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# Research to Action Toolkit:

## VAWG in Conflict and Humanitarian Settings

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**WhatWorks**  
TO PREVENT VIOLENCE

Violence Against Women and Girls  
in Conflict and Humanitarian Crises

The Global  
Women's Institute

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THE GEORGE WASHINGTON UNIVERSITY



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# Introduction

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The What Works to Prevent Violence Against Women and Girls (VAWG) programme funded by the UK Department for International Development (DfID) has invested £25 million over five years to develop new evidence on 'what works' to prevent violence against women and girls. Through this programme, the George Washington University's Global Women's Institute (GWI) and International Rescue Committee (IRC) have focused on developing new evidence to address gaps in understanding of VAWG during conflict and humanitarian crises, including implementing a landmark population-based study on the prevalence, forms and drivers of VAWG in conflict-affected South Sudan.

Through efforts such as the What Works programme there has been an increased focus on developing new evidence to better understand what works to prevent and respond to VAWG and an increase in data on VAWG in conflict and post-conflict settings, however gaps still remain in connecting these results to action. Often, completed research is written for academics rather than practitioners and is accessible only in pay-for-access peer reviewed academic journals. Even when results are freely available, practitioners and policymakers often may not know how to interpret the data or understand how to take action in response to the findings.

In order to bridge the gap between research and action, this toolkit has been developed to support non-academic stakeholders to understand and interpret the data gathered through population-based research on VAWG and to create a process for moving from evidence to implementing action. The Research to Action tool provides a step-by-step process for practitioners and policymakers to better understand and utilize data generated by VAWG research activities.

The tool is structured in a way to support members of the research team to facilitate a three-day interactive workshop that will help key stakeholders understand the results of research and plan for evidence-based actions. The stakeholders participating in these research to action workshops may include representatives from Ministries and agencies essential to the protection of women and girls in conflict settings including: the United Nations, non-governmental organizations (NGOs), Community-based Organizations (CBOs), Women's Rights Organizations, Ministries of Health, Ministries of Gender or their equivalent, and other humanitarian agencies.

Overall, the tool and workshop aim to provide practitioners and policymakers with a basic introduction to understanding quantitative data (Day 1), qualitative data (Day 2), and action planning (Day 3). A sample workshop agenda can be found in Annex 1.

“Any harmful act that is perpetrated against a person’s will and that is based on socially ascribed (i.e. gender) differences between males and females. The term ‘gender-based violence’ is primarily used to underscore the fact that structural, gender based power differentials between males and females around the world place females at risk for multiple forms of violence. As agreed in the Declaration on the Elimination of Violence against Women (1993), this includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion, and other deprivations of liberty, whether occurring in public or private life.”<sup>1</sup>

## VAWG in Conflict and Humanitarian Settings

Gender-based violence (GBV) is violence based on unequal distributions of power between the perpetrator and the survivor. The United Nations Inter-Agency Standing Committee (IASC) Guidelines for Integrating Gender-Based Violence Intervention in Humanitarian Action defines GBV as:

While women, men, boys and girls all can experience GBV, women and girls are disproportionately impacted by this violence. The term violence against women and girls (VAWG) highlights the experiences of women and girls within the wider GBV umbrella, and this term will be used throughout this toolkit.

While VAWG affects communities around the world, rates can often increase during armed conflict. In these contexts, women and girls may be at heightened risk of experiencing violence for a variety of reasons including: displacement, a breakdown of social structures and the rule of law, further entrenchment of harmful gender norms and ideas of masculinity, as well as the loss of livelihood opportunities for both men and women in the community.<sup>2</sup>

Conflict-related violence against women is often assumed to refer only to sexual violence – particularly armed actors using rape as a weapon of war—and research has found that sexual violence often does increase in armed conflict.<sup>3</sup> However, the available research also suggests, that even during conflict, more women and girls experience violence perpetrated by an intimate partner such as a husband or boyfriend rather than by a non-partner or member of an armed group.<sup>4</sup>

While there is limited available evidence on the prevalence of VAWG in conflict-affected settings, some researchers have tried to estimate summary rates of violence. Vu and colleagues conducted a systematic review and meta-analysis specifically examining sexual violence (SV) in conflict-affected settings which estimated an overall prevalence of SV among refugees and displaced persons in complex humanitarian emergencies of 21.4% (95% confidence interval: 14.9-28.7).<sup>5</sup>

Within the umbrella term of VAWG, there are specific forms of violence that are commonly seen within refugee and conflict-affected populations. Prevalent forms of violence in humanitarian settings include:

- **Intimate Partner Violence (IPV):** Physical, sexual, and emotional abuse and controlling behaviours by an intimate partner. This is one of the most common forms of violence against women and occurs in all settings and among all socioeconomic, religious, and cultural groups.<sup>6</sup>
- **Non Partner Sexual Violence (NPSV):** Any sexual act, attempt to obtain a sexual act, or other act directed against a person's sexuality using coercion, by any person regardless of their relationship to the victim, in any setting.<sup>7</sup>

- 1 Inter-Agency Standing Committee. 2015. Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action: Reducing risk, promoting resilience and aiding recovery.
- 2 Marsh, M., Purdin, S., & Navani, S. (2006). Addressing sexual violence in humanitarian emergencies. *Global Public Health*, 1:2, 133-146
- 3 Stark, L., & Ager, A. (2011). A Systematic Review of Prevalence Studies of Gender-Based Violence in Complex Emergencies. *Trauma Violence Abuse*, 12(3), 127-134.
- 4 Stark, L., & Ager, A. (2011). A Systematic Review of Prevalence Studies of Gender-Based Violence in Complex Emergencies. *Trauma Violence Abuse*, 12(3), 127-134
- 5 Vu, A., Adam, A., Wirtz, A., Pham, K., Rubenstein, L., Glass, N., Beyrer, C., & Singh, S. (2014). The Prevalence of Sexual Violence among Female Refugees in Complex Humanitarian Emergencies: a Systematic Review and Meta-analysis. *PLOS Current Disasters*, 1.
- 6 Inter-Agency Standing Committee. 2015. Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action: Reducing risk, promoting resilience and aiding recovery.
- 7 World Health Organization. Violence against women – Intimate partner and sexual violence against women. Geneva, World Health Organization, 2011.

- **Harmful Patriarchal Practices:** Patriarchal cultural practices reflect values and beliefs held by members of a community for periods often spanning generations. Every social grouping in the world has specific patriarchal cultural practices and beliefs, some of which are beneficial to all members, while others are harmful to a specific group, such as women. These practices include female genital mutilation or cutting (FGM/C); forced feeding of women; early marriage; the various taboos or practices which prevent women from controlling their own fertility; nutritional taboos and traditional birth practices; son preference and its implications for the status of the girl child; female infanticide; early pregnancy; and dowry price. Despite their harmful nature and their violation of international human rights laws, such practices persist because they are not questioned and take on an aura of morality in the eyes of those practicing them.<sup>8</sup>
- **Child, Early and Forced Marriage:** Child marriage, or early marriage, is any marriage where at least one of the parties is under 18 years of age. Girls are overwhelmingly more likely to be married under the age of 18, affecting over 650 million women alive today. Forced marriages are marriages in which one and/or both parties have not personally expressed their full and free consent to the union. Irrespective of age, women are also more likely to not be asked for their consent to a marriage compared to men. A child marriage is considered to be a form of forced marriage, given that one and/or both parties have not expressed full, free and informed consent.<sup>9</sup>
- **Sexual Exploitation and Abuse:** Sexual exploitation is any actual or attempted abuse of a position of vulnerability, differential power or trust for sexual purposes. This includes profiting monetarily, socially or politically from the sexual exploitation of another. Sexual abuse is the actual or threatened physical intrusion of a sexual nature by force or unequal or coercive conditions. Taken together sexual exploitation and abuse (SEA) in humanitarian settings refer to these acts when committed by United Nations, NGO, and inter-governmental personnel against the affected population.<sup>10</sup>
- **Femicide:** Involves intentional murder of a woman because they are woman, but broader definitions include any killings of women or girls.

The root causes of VAWG – in both conflict and non-conflict settings – are patriarchal gender norms and inequitable power dynamics. Certain characteristics are associated with men and women in many places around the world. This can

8 OHCHR: <http://www.ohchr.org/Documents/Publications/FactSheet23en.pdf>

9 OHCHR: <https://www.ohchr.org/EN/Issues/Women/WRGS/Pages/ChildMarriage.aspx>

10 Inter-Agency Standing Committee. 2015. Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action: Reducing risk, promoting resilience and aiding recovery.

11 Heise, L. (1998). Violence Against Women: An Integrated, Ecological Framework. *Violence Against Women*. 4:3, 262-290.

extend to education level, responsibilities in and out of the household, and jobs. These patriarchal gender norms are continuously enforced because societies are created around them. Patriarchy puts men at the positions of power in a society and in the household, which creates an inequitable power dynamic. One way these gender norms and inequitable power dynamics are upheld is through violence against women and girls. This can be exacerbated in conflict settings where the breakdown of normal societal mechanisms can lead to increased violence. The drivers of violence can be conceptualized through the socio-ecological model that visualizes the risk of experiencing violence as an interaction of factors from the societal to the individual levels.<sup>11</sup>

These drivers of violence begin at the societal level where gender inequitable norms and armed conflict are drivers of VAWG. These risks continue at the community level where VAWG rates are affected by breakdown of rule of law, increased criminality, increased impunity for perpetrators and a lack of social support. These factors can also affect relationship dynamics – such as increasing controlling behaviours of partners, which can result in higher levels of violence. Lastly, individual factors such as educational attainment, poverty, age, etc. can also affect the chances that an individual experiences violence.

The root causes and drivers of VAWG can be exacerbated by armed conflict. For example, armed conflict can lead to a breakdown of the rule of law that increases impunity for perpetrators of VAWG and may influence rates of violence. Conflict can affect VAWG in many different ways, though the evidence documenting these connections is quite limited. One way of visualizing these potential consequences of conflict on rates of VAWG is using a socio-ecological framework (see Annex 2 for an example). This model brings together potential risk factors at the individual, interpersonal, institutional, community and societal levels all which work together to inform an individual's risk of experiencing violence.

### Box 1: Using a socio-ecological framework to inform programming

The socio-ecological framework from Annex 2 can be a programme tool to assist practitioners to target interventions based on data. When analysing the situation for women and girls in a conflict or post-conflict setting, organizing data according to the socio-ecological framework can be a helpful way to think about areas where we can direct programming. For example, a town experiencing conflict may also be experiencing increased poverty, and the wives must begin to work to make money for their families. The wife earning money may threaten the traditional roles that men and women have in the home, which can trigger violence. A potential intervention here could be an economic empowerment program coupled with a household level intervention where men and women participate in discussions on gender roles within the home.



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# Understanding Quantitative Data

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## **Quantitative data can be summarized using numbers.**

For example, the percentage of women who experience rape or who sought services from a particular program is quantitative data. Quantitative data is important in research to understand how big a problem is and who the problem affects. Common methods of gathering quantitative data are surveys, pre- and post-tests, and service-based data. Some data collection tools already exist to measure VAWG, like the WHO Multi-Country Study on Domestic Violence, the International Violence Against Women Survey (IVAWS), the Violence Against Children Surveys (VACS), and the International Men and Gender Equality Survey (IMAGES).<sup>12</sup> These are good resources as they have been tested in many countries and provide a standardized tool for data collection. This also allows for comparisons to be made across studies because of the consistency in questions and definitions.

Quantitative studies can provide useful information for turning research into action as changes in numeric data such as percentages are relatively simple ways of tracking change over time. The information gathered from quantitative data collection tools are usually in the form of “closed” questions; for example, “yes or no,” “agree or disagree,” or the number of services provided recorded by a resource centre. The answers can be summarized using numbers, such as the number of percentage of women with a certain characteristic. Organizations like governments and funding bodies often use quantitative data as evidence for the need for funding and programs. In the VAWG and conflict context, quantitative data can be used to measure gender attitudes, prevalence, and service utilization.

## **Box 2: The What Works Programme in South Sudan**

The Global Women's Institute (GWI) at the George Washington University in collaboration with the International Rescue Committee, CARE UK and Forcier Consulting conducted a research study on VAWG in South Sudan from 2014-2017 on behalf of the What Works to Prevent Violence against Women and Girls in Conflict and Humanitarian Consortium ('What Works'). The study's aims were two-fold: (1) to explore the magnitude and scope of the problem of VAWG in the South Sudan and (2) to help the international community better understand the connections between conflict and VAWG.

GWI's experiences with this study have influenced the lessons learned and practices laid out in this toolkit and a 'Research to Action' workshop was conducted with practitioners and policymakers in South Sudan during this process. This experience will be referred to throughout this toolkit.

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<sup>12</sup> Some countries also conduct a Demographic Health Survey (DHS) which collects data on different health indicators of the country's population. At times, the DHS includes a module on Domestic Violence. The DHS is a broader survey overall, however, so it was not included in the list above which highlights VAWG-specific tools.

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## Common Sources of Quantitative Data

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### Population-based Survey Data

Surveys can be used to measure many variables including prevalence of VAWG, knowledge of VAWG, gender norms and attitudes, and consequences (e.g. physical injuries, mental well-being, etc.) of VAWG, access to services for survivors, etc. For example, surveys can be used to collect data on whether the population agrees or disagrees with certain gender attitudes – such as “if a girl child is raped, she should marry the man who raped her.” For example, a survey interviewed a total of 250 people in a town. Let’s say 150 people responded “agree” to the statement “if a girl child is raped, she should marry the man who raped her.”

$$\frac{150}{250} \times 100 = 60\%$$

Here, the researcher could report that “60% of surveyed individuals in Community A thought that if a girl child is raped, she should marry the man who raped her.” Sometimes, researchers will divide the responses into two separate groups by gender. The formula would just be changed, for example, to the men’s responses to a question divided by the number of male respondents. This tactic can be utilized to better understand which gender values are held most strongly in each group to better inform programming and discussions.

### Box 3: Calculating Frequencies

$$\frac{\text{Number of respondents who agree with a statement}}{\text{Number of respondents}} \times 100$$

Another way population-based surveys are used is to document the prevalence of VAWG in communities. While we know that VAWG is occurring during time of conflict and funding should not be delayed until data on VAWG is collected, there can be benefits to collecting population-based data on VAWG, particularly in later, more stable phases of an emergency. By calculating the extent of the problem, practitioners can better understand what proportion of women and girls who experience violence, understand what types of violence most women and girls experiences and track progress on VAWG prevention efforts over time.

While service-based data can be an important monitoring source of data on the types of VAWG being experienced, we know that only a small percentage of the survivors of VAWG report to services. The only way to fully understand VAWG at the population-level, as well as understand the drivers, consequences and barriers to service access is through population-based studies.

### Box 4: Need more information on how to collect/use quantitative data?

See the Global Women’s Institute’s

Gender-Based Violence Research, Monitoring, and Evaluation with Refugee and Conflict-Affected Populations: A Manual and Toolkit for Researchers and Practitioners

## Calculating Prevalence

Prevalence is the proportion of a population affected by a specific problem. Prevalence is calculated by dividing the number of people who have experienced a specific problem (called the “numerator”) by the number of people in the population who are at risk for experiencing the problem during a specific period (the “denominator”). The prevalence of VAWG within a community can be measured with the following formula:

It is important to understand the denominator in prevalence as the at-risk population, not always the full population. If the research team wants to identify the number of women who experienced intimate partner violence in her lifetime, what should the denominator, or “at risk” population, be? Women in the study population who have ever had a partner (boyfriend, husband), commonly referred to as “ever-partnered women.” It would not be appropriate to include women who have never had a partner at any point in her lifetime in this statistic because never-partnered women do not experience intimate partner violence. If the research team wanted to determine the number of women who experience non-partner sexual assault, the denominator or “at risk” population would be all women in the study population. Some characteristics to keep in mind for determining the “at risk” population are age-range, partner status, gender, location, and more.

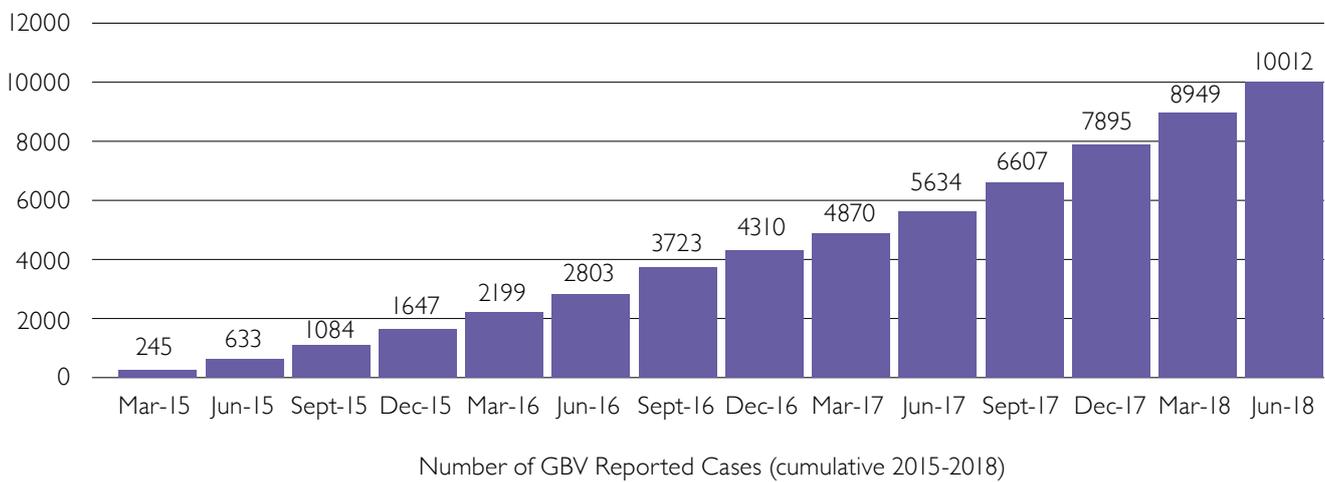
### Box 5: Calculating Prevalence

$$\frac{\text{Number of women who have experienced abuse in a certain period of time}}{\text{“At risk” women in the study population}} \times 100$$

### Box 6: Gender-based Violence Information Management System (GBVIMS) ment System

The Gender-based Violence Information Management System (GBVIMS) is an inter-agency effort to safely collect and share de-identified case data. Compiled data in the system can help an individual NGO, as well as the wider GBV sector; track the number of cases accessing services as well as key trends in case reporting (for example, types of GBV, where survivors are presenting to for services, etc.) A new mobile version of this system is being developed and rolled out through the Protection related Information Management project (Primero). See: <http://www.gbvims.com/> and <http://www.primero.org/> for more information on the system

Figure 1: Example 1 of case reporting data from the GBVIMS



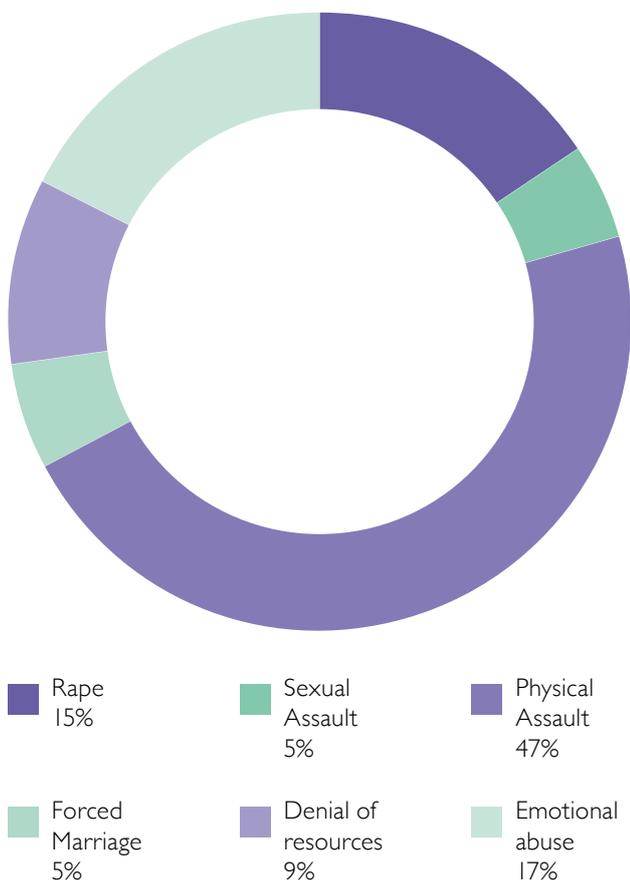
## Service-Based Data

Service-based data utilizes data collected when survivors of violence access medical, psychosocial, security or legal services through NGOs or government service providers (such as data collected via the GBV Information Management System - GBVIMS).

Service-based GBV data typically includes information on the number of reported cases (by type of violence), background characteristics of those reporting (e.g. age, sex, etc.), location of the incidents, and type of services received. This information can give practitioners good data on the types of VAWG occurring in the community – particularly for more severe types of violence, which are more likely to be reported to services – and can help practitioners better target services. See Figures 1 and 2 for examples of the types of data we get from common service providers in humanitarian settings.

While service data is easily accessible and can be collected from an early stage in an acute emergency, it is important to remember that data collected through services are not representative of the wider population and can only tell us about the characteristics of survivors who seek services. In many cases, particularly in conflict-affected settings, there are numerous barriers to service provision. It is therefore important to interpret the data collected via these mechanisms as trends rather than a true representation of the situation in the wider population.

**Figure 2: Example 2 of case reporting data from the GBVIMS**



## Rapid Assessments

Rapid assessments can also be used to collect quantitative (and qualitative) data on the needs and priorities of the affected communities. Rapid assessments are typically quick data collection exercises that gather key information needed to inform program design – including assessing local needs, exploring local perspectives to be incorporated into program design, etc. During the acute phase of an emergency, rapid assessment techniques can give practitioners and policymakers sufficient data to set up an initial emergency response.

As with service data, there are drawbacks to these methods that can limit the ability to interpret data. For one, these methods collect data on perceptions rather than personal experiences. Issues such as stigma or what stories are popularized in the local media may bias what is reported through these methods. In addition, the quick nature of these exercises mean that sub-populations (for example, people with disabilities, LGBTI, etc.) may be missed. Nevertheless, there are many rapid assessment techniques that can help practitioners understand trends. For example, participatory data techniques such as participatory ranking methodology or proportional piling can quickly give basic quantitative data on the overall extent of the problem of VAWG in an emergency and the types of violence that are most affecting a community.

For the purposes of this toolkit, quantitative data collected via population-based surveys will be the focus, given the ubiquitous use of surveys in conflict and humanitarian settings to collect quantitative data.

## Understanding Study Populations and Sampling

**Representativeness:** It is important to understand the study population and the sample your research addresses. If the sample drawn for the study is representative of the overall population, the data gathered can be used to describe the overall population. Some things to consider when assessing representativeness are race/ethnicity, age, geography, socioeconomic status, and other factors that influence a person's life. The proportion of women in the sample with a certain characteristic, such as belonging to a certain ethnic group, should be the same as the percentage of women in the population itself. This is only possible to determine if you have already got a census or data from other population-based surveys.

**Sampling:** Researchers can use a variety of sampling methods depending on the type and context of study. Two common methods are random sampling and convenience sampling. The chart below shows the differences between the two sampling methods, why researchers would choose one over the other, and the representativeness of the results.

**Table 1: Sampling**

Random Sampling	Convenience Sampling
Population-based data	Participants chosen based on convenience to research team
There is an equal chance of selection for participation for each person in the study population	Not preferred for quantitative studies, but can be more common in conflict and refugee settings for safety reasons
When done correctly, can result in representative data	
Example: Interview respondents randomly selected from a list of households	Does not result in representative data
	Example: Interview clients at a health facility

### Box 7: Defining the population:

The study population does not always have to be an entire country. It could be a refugee community, a certain town or village, or women/girls of a certain age range. It is vital that the research team is clear on who the study population is and how the sample relates to the study population.

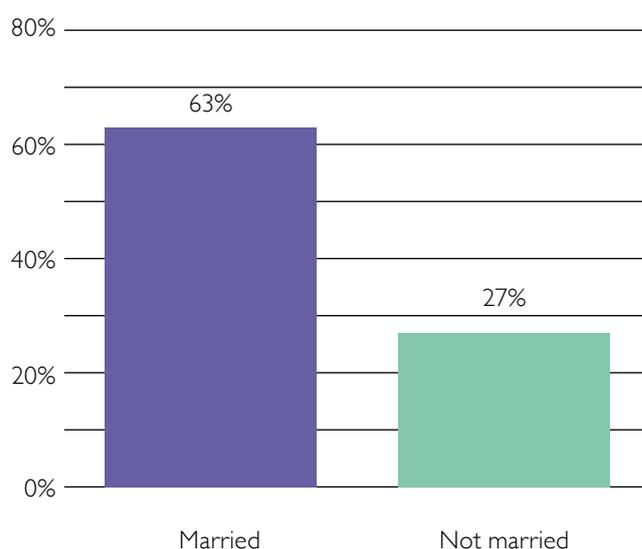
When random sampling is done correctly, it results in representative data. Obtaining a representative sample requires special techniques and must be done by a researcher who is experienced in sampling methods. Everyone working with the data, however, should have an understanding of the sampling strategy and whether it resulted in representative data. Using the data for action requires the practitioners to have a good understanding of the characteristics of the data.

## Descriptive Data

Statisticians use a range of tools to analyse and interpret what quantitative data means. While much of the analysis will be done by a statistician using a statistical program, everyone should be able to interpret the findings of quantitative data in the context of the research.

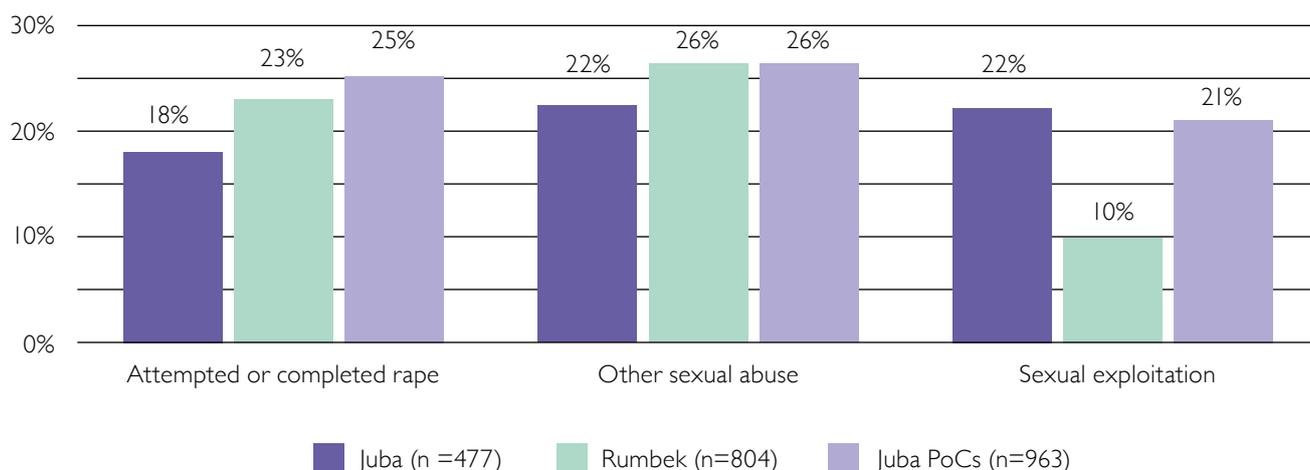
**Descriptive analysis:** The simplest form of data analysis is descriptive analysis – using statistics to describe what is going on in the population. For example, the percentage of the population who report that they know about a specific topic, agree with a belief, or have experienced a certain behaviour would be descriptive data. This data can be presented as percentages or in graphs or tables to better understand the differences between groups. For example, in Figure 3 we can see the difference between the percentage of women and girls interviewed in South Sudan who are married (63%) and unmarried (27%).

**Figure 3: Marital Status of Female Respondents in VAWG Survey in South Sudan**



More complex data can also be displayed in graphical form as well. For example, a graph that displays a considerable amount of descriptive data is below in Figure 4. This information shows the percentage of the population that has experienced multiple forms of sexual violence among three different sites.

**Figure 4: Prevalence of non-partner sexual assault in South Sudan (by type)**



### Interpreting Results from More Complex Analysis

Other, more complex forms of data analysis can be used to understand the data generated through research. One common aim of survey interpretation is understanding the relationship between two variables. For example, are violence rates higher in community A or community B? Are women and girls at more risk of violence at younger or older ages? To answer questions such as this, researchers construct “cross-tabulations or cross-tabs” to sort respondents into groups.

For example, below in Table 2, we examined the question “are women who live in conflict-affected locations more likely to experience intimate partner violence than women who do not?” We use a cross tabulation to understand what percentage of women who lived in a community affected by conflict and also experienced IPV versus the percentage of women who lived in a non- conflict-affected community and experienced IPV.

By comparing these two percentages (highlighted in Table 2), we are able to see that women who lived in a community affected by conflict, in fact had higher rates of IPV. This gives us more detail and can help us better target programming compared to simply looking at frequencies.

### Confounding: A Key Concept for Understanding Data Analysis

While we might see a relationship between two variables, we often want to understand more complex relationships between multiple variables. In order to do this we need to have a basic understanding of the issue of confounding. Confounding is the false impression of a cause-effect relationship where it does not really exist.

**To understand this, let’s go through an example. When we initially looked at the data we saw an odd finding – we saw that respondents who were literate were more likely to have experienced IPV.**

**Table 2: Example of a Cross-Tabulation**

			Experienced IPV			Total response
			Yes	No	No	
Lived in a community affected by conflict	Yes	#	1000	333	2	1335
		%	74.9%	24.9%	0.15%	100.0%
	No	#	254	408	3	665
		%	38.2%	61.4%	0.45%	100.0%
Total	#	1254	741	5	2000	
	%	62.7%	37.05%	0.25%	100.0%	

**Table 3: An example of confounding literacy and IPV**

Literacy	Prevalence of IPV
Literate (n=500)	33%
Not literate (n=348)	25%

This seemed strange as we typically consider more education as a protective effect for women and girls.

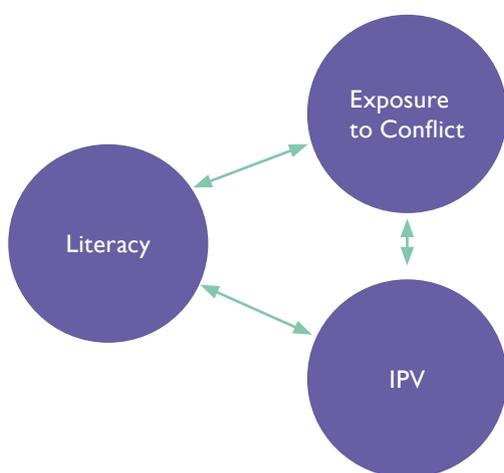
We then looked at how being literate was associated with exposure to conflict and found that those who were not literate were more likely to be exposed to conflict – possibly due to more poverty or less mobility among this population.

**Table 4: An example of confounding literacy and exposure to conflict**

Literacy	Exposure to Conflict
Literate (n=488)	17%
Not literate (n=360)	25%

What we found is that literacy was associated both with rates of IPV and exposure to conflict – it was a confounder.

**Figure 5: A Visual Representation of Confounding**



In order to account for this confounding, we stratify the data. Stratification involves analysing data separately using defined categories of the confounding factor.

When we stratified the groups into literate and non-literate women, we found that exposure to conflict WAS associated with IPV. We often look at stratified data in order to better understand differences between groups – such as locations or ages – when we expect that the data would not be consistent across these groups.

**Table 5: An example of confounding literacy, conflict and IPV**

Exposure to Conflict	
Literate (n=488)	
Exposed to conflict	35%
Not exposed to conflict	24%
Not literate (n=360)	
Exposed to conflict	38%
Not exposed to conflict	27%

### Interpreting a Regression Table

Confounding can also be addressed through a technique called regression to examine these connections. In VAWG research we often use logistic regression that generates statistics called “Odds Ratios”. See Table 6 below for an example of the results of logistic regression. For odds ratios, it is important to look to see if the OR is greater or less than 1.0. ORs less than 1.0 mean the variable is to lower the odds of the outcome, while ORs that are greater than 1.0 increase the odds of the outcome.

For example, the below table is looking at what variables are commonly seen in adolescents who reported experiencing IPV. If we look at the variable ‘literacy’ we can see that 43.8% of girls who experienced IPV were literate while 41.5% were not. The table then shows the OR – 3.65 – which can be interpreted as – a girl who is literate had 3.65 times the odds of ever having experienced IPV. However, this result was not statistically significant – meaning the result is likely to have been due to chance rather a true difference in the underlying population. Statistical significance will be discussed more below.

**Table 6. Drivers of Lifetime Experience of IPV, Perpetrated against Adolescent Girls in South Sudan**

	%	OR
<b>Literacy</b>		
Not Literate	41.5	1
Literate	43.8	3.65
<b>Highest Level of Education</b>		
No Education	44.2	1
Primary School	42.6	0.25
Secondary or higher	42.9	0.32
<b>Fuel Source</b>		
Other (wood, leaves, grass)	61.0	1
Charcoal	37.4	0.49*
<b>Number of Controlling Behaviours Experienced (0-4)</b>	-----	1.40***
<b>Village Ever Attacked</b>		
No	26.7	1
Yes	56.6	2.37*

\* P <= .05; \*\* P <= .01; \*\*\*P <= .001

Similarly if we look at the variable 'village ever attacked' we can see that 56.6% of adolescent girls who experienced IPV also lived in a village that was attacked. Translated to an OR, this means that girls who lived in a village that was attacked had more than 2 times the odds of experiencing IPV.

OR that are under 1 are considered protective (i.e. they reduce the likelihood that the respondent would experience the outcome). If we look at the variable 'fuel source' we can see that the OR for respondents who used charcoal was .49. This means that adolescent girls who used charcoal had 51% less the odds (1-.49 = .51) of experiencing IPV.

Finally, some variables included in the analysis may be numerical rather than categorical (i.e. a variable that where responses can be placed into categories such as married or not married). For example, if we look at the variable "number of controlling behaviours" we can see that respondents could have experienced anywhere between no controlling behaviours up to four behaviours. The OR here is 1.4 which can be interpreted as for every increase in number of controlling behaviours experiences the girl has a 40% greater odds of experiencing IPV.

## Understanding Statistical Significance

Remember that statistics are based on samples – we do not interview everyone from the whole population. This means there is some UNCERTAINTY in our estimates – in other words our results may be due to chance based on our sample size.

One way we address this uncertainty is calculating the statistical significance of our results. The most common way to present significance in reports and academic papers is through the use of a p-value.

P-values are a way for us to understand what the likelihood is of a result being due to chance versus reflecting a true difference in the underlying population. A common rule of thumb in research is that a p-value of .05 is used as a cut off between an acceptable amount of uncertainty versus an unacceptable level. A p-value of .05 means that there is a 5% chance of the difference between groups is due to chance rather than an actual difference in the population. Similarly, a p-value of .01 means there is a 1% chance of the result is due to chance and a p-value of .001 means there is a .1% chance that the result is due to chance. For p-values, a smaller number is better – as it makes us more confident in our results.

For example, let's look back at an excerpt from the Table 7 below. At bottom of the table there is a key showing that a p-value less than or equal to .05 is represented by a \*, a p-value less than or equal to .01 is represented by \*\* and a p-value less than or equal to .001 is represented by \*\*\*.

As discussed above, we saw there was a difference between literacy levels of adolescent girls who had and had not experienced IPV. However when we look for statistical significance we see that the difference is not significant (there are no \*s). Therefore we cannot conclude with confidence that the difference we see is not due to chance.

**Table 7. Excerpt of Drivers of Lifetime Experience of IPV, Perpetrated against Adolescent Girls in South Sudan**

	%	OR
<b>Literacy</b>		
Not Literate	41.5	1
Literate	43.8	3.65
<b>Fuel Source</b>		
Other (wood, leaves, grass)	61.0	1
Charcoal	37.4	0.49*
<b>Number of Controlling Behaviours Experienced (0-4)</b>	-----	1.40***

\* P <= .05; \*\* P <= .01; \*\*\*P <= .001

We can also look again at the results for the fuel source of the girls. In this case there is a statistically significant difference between the girls who use charcoal as their fuel source versus those that use other sources. This means that we are more confident (p-value equal or less to .05 which means there is a 5% chance or less that this result is not reflective of the underlying population) that girls who use charcoal for cooking have less odds of experiencing IPV. Similarly, the more controlling behaviours a girl experiences, the greater her odds of experiencing IPV – a result that is statistically significant (p<=.001).

See activities I (understanding the study population and calculating prevalence), II (Interrupting a cross-tabulation) and III (Interpreting quantitative data) in Annex 3 for sample exercises to practice the concepts discussed in this module and apply the concepts to the results in your study.



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# Understanding Qualitative Key Findings

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Qualitative data is narrative data gathered from a study. Collecting qualitative data is important for understanding details and context on topics such as beliefs, norms, and behaviours. For prevalence studies, this can help the research team better understand the circumstances that violence is occurring as well as gain more details about the drivers and consequences of this violence.

Qualitative data is particularly important in conflict and humanitarian settings where it might not be possible to collect quantitative data until the situations stabilize and to more deeply understand the connections between different types of VAWG and conflict.

Sampling for qualitative data is purposeful and flexible – it does not need to be random for generalizability – and involves a smaller sample size compared to a quantitative survey. It can also be a valuable addition to quantitative data in providing a narrative and centering the experiences of survivors rather than just reporting numbers.

## **Box 8: Need more information on how to collect/use qualitative data?**

See the Global Women's Institute's

Gender-Based Violence Research, Monitoring, and Evaluation with Refugee and Conflict-Affected Populations: A Manual and Toolkit for Researchers and Practitioners

Some of the most common ways researchers gather qualitative data is through focus group discussions (FGDs) or key informant interviews (KIIs). During these events, researchers ask “open-ended” questions that encourage respondents to give details (not yes/no, agree/disagree).

Focus group discussions are often relatively small group discussions with members of the study population where the discussion is guided by a researcher with standard questions. Researchers often conduct multiple FGDs with different groups of people in the study population and use the same guiding discussion questions for consistency and ease of reporting the findings. A common tactic in VAWG qualitative research is having gender-segregated FGDs.

Key informant interviews are often conducted with one respondent at a time. The respondents are chosen specifically by the research team because of their knowledge of the topic (survivors, NGO employees, health providers, etc.). Because the respondents work in different fields and/or have different connections to VAWG services, it is acceptable for the interviewer to ask different questions in each of the interviews.

**Table 8 : Characteristics of Common Qualitative Data Collection Methods**

<b>Focus Group Discussions (FGDs):</b>	<b>Key Informant Interviews (KIIs):</b>
6-12 respondents per group based on similar characteristics (age, sex, etc.)	Interview with one respondent at a time
Used to understand norms, beliefs, and practices at the community level	Often conducted with survivors, community leaders, village elders, non-profit employees, government employees, health professionals
Not used for discussing personal experiences/ individual behaviour (no FGDs with survivors)	Provide detailed information about personal experiences or opinions
Can inform further research, programs, and quantitative studies	

Researchers use dedicated qualitative software to analyse data, just as researchers use quantitative software to analyse quantitative data. Overall, the analysis process involves researchers reading through the transcripts of data, identifying common themes (through a process called coding) and organizing the data under these themes to identify trends. To learn more about the process of qualitative data analysis see GWI's Gender-Based Violence Research, Monitoring, and Evaluation with Refugee and Conflict-Affected Populations: A Manual and Toolkit for Researchers and Practitioners.

Qualitative data analysis is also different from quantitative analysis. One strategy researchers use is identifying themes in the qualitative data. For qualitative data analysis, the results should be organized around the original study questions. When examining prevalence data this generally starts by examining descriptions of the situation in general. For example we might be interested in the types of violence that adolescent girls are experiencing and see – through the quotes in the transcripts from our research in South Sudan – that forced marriage is a problem that this group is experiencing.

**“Women and girls have no voice – their uncles and fathers manage the brideprice. 14 to 15 year old girls can be married off to 60 year old men. The girl has no choice and the mother has no right to refuse either.”**

**Key Informant Rumbek**

**“In society women and girls are forced to marry men that they don’t love.”**

**Female Focus Group**

**“Early marriage happens all over South Sudan.”**

**Men Focus Group in the Juba PoCs**

We might then be interested in identifying some of the drivers of forced marriage in this context. We see that the issue of poverty is commonly mentioned by respondents. For example we may see the following quotes from the data.

**“So many girls are being forced to get married as a result of poverty. The situation in their home is that the parents may force their daughter to get married to a wealthy man – e.g. a man with a lot of cattle.”**

**Young Women Focus Group in Juba**

**“In most communities girls are forced to get married at an early age simply because their parents want to get a brideprice. This is very common in communities.”**

**Older Women Focus Group in Juba**

**“Since the crisis broke out in Juba and spread to other states, many people lost their properties and now they force their daughters to get married to get wealth.”**

**Men Focus Group in Juba POC**

**“It is common that parents are influenced by rich people – especially those with cattle – and a girls is forced to marry. This is sometimes due to poverty which will prompt the father of the girls to give her out.”**

**Key Informants Rumbek**

When looking at this data it is important that saw this trend across multiple different groups and informants – this increases our confidence that it isn't just the opinion of one person but may be reflective of a true underlying trend in the community.

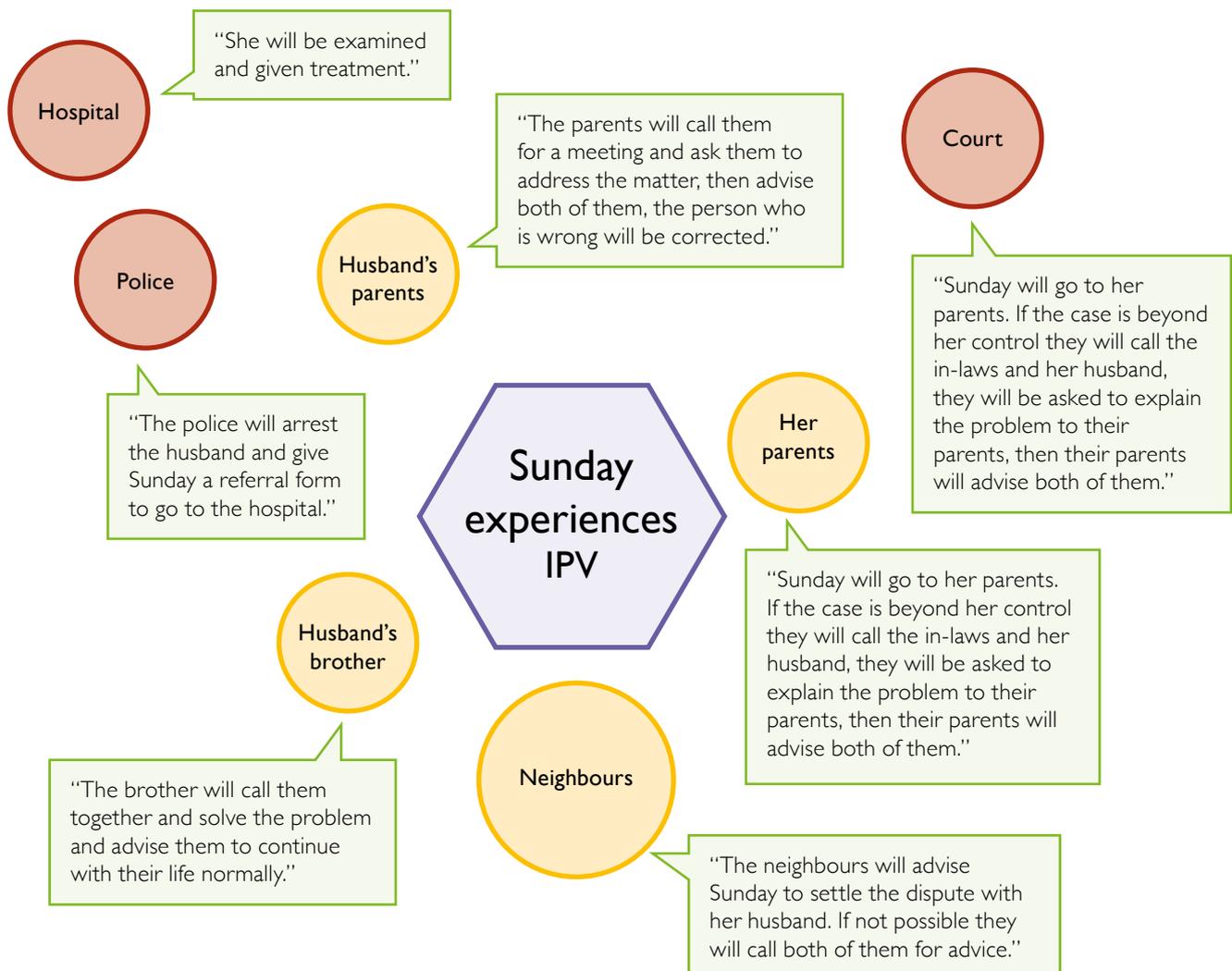
Qualitative data can be presented as short quotes or even longer stories that reflect the same trends we find throughout the data. For example, see Box 9 to see the story of a girl's experience of forced marriage in South Sudan. By presenting a longer story readers are able to better understand the complexities of experiences of forced marriage in the context. It shows some of the same drivers of this violence we saw in the shorter quotes – poverty – but also some of the consequences and impunity of perpetrators.

Visual methods can also help us understand the relative differences in the expressed importance of qualitative data. For example, see Figure 6 which is a visualization of qualitative data collected as part of the What Works programme in South Sudan about the accessibility and usefulness of potential sources of support for survivors of IPV. Participants were read a story about a woman's experiences of violence and then gave suggestions about how the story would end in their own communities. During data collection and analysis, the support services were documented visually based on how useful each service was thought to be, with more useful services placed closer to the centre of the diagram. This presentation helps practitioners quickly understand key findings from lengthy qualitative data.

As with quantitative data, it is important to assess the rigor of qualitative data and interpretation of the results. Whenever possible, return to the community to present findings and seek feedback on your interpretations of the results to check the validity of the findings or work with key informants in the community to review and validate findings. Also, consider comparing the data with other sources – including other studies as well as comparing the quantitative and qualitative data of this study - to confirm validity.

See activities IV (discussion on qualitative results), V (Using the ecological framework to map out risks and consequences of GBV) in Annex 3 for sample exercises to practice the concepts discussed in this module and apply the concepts to the results in your study.

**Figure 6: Focus Group Visualisation**



### Box 9: 'I am too young to marry you!' A story of forced marriage

Below is an excerpt from an interview in Rumbek with 'Rachel'" and her daughter 'Helena', who is about 13-years-old [Rachel is not sure of the age.] Helena was abducted by an uncle at gunpoint and sold to an older man so that the uncle could pay his own wife's bride price. Told together, Rachel and Helena's stories reflect the life cycle of violence experienced by women in South Sudan.

Rachel: When I was young, this man came to my house, and it was settled. He did not spend time getting to know us, I was just given to him. I did not quarrel. No cattle were given for me until my first child was born, and then he gave four cows to my brother. Most of my relatives, including my father, were killed in the fighting [Civil War].

...Married life was difficult. I had four children – all girls. If God had given me a boy, my life would not be like this. My husband was always off with a gun. He mistreated me a lot. Last year, he died in the hospital from an illness. Our few goats and cows were taken by my husband's brother. That is common for widows – they come and take everything unless you have a son...

...My first born, Sunday, was given to a man by my brother for five cows. I was in Juba visiting my husband when she was taken away. I was very annoyed, because my daughter was in school, and I was expecting that she would help me later. This was not my plan. My brother did not think about my life; he just took the cows and gave them to his in-laws... I was also planning to send Helena to school, and then the same thing happened. My husband's relatives came and said, 'Now we want the girl to live with us.' I tried to reason with them, but then they threatened me with a gun and stole her. She was given to a man in Rumbek East for 15 cows. He was not a good man... She was gone for one month...

Helena: I was in P3 [primary school – third level] before I was removed from school. I like maths and to skip rope and play volleyball. With my friends, I like to tell stories, make up ideas... just be together. I am the only one [among my friends] to have this problem... My uncle took me and beat me, so that I would accept the marriage. He told the man to beat me every day so I wouldn't escape.

So, the man decided to beat me and said, 'Do you know why your relatives took my cows? So that you would stay here.' I said, 'I am too young to marry you; I can't do anything,' so he hit me in the head with a stick, and I collapsed. Then he removed my underwear and started to sleep with me. He held a knife to my eyes and told me that he would slaughter me. I escaped and ran back to my mother. There were injuries to my insides—it was very painful. I thought that my intestines would come out. I did not know what was happening.

Rachel: When she arrived home, she couldn't even walk. I took her to the police, and they filled out a Form 8 [a police report for GBV cases] and took her to the hospital. After two weeks, they sent us to the [IRC] GBV Clinic. {The nurse} tested her. They gave us soda and biscuits. They gave us underwear, slippers, seeds, a hoe and a rake. The man was arrested and is in prison now. The husband's brother is also in jail... They will both be set free. The uncle will pay back the cows, and the husband will pay a fine of one to two cows for mistreating the girl, but the uncle will receive the cows.

I want the girl to go back to school, but I have no power to protect her. Even if they are divorced, if the uncle does not give back the cows (15 cows), then the husband can come and look for her. If he does give back the cows, then the uncle can come back and take her again.

For those girls who are in school - if they should finish school, then their lives will be ok, but if they are unlucky, they will be mistreated. For the women of South Sudan, nothing will change unless our government tells people not to fight. Our government will never change. I have nothing to add about our women. We (women) are vulnerable. We have no one to support us.



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# Linking Data to Improved Prevention and Response Programming

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Once there is a basic understanding of the principles of quantitative and qualitative data and the data that has been collected in your study, action planning based on the evidence generated in a study can begin. To start the planning process, we need to first articulate the change we want to see as a result of the research. We can first do this by reviewing the initial objectives that were set out at the outset of the research. For example for our research in South Sudan we wanted to know:

- What are the forms, trends and prevalence of different forms of violence against women and girls (VAWG) in South Sudan?
- What are the direct and indirect drivers of VAWG, and how are they influenced by the different conflicts that have taken place in South Sudan?

These objectives informed what type of data we analysed and how we structured the findings of our research. It is important to refer back to the research objectives before developing an action plan to remind ourselves what our research aims were and to help structure the overall action planning process. However, research objectives may differ from what practitioners and policymakers are able to utilize the data for – so a reflection on these objectives should just be the starting point in the action planning process.

Next, it is important to visualize the ultimate change we would like to see in our communities that your research is hoping to inform. To accomplish this we can conduct a visioning exercise (see Activity VI in Annex 3) where participants reflect on the current situation (using the evidence generated by the study) and the ultimate situation we would like to see in the future. Further brainstorming can generate suggestions of mechanisms that can help facilitate this change. See Figure 7 for an example of a visual representation of a 'Here to There' visioning exercise completed in South Sudan – with the 'here' representing the current situation and 'there' the participants vision for the future.

**Figure 7: Example of Visioning Exercise from South Sudan**



**Using Evidence to Change Policies and Creating Better Programmes**

Once an overall vision for change has been articulated, more specific action planning can begin by identifying the current gaps in policies and programmes. Using a series of guiding questions (see Activity VII – VAWG Gap Analysis in Annex 3) and results of your study, workshop participants will work together to map out what currently exists and where the gaps are in current programming and policy. See Table 9 for an example of the results of this exercise from South Sudan.

**Table 9: Example of a Gap Analysis – Excerpt from the South Sudan Study**

Gaps	Recommendations
<b>Non-partner sexual violence</b>	
Health facilities don't have post-rape treatment kits Not enough legal support of trained police special protection units (SPUs) Corruption: perpetrators can pay to end the case, powerful men are not prosecuted Delay in seeking services / lack of awareness of services Lack of women's centres and safe spaces	Ministry of Health should require donors to include CMR in primary healthcare Introduce more laws to protect from sexual violence Lobby for law enforcement Train SPUs on regular basis Increase advocacy on available services Raise awareness of human rights in the community Create more women and girl friendly safe spaces
<b>IPV against women and girls</b>	
Weak legal system and weak implementation Limited supplies at health facilities Limited staff capacity in provision of CMR services Few safe spaces / shelters Few police trained in GBV Few social workers trained in PSS / case management	Increase capacity building of first line responders on GBV basic concepts Fund legal services Implement the law Train law enforcement actors Provide self-defence classes for women and girls Increase economic opportunities for women Increase access to emergency contraception

Next, priority issues or areas of work that are emerging from the data need to be identified. Working together in groups, workshop participants can identify priority areas where focus is needed to improve programming and for advocacy (see Activity VIII – Using Evidence for Change in Annex 3) in their specific contexts. See Table 10 for an example of the results of this process from South Sudan.

**Table 10: Excerpt of priority areas for interventions**

<b>Non-partner sexual violence</b>	<b>IPV</b>
Raise awareness of women's rights, including through panel discussions, radio talk shows and poster.	Advocate to the government for capacity building of legal aid structures, judges, police, prosecutors on implementation of existing laws for GBV survivors.
Lobby the Minister of the Interior to include SPU training in the police officer curriculum.	Roll-out trainings to sub-national levels and follow up on the implementation of action plans from the trainings.
Lobby the Presidency committee on GBV to promote SPU curriculum.	Advocate to the government for the retention of SPUs within police units.
Lobby UNPOL and UNDP to continuously train police officers.	Advocate to the government for increased enrolment of female service providers, police, paralegals, judges, CMR staff, doctors and midwives.
Advocate for sexual violence survivors to access healthcare first, before taking form 8, by disseminating the order of the Minister of the Interior and educating rural / remote police stations.	Advocate to CSOs to provide pro-bono legal services.
Engage Ministry of Health and pool fund donors to include CMR as mandatory in all primary health care centres.	Advocate to CSOs to provide capacity building to community chiefs, especially on customary law.
	Advocate to donors on providing more funding longer term GBV prevention and response activities.
	Advocate to donors to increase funding for GBV risk mitigation and livelihoods initiatives.

## Action Planning

Finally, we will summarize the activities identified in the past two activities into an action plan and identify targets, who needs to be involved to take this action forward, and how progress will be monitored. Action plans cannot be created for all issues that emerge from the research process. Workshop participants should work together to prioritize (for example using participatory ranking) top priorities that they feel have emerged from the research.

In the above example (Table 10) the topics highlighted in yellow were prioritized by stakeholders in South Sudan. For each of the prioritized topics further brainstorming, workshop participants identified the key stakeholders who would need to be involved in changes in this area, who needs to take action and what existing resources are available to support changes needs to occur (see Activity IX – Action Planning in Annex 3). Table 11 shows an excerpt of this planning process from South Sudan.

**Table 11: Preliminary identification of priority areas for action**

Key groups to influence	Who needs to take action	Resources available	How to track progress
<b>1. Advocate for capacity building of legal aid structures, judges, police, prosecutors on implementation of existing laws on GBV survivors</b>			
<ul style="list-style-type: none"> <li>• Initiative for Peace Communication Association (IPCA)</li> <li>• Civil Society Human Rights Organisation (CSHRO)</li> </ul>			
Ministry of Justice, Ministry of Interior, civil society organisations, UN, media, human rights groups.	All stakeholders	Donors, HR, clusters and existing laws	Monitoring and evaluation, reporting
Ministry of Education, Ministry of Health, private sector	GBV organisations, UNFPA, schools, education cluster, Ministry of Education	Evidence (reports), human resources, local organisations working on SNAP.	Meetings, documentation, policy drafts, assessment reports.
<b>2. Advocate and raise awareness on women’s rights to prevent non-partner sexual violence</b>			
<ul style="list-style-type: none"> <li>• The Organisation for Children’s Harmony (TOCH)</li> <li>• IsraAid South Sudan</li> <li>• CARE South Sudan</li> <li>• Women and vision (WAV)</li> </ul>			
Ministry of Justice, donors	Ministry of Gender, UN agencies, INGOs, CSOs, women’s rights organisations, GBV sub-cluster	National Action Plan on CEFM, National Action Plan on CEDAW, staff	Annual reports on implementation of NAPs (CEFM, CEDAW)

Once this overall action plan has been developed, each participant in the workshop should commit to taking on or participating in the efforts articulated and a centralized group, such as the GBV sub-cluster, should commit to monitoring the progress of the actions articulated in the plan. Together relevant stakeholders commit to taking actions and reporting on their progress periodically to transform the research findings into practical actions within their settings.

### Creating Participatory Programme Tools

Research results (both quantitative and qualitative data) can also be used to directly support programme activities. For example, stories, quotes and statistics can be used to create programme tools that help facilitate conversations about VAWG. By using data from the community itself, these tools reflect the local context and norms that exist and may be more meaningful to the community when discussing VAWG.

To create these tools, we recommend that a participatory process is undertaken directly with local women’s organisations, community groups and NGOs. A separate workshop (in addition to the action planning workshop described earlier in this manual) can be convened specifically with humanitarian actors and local women’s groups to develop these tools. Together, the research team representatives from these organisations and local artists can work together to identify the key messages that result from the research and co-design locally relevant, community tools. Depending on the context and potential audience different tools – from short written vignettes to radio plays or dramas to short visual stories or pictures – may be appropriate. See Annex 4 for a draft agenda for a participatory workshop to develop these tools.

## Box 10: Recommended Resources

The best practices and strategies laid out in the chapter draw from Raising Voices approach to community mobilization for change on VAWG.

For more on utilizing community-based approaches to preventing VAWG and designing effective behaviour change programming see their website: <http://raisingvoices.org/resources/>

In addition see more on their approach to developing effective communication materials for preventing VAWG and examples from their SASA! Programme here: <http://raisingvoices.org/activism/media-communications/sasacommats/>

## Developing Programme Tools<sup>13</sup>

In order to develop effective programme communication materials, we first need to identify and articulate the changes we want to see in the community. You may have much of this information from the action planning workshop (for example from the Visioning Exercise in Figure 7) however a good way to begin the conversation is to review the data from the study and discuss what changes the group would like to see based on this data. Remember that behaviour change is a process that does not happen overnight!<sup>14</sup>

When developing programme tools for behaviour change keep in mind what helps us to change our behaviour. This could include internal mechanisms (feeling of hope for the future, our personal reflections and goals, belief that there will be some benefit from change) as well as external supports (support from friends and family, beliefs about what others are doing and what is acceptable behaviour in the community). The tools we develop should aim to help participants contemplate and make changes in their own lives as well as how to engage with others within their own community who may want/need to change their behaviour.

## Steps to Developing Tools<sup>15</sup>

- Convene a workshop with key stakeholders (local women's groups, NGOs, local artists and the research team)
- Review the results of the research including the key statistics and example stories and quotes that highlight the main issues
- Discuss (in plenary or small groups depending on the size of the workshop) what issues resonate most with those working on VAWG issues. Remember that we want to draw on the themes from the research but don't want to use specific stories that might be identifiable. For example, we if the story is related to a girl being forced to marry we may use that as inspiration for a tool about why is better for girls to stay in school rather than be married at an early age.
- Decide on the best communication formats for the audience (e.g. comic, poster, information sheet, billboard, drama, radio play, etc.) based on the local context and budget availability
- Decide on the key messages you want to convene for each material. Remember that we want to focus on positive messages that maintain the dignity of the characters. It is important to avoid blaming or shaming the community in the tools – we are looking for issues that will spark conversations and help community members visualise a more positive future for their community!
- For visual material, work with an artist (who ideally is attending the workshop) to create outlines of the tools. For other kinds of materials (for example dramas or radio plays) consider working with local theatre or drama troupes to help develop effective delivery mechanisms.
- Discuss changes and refinements to the tools with key stakeholders and have the artists make prototypes.
- Test the materials with community members and make any final changes to the design or messaging.
- Finalize and produce the tools.

Once developed, the programme tools can be used as entry points into the conversation around locally relevant VAWG issues. These programme tools can be incorporated in existing prevention programming and should be owned by the local women's organisations, community groups and NGOs who are working to end VAWG within the communities.

<sup>13</sup> Special thanks to Akankwasa Ritah who facilitated this section of the Research to Action Workshop and Raising Voices for their guidance on developing effective communication materials for the prevention of VAWG.

<sup>14</sup> Here is are some short tools that introduce the trans theoretical model of behavior and the stages of change— See the following summary of behavior change developed by Purdue University in the USA: <https://extension.purdue.edu/extmedia/HHS/HHS-792-W.pdf> as well as this short video summarizing the stages of change <https://www.youtube.com/watch?v=IwxyE--Aju>

<sup>15</sup> See Raising Voices guidance How to develop communication materials for more guidance and key tips: [http://raisingvoices.org/wp-content/uploads/2013/03/downloads/Sasa/SASA\\_Comm\\_Mats/StartCommunicationMaterials/Start.CM.HowtoMakeCMs.pdf](http://raisingvoices.org/wp-content/uploads/2013/03/downloads/Sasa/SASA_Comm_Mats/StartCommunicationMaterials/Start.CM.HowtoMakeCMs.pdf)

### **Box 11: Using a participatory process to develop programme tools in South Sudan**

After the completion of our research in South Sudan, GWI, IRC and CARE, with the support of Raising Voices, facilitated a three-day workshop with local women's organisations and NGOs in South Sudan to develop locally relevant participatory programme tools. Members of a local artist's collective, Ana Taban, who had experience working with local NGOs to develop programme tools also attended the workshop in order to actively participate in the design process. This allowed workshop participants to immediately visualize what their draft tools may look like and suggest improvements and refinements in real time.

Through the workshop process, the stakeholders decided that the programme tools in the South Sudan context should be primarily visual because of low literacy in the population and identified the need to translate the text into multiple languages. Through a participatory process the stakeholders in this process decided to create the Safe Communities Action Kit which would include 10 visuals portraying examples of unsafe communities and 10 pictures that conversely showed safe communities. For example one picture would show an unsafe example (A man yelling at a woman with a child crying) while a second would show the safe example (A man and a woman helping one another).

These visuals would be accompanied by a facilitation guide to help local activists use these materials in the community to facilitate discussions about how we move from unsafe to safe communities. In addition, a 1 page pamphlet of key quantitative findings from the study was developed to help local organisations communicate key research findings to local leaders and government. The Action Kit will be co-branded with all the logos of the participants of the workshop and the materials will be co-owned and utilized by all participants ensuring key findings from the research are used to help improve the lives of women and girls throughout the country.

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# Annexes

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# Annex 1: Sample Workshop Agenda

## Day 1

<b>Session I</b>	<b>Introduction</b>	<b>Objective: To introduce the study and purpose of the workshop.</b>
	Participant introductions	
	Overview of the agenda	
	Establish ground rules	
<b>Session II</b>	<b>Understanding and Interpreting Key Quantitative Findings</b>	<b>Objective: To understand the key quantitative data generated by the study.</b>
	Presentation – Introduction to the Study and Understanding Quantitative Data	
	Activity I: Understanding the study population and calculating prevalence	
	Activity II: Interpreting a Cross Tabulation	
	Presentation – Key quantitative findings from your study	
	Activity III: Interpreting Quantitative Data	

## Day 2

<b>Session III</b>	<b>Understanding and Interpreting Key Qualitative Findings</b>	<b>Objective: To understand the key qualitative data generated by the study.</b>
	Presentation - Key Concepts for Presenting and Using Qualitative Data	
	Activity IV: Discussion on Qualitative Results	
<b>Session IV</b>	<b>Understanding Connections and Relationships in the Data</b>	<b>Objective: To understand the relationships in the data.</b>
	Activity V: Uses in the Ecological Framework to Map Out Risks and Consequences of GBV	

## Day 3

<b>Session V</b>	<b>Linking Data to Improved Prevention and Response Programming</b>	<b>Objective: To determine priorities for action (policy and programming) based on the evidence developed</b>
	Activity VI: Visioning Exercise	
	Activity VII: VAWG Gap Analysis	
<b>Session VI</b>	<b>Action Planning</b>	<b>Objective: To operationalize the plans developed in the previous sessions.</b>
	Activity VIII: Using Evidence for Change – Identifying Priority Issues	
	Activity IX: Action Planning	

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# Annex 2: Understanding VAWG in Conflict and Post-Conflict Settings: The Socio-Ecological Model

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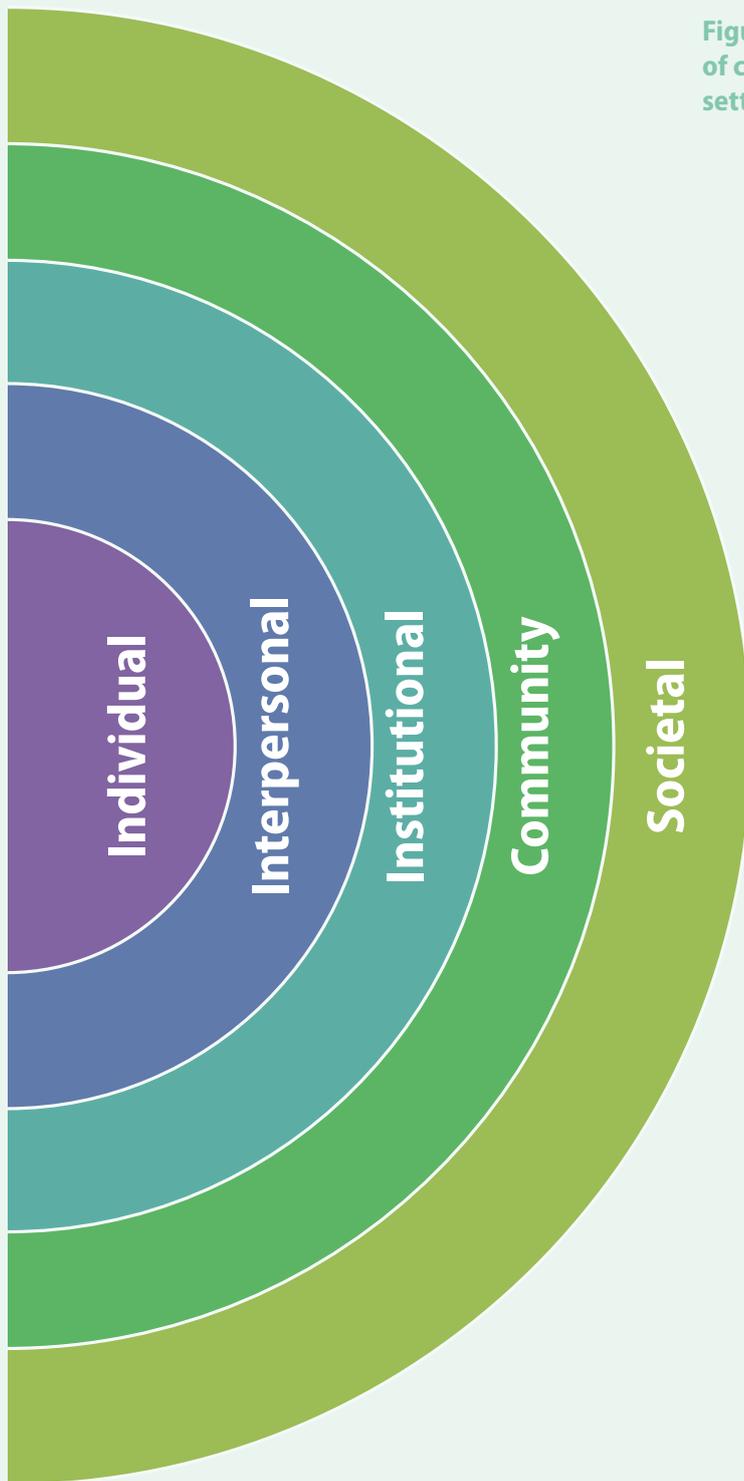


Figure 1: A theoretical model on the intersections of conflict and VAWG in conflict and post-conflict settings

### Individual (Women/Girls or Men/Boys)

- Age, religious identity and ethnicity
- LGBTI and disability status
- Education level
- Lack of employment or engagement in livelihoods
- Alcohol and drug abuse
- Displacement from home community
- Separation from family/support structures
- Experiences in armed groups as combatants or abductees
- Integration experience of former combatants/abductees
- Acceptance of VAWG
- Experiences of VAWG in childhood

### Institutional

- Armed actors using rape as a weapon of war
- Forced enlistment and use of girls as soldiers or in other roles associated with armed groups
- SEA by private and public sector entities
- Exclusion of female representation in security forces, armies, peace negotiations
- Lack of response services for survivors
- Suppressed independent civil society
- VAWG not addressed in peace agreements
- State-building processes exclude governance mechanisms for addressing gender inequality and VAWG

### Interpersonal

- Increased stresses on the household including increased poverty, displacement, etc
- Increased controlling behaviours
- Unequal decision making and division of labour
- Men's perception of their lack of ability to fulfil traditional masculine roles
- Choice in marriage/partner
- Re-integration of combatants into the household

### Community

- Ongoing intra- and inter-communal violence
- Explicit targeting of women and girls for rape and killing to reduce reproductive capacity or de-humanize opposition groups
- Acceptance of discriminatory gender roles
- Lack of economic opportunities due to instability
- Normalization of violence and continued acts of rape, etc.
- Stigma against re-integration of former combatants or abductees
- Increase in female headed households

### Societal

- Unequal gender dynamics
- Patriarchal norms and practices that discriminate against women
- Culture of impunity
- Lack of rule of law
- Poverty
- Emphasis on hyper masculinities as facets of warfare

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# Annex 3: Workshop Activities

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## Activity I: Understanding the study population and calculating prevalence

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**Goal: Participants will learn to identify what the study population is (denominator) and calculate basic prevalence.**

### Step 1: Set Up

Separate into small groups of four or five.

### Step 2: Complete activity in groups

To determine how common violence against women and girls is, our study considered two types of questions:

- Have women and girls experienced violence at any time in their lifetime? This measures overall lifetime prevalence.
- Have women and girls experienced violence at any time in the past 12 months? This measures past year prevalence of violence.

We also consider violence by type. For example:

- Have women and girls experienced physical or sexual IPV?
- Have women and girls experienced non-partner sexual assault?
- Have women and girls experienced early marriage?
- Have women and girls experienced forced marriage?

Reference the prevalence formula given on page # if needed.

**Question 1:** If we wanted to know the overall lifetime prevalence of forced marriage in a community (% of women and girls who reported that they were in a forced marriage), we would need to know:

# of women and girls who said they had no choice in who/when they married (the numerator)

# of women and girls who HAVE EVER BEEN MARRIED (the denominator)

Why would the denominator be only those who have ever been married?

**Question 2:** For the following three indicators what would the numerator and what would the denominator be to calculate each percentage and why?

**Indicator 1: % of ever-partnered women and girls (aged 15-64) who experienced intimate partner violence in their lifetime**

Numerator:

Denominator:

Why?

**Indicator 2: % of ever-partnered women and girls (aged 15-64) who experienced intimate partner violence in the last 12 months**

Numerator:

Denominator:

Why?

**Step 3: Present Back and Discussion**

**Indicator 3: % of women and girls (aged 15-64) who experienced non-partner sexual assault in their lifetimes**

Numerator:

Denominator:

Why?

## Activity II: Interpreting a Cross Tabulation

### Goal: Participants will learn to read and interpret a cross tabulation

- Review the cross tabulation below from a study in South Sudan. Discuss with those around you about the information you can gather from the table.

		Ever raped			
			Yes	No	Total
<b>Displacement Status</b>	Not displaced- Host Community	Count	67	336	404
		% within displacement status	16.6%	83.4%	100.0%
	Displaced- Living within Host Community	Count	171	505	676
		% within displacement status	25.3%	74.7%	100.0%
<b>Total</b>	Count	238	841	1079	
	% within displacement status	22.1%	77.9%	100.0%	

- What would you hypothesize from this data set about the connection between displacement status and ever experiencing rape?
- Now look at the data stratified by age below. How might this change your conclusions?

Age		Ever Raped		Total		#	79	321	400
		Yes	No						
<b>15-19</b>	#	70	200	270	31-40	#	79	321	400
	%	26%	74%	100%		%	20%	80%	100%
	Displaced	50	100	150	Displaced	100	200	300	
		33%	67%	100%		33%	67%	100%	
	Not Displaced	20	100	120	Not Displaced	24	221	245	
		17%	83%	100%		10%	90%	100%	
<b>20-30</b>	#	64	245	309	<b>Over 40</b>	#	25	75	100
	%	21%	79%	100%		%	25%	75%	100%
	Displaced	50	200	250	Displaced	14	55	69	
		20%	80%	100%		20%	80%	100%	
	Not Displaced	14	45	59	Not Displaced	11	20	31	
		24%	76%	100%		35%	65%	100%	
						238	841		

- What are the next steps for the research team based on this data?

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## Activity III: Interpreting Quantitative Data

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**Goal: Participants will interpret the “big picture” information from quantitative data and connect the data to priority issues and action.**

**Use the data from your study to answer the following discussion questions:**

- Is violence against women a problem in your country?
- Is any type of violence more common than others?
- What type of violence are girls more likely to experience? What about boys?
- What are some common gender norms and beliefs about men and women in your community?
- What do you find the most noteworthy or surprising about these findings?
- What kinds of services are available for survivors in your community? Do you think these services are utilized by as many survivors as possible? Provide some explanation.
- How do these findings support or differ from what you see in your own work?
- What do the findings say about common perpetrators or locations of non-partner sexual violence? Do these suggest certain situations when women and girls might be at greater risks?

**Prioritize key areas that need action:**

Based on your discussion of the questions above, prioritize 3-5 broad issues or areas of work that need action based on the data. These priority areas will form the foundation of your national action planning.

**Key areas identified from data findings**

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## Activity IV: Discussion on Qualitative Results

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**Goal: Participants will discuss the qualitative results from the study.**

### Step 1: Set Up

Split into groups and pass out a copy of summarized quotes/stories from your study to each group.

### Step 2: Small Group Discussion

Participants will follow the instructions on the worksheet and answer all of the questions to the best of their ability.

- How did these findings differ from those of the quantitative data? How do they complement the quantitative data?
- What do you find most noteworthy or surprising about the findings?
- How do these findings support or differ from what you see in your own work?
- How is this data easier/harder to understand/communicate compared to the quantitative data? What groups might better understand this type of data? What groups might better understand quantitative data?

### Step 3: Presentation Back and Discussion

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## Activity V: Using the Ecological Framework to Map Out Risks and Consequences of GBV

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VAWG is caused by unequal power dynamics and gender norms. In conflict and humanitarian settings, it may be exacerbated by circumstances such as poverty, exposure to armed conflict, increased alcohol and drug use, breakdown of familial support structures, etc. To better understand these connections, we will now take a look at the data from this study and map out the risk factors, and consequences, of violence based on the data (both qualitative and quantitative). This information will help us to create programmes that specifically target the drivers of violence from your specific context.

**Goal: Participants will develop a causal web map showing the risk and consequences related to one type of violence common in the study area**

### Step 1: Set Up

Split into groups and assign each group a type of violence (one group IPV, one group non-partner sexual violence, one group patriarchal practices – e.g. early/forced marriage)

### Step 2: Small Group Discussion

Have each group create a causal web maps (see below for an example) for their assigned type of violence –considering both causes and consequences of violence based on the qualitative and quantitative data collected in the study. Then discuss the following question:

What do the results from the report tell you about the risks women and girls face in your community? How do you think these might be different in different contexts within the country? What about for adolescents? What about for older women?

Step 3: Presentation Back and Discussion



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## Activity VI: Visioning Exercise

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**Goal: Participants will compare the current situation for women and girls and their vision for them in the future and begin to think about the “how.”**

### Step 1: Set Up

Pass out sticky-notes or other way for people to write about their ideas. On the board, use three pieces of poster paper that say Here, To, and There on them, in that order.

### Step 2: Brainstorming

Participants write down their ideas about the current situation (Here) of VAWG in their community, what they want the future to look like for women and girls (There), and strategies to make those goals a reality (To).

### Step 3: Presentation and Discussion about Identifying Stakeholders

The affected population should be engaged – particularly women and girls. They should be involved in study design, support implementation, and be empowered to understand and use the results. Other participatory approaches include engaging with local stakeholders. In doing so, stakeholders will be better informed about the work of the programs, better able to understand the benefits, and more prepared to identify possible issues. In addition, locally based researchers should be included because they know the context and how to navigate political and communal barriers that may impede data collection.

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## Activity VII: VAWG Gap Analysis

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**Goal: Participants will identify gaps in the VAWG response system and propose recommendations to filling those gaps**

### Step 1: Set up

Separate into small groups

### Step 2: Small Group Discussion

Groups will identify gaps in the VAWG response system. Use the following guiding questions:

- What services exist for that type of VAWG?
- What services do not exist?
- What does the data tell you about gaps in the response system?
- What are the solutions to these gaps?

Gaps	Recommendations
Non-partner sexual violence	
Intimate Partner Violence	
Intimate Partner Violence against adolescent girls	
Early/Forced Marriage	

### Step 3: Presentation Back and Discussion

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## Activity VIII: Using Evidence for Change – Identifying Priority Issues

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**Goal: Participants will discuss the importance of targeted messaging at different audiences. Participants will first focus on messaging targeted at the community, and then at messaging targeted at advocacy targets including policy makers, doors, and civil society.**

### Step 1: Set Up

Separate into small groups of four or five (one for IPV, one for non-partners violence, one for traditional practices and one for services/barriers).

### Step 2: Small Group Discussion

Back in small groups, discuss key messages for advocacy targets: policy makers, donors, and civil society. What are the key pieces of data your message will include and why?

Discussion Questions:

What are 3 to 5 priority issues or areas of work that need to be addressed to reduce violence or improve services for women and girls in your community?

### Step 3: Presentation Back and Discussion

Each small group will present back on their initial priority areas and explain why they think these issues are the most important for the community to focus on. Work to build consensus on the top priority issues. Use participatory ranking with sticky notes if needed.

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## Activity IX: Action Planning

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**Goal: Participants develop a practical action plan on how and where they can use this data for action. They will identify specific, practical advocacy tasks.**

### Step 1: Set Up

Separate into small groups of four or five. Have each group discuss one of the priority areas developed in Activity IX.

### Step 2: Small Group Discussion

Discussion Questions:

For the priority area assigned to your group – what are 1-3 actions that the GBV community in your country could take to improve the situation (advocacy, improved programs). Be sure the actions are specific and realistic.

Detail who needs to be involved in the efforts, how it links with (or could be incorporated into) ongoing efforts, what resources are available, how progress would be tracked.

### Step 3: Presentation Back and Discussion

# Annex 4: Participatory Programme Tool Resources

## Workshop Agenda

### Workshop Agenda – Day 1

	Objective:	Details
<b>Session 1</b>	Participatory Presentation on the Importance of Messaging	<ul style="list-style-type: none"> <li>- The importance of messaging and how to think creatively about changing people's minds</li> <li>- The importance of research and how it can help with good messages that are relevant</li> <li>- Good practice examples of messaging</li> </ul>
	Artist presentation on art work and drawings	- Artist presents on the art that they produce and show some of the art
<b>Session 2</b>	Presentation of Research Results	<ul style="list-style-type: none"> <li>- Presentation of research and key findings</li> <li>Data Collection Methods</li> <li>Ethical and Safety Guidelines in Data Collection</li> <li>Results of Study</li> </ul>
	Group Work: Brainstorming Key Messages from the Research	<ul style="list-style-type: none"> <li>- Examples of the research results will be distributed</li> <li>- Participants will read stories, look over data and make a list of the key important messages for each theme and engage in discussion about how best to relay these messages to communities from their own experiences</li> <li>- Important to ensure that not only negative messages are documented but also positive messages</li> </ul> <p>Questions to answer:</p> <p>What are the messages from the study results that you think are the most useful/important for your region/community?</p> <p>Read the story and discuss if the story is important/relevant in your community? Would your community be open to talking about this? Is this a good way to get a conversation going?</p> <p>Are there any subjects around GBV that are important but are missing from the story? What is another important message or issue around GBV that is missing?</p>
	Presentation of Key Themes and Messages	- Each Group Presents on the Key themes and messages they developed

## Workshop Agenda – Day 2

	Objective:	Details
<b>Session 3</b>	Presentation of Materials and Tools – Lessons from Raising Voices	<ul style="list-style-type: none"> <li>- Present on the different types of tools, materials and methods that work for different groups of people for different purposes</li> <li>What is good for local leaders?</li> <li>What is good for women? Men? Couples?</li> <li>What is good for youth?</li> <li>What is good for religious leaders?</li> </ul>
	Group Work: Identification of Appropriate Tools	<ul style="list-style-type: none"> <li>- Participant's break out into groups and discuss the types of tools that would be best for the messages identified by the participants in the earlier session</li> <li>- All groups come together and present their top three tools</li> <li>- Participant's as a group decide on the tools that should be produced</li> </ul>

## Workshop Agenda - Day 3

	Subject	Details
<b>Session 4</b>	Summary of Key Materials	<ul style="list-style-type: none"> <li>- Presentation on the key materials that will be created based off conversations from the last two days</li> </ul>
	Group work: Developing Tools to Disseminate Key Messages	<ul style="list-style-type: none"> <li>- Based off the top tools identified in the last session, participants will work with artists to develop an outline of the materials for relaying the key messages (ie. Sketches, drawings, plays, scripts, cartoon strips, etc.) and create the materials</li> <li>- Each group presents on the outline of the tools and showcase any material they have created</li> </ul>
<b>Session 5</b>	Discussion on Next Steps and Development of Materials	<ul style="list-style-type: none"> <li>- Discussion on next steps, timeline for developing materials, production, and roll out including distribution.</li> <li>- What would the roll out of the tools look like? On a stickie note, each participants write what the successful roll out of these tools would look like and put the stickies up on a flip chart. A few participant's share their thoughts.</li> <li>- Closing comments.</li> </ul>

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## Example Visual from Participatory Programme Tool Session

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