



Learning Brief

Asia Pacific Snapshot: Preventing Gender-Based Violence

OVERVIEW Gender-based violence is pervasive throughout the Asia Pacific region, with the **South and East Asia regions showing the highest rates of gender-based violence in the world**¹. A violation of women and girls' human rights, gender-based violence is among the leading causes of death and disability of women of all ages². Women who have experienced violence can suffer further negative impacts on their participation in education, employment, their community and public life, which serves to **increase poverty and inequality**. There are also consequences for communities and wider society; gender-based violence can have tremendous **economic, social, legal and health costs and consequences**³.

CARE's strategy to enable women and girls to exercise their right to a life free from violence focuses on two key areas: domestic violence and child, early & forced marriage. These share common underlying causes which deny women a life free from violence: gender inequality, harmful social & cultural norms, and unequal power relationships. CARE focuses on primary prevention, linked to interventions to strengthen response services and advocacy to strengthen protections.

CARE continues to address other aspects of gender-based violence—preventing **sexual harassment and violence** in the workplace—through our regional **Made by Women program**⁴ targeting garment workers, and our work on **Gender-Based Violence in Emergencies**.

Primary prevention approaches

Across Asia and the Pacific, CARE has learnt the importance of systematising tools and approaches into a comprehensive and coordinated strategy. Effective prevention requires approaches tailored to specific groups and contexts, and a constant process of engagement and reflection. Our recent practice experience and reflection has highlighted the importance of **working across multiple levels** as a key pillar of prevention approaches, and has also generated learning from our experience with **social norms change programming**.

Gender inequality is present at all levels of society, and there are factors that increase or decrease the risk of experiencing violence across different dimensions. CARE's most effective prevention programming in the region has targeted fundamental shifts on causes across multiple interlinking and mutually reinforcing levels, supported by investment in analysis and evidence building to support program decisions. This is aligned with the **sociological model**⁵, the main evidence-based framework underpinning prevention work, as well as good practice approaches on social norms programming.



¹ WHO, 2013 *Global and Regional Estimates of Violence Against Women* & UNFPA, 2016 kNowVAWdata project.

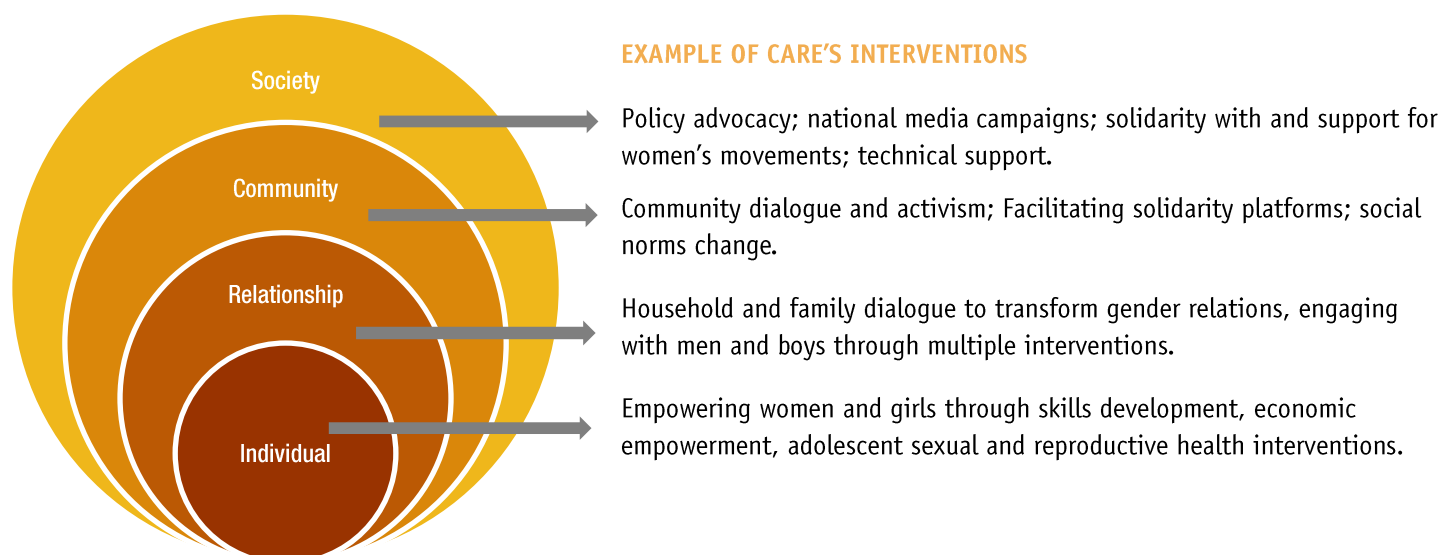
² WHO, 2012 *Understanding and addressing violence against women*.

³ World Bank, 2014 *Violence against women and girls*.

⁴ <https://www.care.org/madebywomen>

⁵ For example, UN Women, 2015, *A framework to underpin action to prevent violence against women*

CARE's primary prevention interventions span all levels of the socioecological model.



Asia Pacific Practice Snapshot

WORKING AT MULTIPLE LEVELS

Across Asia and the Pacific, CARE's programming includes a strong focus on addressing causes at the individual, household and community levels in a comprehensive and structured way.

For example, in Vanuatu, CARE works in communities to prevent violence at the individual level through foundational leadership training for women. This is combined with interventions at household level, for example with family financial management skills development, which links with work at community level. Community interventions include structured reflection sessions with male leaders and a respectful relationship skills building program targeting adolescent boys and girls delivered together with police, the Vanuatu Women's Centre and government health service providers.

Similarly, CARE International in Myanmar's prevention and response programs are seeing reductions in violence against women through building capacities of local partners to deliver interventions. These are building the skills of women, strengthening women's individual and collective voice, promoting change within households and amongst men, community leaders and service providers, and promoting a multisectoral, coordinated approach aimed working at different level of society, and with multiple actors including government departments.

In Pakistan, CARE provides training for individuals, facilitates the formation and actions of groups at household, village and district level, and engages with government and civil society actors focusing on building responsive accountability mechanisms and actions to address gender-based violence.

In Viet Nam, CARE is working with groups of women and men change agents to promote change, with interventions combining structured reflection to promote individual transformation, supporting change agent-led reflection, dialogue and action processes at household and community levels and amongst leaders and service providers.

In Afghanistan, CARE is seeing reductions in child marriage through programs which combine skills development of women and men, promoting the voice of communities to influence service delivery priorities, and leveraging the influence of religious leaders engaged in community education committees to promote awareness of child marriage as a barrier to girls' education.

Working across multiple levels: Bangladesh

CARE International in Bangladesh's *SHOUHARDO* program has been able to demonstrably reduce levels of violence against women through programming which combines work at:

- **Individual level** - facilitating village level women and girls solidarity platforms.
- **Household level** - couples dialogue; sensitisation of family members.
- **Community level** - Engaging with men and boys through multiple strategies, influencing local authorities and religious leaders, and promoting implementation of national protection frameworks at local levels.
- **Society level** - active engagement in national level policy dialogue.



Girls in Nepal are seeing changes in their communities as a result of CARE's work to reduce child marriage.

Targeting social norms change is critical in shifting causes related to deeply-rooted gendered social norms.



In Vanuatu, women like Rothina, who was coordinator of Vanuatu's Gender and Protection Cluster, work closely with CARE to promote greater understanding of the needs of women affected by disasters.

Multiple interventions are needed to reshape social norms, starting with research to identify the norms influencing violence against women and girls.

Across the region, programming also links interventions at **individual, household and community** level with strategies to influence deeper change at the **society level** – through strategies such as **social norms change** programming, advocacy to influence policy change, technical assistance support to promote implementation of enabling policies, promoting enabling protections such as legal frameworks and accountability mechanisms with the policy and judiciary, and media campaigns.

For example in Bangladesh, CARE has developed an innovative top-down/bottom-up approach with communities to determine social, economic costs of violence against women to individuals, families, communities, and states; and linked this with our work at national level to determine and promote understanding of loss in terms of GDP as a result of Intimate Partner Violence.

In Viet Nam, CARE is elevating the voice of women survivors to influence dialogue at national level, while also working with journalists to promote enabling messages around reducing violence against women to address victim blaming.

In Sri Lanka, CARE Affiliate Chrysalis is an active member of the National Forum Against GBV and the MenEngage Alliance Sri Lanka, influencing implementation of the National Action Plan on SGBV, while in Vanuatu CARE is providing technical assistance to develop capacities of national agencies for gender transformative programming.

In Nepal, CARE has actively contributed to the National Ending Child Marriage Strategy and is engaged with national, regional and global networks such as the MenEngage Alliance and Girls not Brides to promote change.

SOCIAL NORMS CHANGE

CARE's prevention programming at society level includes targeting social norms change, as critical in shifting causes related to deeply-rooted gendered social norms. Our approaches use multiple interventions to reshape social norms, combining to challenge norms, break taboos, imagine different futures and inspire reflection and action. Our approach starts with social research identifying the norms influencing violence against women and girls, the connections between different norms, and which groups in society are influenced by these norms.

For example in Nepal, CARE found that child marriage is influenced by norms around gendered economic investments, religious beliefs and menstruation. This informed the design of interventions **aiming to change social expectations**, including facilitating 'Reflect' circles of different groups influenced by the norms – girls, boys, mothers, etc, with strategies targeting different outcomes for each group. This is complemented by intergenerational dialogue and a wide variety of community activities that challenge norms, such as football for girls and a village level girls' platform, tea shop conversations, and advocacy and campaigns at community and national levels. Other tactics are used to **publicise the change**, such as using posters and outreach by community champions; and to **institutionalise the change**, for example working with local authorities who promote a child marriage-free village.

Similar processes generate different tactics and target groups in addressing norms influencing intimate partner violence in Nepal, and more broadly in the region. For example, research on men's perpetration of violence conducted by Chrysalis in Sri Lanka formed the basis of community-wide social norms change programming and has shifted the national conversation about gender-based violence.

MEASURING SOCIAL NORMS CHANGE: SNAP

Monitoring and evaluation of prevention programming often relies on proxy measures such as individual attitude change. CARE has developed an innovative monitoring tool which goes beyond measuring individual attitudes to look at social norms in detail. CARE's Social Norms Analysis Plot (SNAP) Framework allows programs to measure social norms relating to gender and acceptability of violence, and to track changes in norms over time.

SNAP identifies key aspects of social norms, including the existence of sanctions for breaking the social norm, community members' sensitivity to the sanctions, and whether there are exceptions to the norm—times when behaving outside the norm would be acceptable. Open questions and story-based (vignette) tools are used during Focus Group Discussions, to assess the strength of relevant norms and to track changes over time.

SNAP is currently being used to monitor social norms change programming on reducing intimate partner violence and child marriage in Nepal and Bangladesh.

CARE recognises the importance of nurturing the emerging expertise on prevention in the region, and ensuring that CARE teams and partners have the capacity to work on comprehensive prevention programming, including social norms change.

Key reflections

CARE's prevention experience in the region has highlighted the importance of:

- Being **intentional** about targeting multiple levels in project and program designs.
- Ensuring programming is underpinned by a strong **investment in evidence building and monitoring**, to ensure this intent is translated into interventions designed to specifically address causes at different levels, as these are expressed in different contexts.
- Formative **research into social norms and practices** in a given context allows for program design that is relevant and targeted.
- Investing in processes to **promote staff and partner personal transformation** aligned with transformations they are facilitating with communities.
- **Managing expectations** of a range of stakeholders around the complexity and intensity of work needed to move beyond targeting awareness raising or attitude changes on gender-based violence, to shifting social norms.
- Continuing to seek **pathways to scale** prevention work, beyond immediate target communities.



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