decline in CD4 and CD8 in women with HIV not on ART
- P/S IPV, non-partner rape and controlling behaviours were not
- This also provides evidence of a health impact mechanism

- Additive impact of emotional abuse with physical and/or sexual IPV on depression

- Rather than IPV lite, emotional abuse appears to cement the impact of P/S IPV in emerging health impact analyses

- This fits well with survivors’ experiences

- This challenges much existing research on IPV conceptualisation and has important implications for impact assessment

<table>
<thead>
<tr>
<th></th>
<th>CESD mean</th>
<th></th>
<th>p-value</th>
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<tr>
<td></td>
<td>No</td>
<td>Yes</td>
<td></td>
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<tr>
<td>Only physical IPV</td>
<td>23.56</td>
<td>27.44</td>
<td>&lt;0.0001</td>
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<tr>
<td>None</td>
<td>23.49</td>
<td>1.00</td>
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<tr>
<td>Emotional only</td>
<td>23.62</td>
<td>0.92</td>
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<td>Emotional and physical</td>
<td>27.78</td>
<td>&lt;0.0001</td>
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<tr>
<td>Physical only</td>
<td>22.00</td>
<td>0.37</td>
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<tr>
<td>Only sexual IPV</td>
<td>24.26</td>
<td>29.73</td>
<td>&lt;0.00001</td>
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<td>None</td>
<td>23.16</td>
<td>1.00</td>
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<tr>
<td>Emotional only</td>
<td>24.67</td>
<td>0.15</td>
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<tr>
<td>Emotional and sexual</td>
<td>30.83</td>
<td>&lt;0.0001</td>
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<tr>
<td>Sexual only</td>
<td>23.8</td>
<td>0.76</td>
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<td>Any physical/sexual IPV</td>
<td>23.38</td>
<td>27.2</td>
<td>&lt;0.0001</td>
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<td>None</td>
<td>23.4</td>
<td>1.00</td>
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<tr>
<td>Emotional only</td>
<td>23.37</td>
<td>0.99</td>
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<tr>
<td>Emotional and p/s</td>
<td>27.61</td>
<td>0.0002</td>
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<tr>
<td>Physical and/or sexual or</td>
<td>22.82</td>
<td>0.72</td>
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<tr>
<td>Controlling behaviours</td>
<td>0.42</td>
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<td>&lt;0.0001</td>
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Risk factors and drivers of violence: towards a feminist understanding of resilience

• IPV prevention approaches historically drew on individually focused cognitive approaches

• Building women’s K & A → changing views on IPV → seeking shelter and/or given protection by family members

• E.g. leaflets, TV campaigns, screening interventions, awareness groups etc

• New generation interventions have shown impact through work with men/boys and community norms change

• E.g. Stepping Stones in South Africa, David Wolfe’s work in Canadian schools

• SASA and SHARE community trials in Uganda

• General conclusions are that these are useful, but men/boys work is better when combined with work with women/girls
New generation feminist approaches have focused on empowerment of women

- Based on belief that empowerment of women is a GOOD THING
- Based on evidence that some women experience more IPV and SV than others
- Evidence that interventions with women can prevent their exposure to violence through building:
  - Economic power
  - Education power
  - Gender empowerment (awareness raising)
  - Self-defence techniques

Drivers of women’s experience of IPV: UN Multi-country Study on Men and Violence in Asia and the Pacific (n=3106 women, 4 countries)
Building women’s resilience in IPV prevention

Evidence supports combination approaches:

• Economic empowerment:

  • 2014 review found 75 studies with an economic component around women’s and girls’ empowerment (10 RCTs)

  • Conclusion: fair evidence for combination of microfinance and gender transformative approaches esp. among older women,

• limited evidence for economic approaches alone

• Women in the workplace?
Preventing women/girl student’s exposure to sexual violence

Combinations of gender empowerment and self-defence

- 1 RCT, it’s the only intervention that has ever been shown to prevent rape on campus
- 12 hour intervention, with 9 hrs on gender empowerment
- Self-defence is predominantly asserting rights to physically and vocally resist (it’s not karate)


<table>
<thead>
<tr>
<th>Outcome</th>
<th>Control Group (N = 442)</th>
<th>Resistance Group (N = 451)</th>
<th>Absolute Risk Reduction</th>
<th>Relative Risk Reduction</th>
<th>P Value</th>
<th>Number Needed to Educate</th>
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<tbody>
<tr>
<td></td>
<td>no. (%)</td>
<td>percentage points (95% CI)</td>
<td>% (95% CI)</td>
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<tr>
<td>Completed rape</td>
<td>42 (9.8)</td>
<td>4.6 (0.6 to 8.4)</td>
<td>46.3 (6.8 to 69.1)</td>
<td>&lt;0.001</td>
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<tr>
<td>Attempted rape</td>
<td>40 (9.3)</td>
<td>5.9 (2.5 to 9.2)</td>
<td>63.2 (33.2 to 79.7)</td>
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<tr>
<td>Any rape</td>
<td>67 (15.5)</td>
<td>7.8 (3.2 to 12.4)</td>
<td>50.4 (24.1 to 67.6)</td>
<td>&lt;0.001</td>
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<tr>
<td>Coercion</td>
<td>62 (13.9)</td>
<td>3.4 (-1.1 to 7.8)</td>
<td>24.1 (-10.6 to 48.0)</td>
<td>0.15</td>
<td></td>
<td>29</td>
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<tr>
<td>Attempted coercion</td>
<td>103 (22.6)</td>
<td>8.1 (2.6 to 13.5)</td>
<td>35.8 (15.6 to 51.1)</td>
<td>0.001</td>
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<tr>
<td>Nonconsensual sexual contact</td>
<td>184 (39.1)</td>
<td>13.3 (5.2 to 21.4)</td>
<td>34.1 (15.2 to 48.8)</td>
<td>0.001</td>
<td></td>
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</tr>
</tbody>
</table>
Protective role of social power:

- Evidence from cross-sectional research among women in Rethy, DRC (unpublished data from Sandilands et al, Tear Fund 2017)

- Points to role of faith engagement in women’s empowerment
Overall lessons for the field:

• Building women’s resilience is very important for prevention of gender-based violence
• Successful feminist approaches are “gender empowerment plus”
• Intervention focus needs to be tailored for specific situations

• We need to evaluate interventions in different settings and develop for varied global contexts
• Strong evidence that work with men and boys adds impact to work with woman and girls, but the focus of the intervention can be different e.g. gender transformation and bystander focus for men and boys
Acknowledgements

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