

POLICY LESSONS ON REDUCING GENDER-BASED VIOLENCE

GENDER INNOVATION LAB FEDERATION EVIDENCE SERIES

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GENDER INNOVATION LAB FEDERATION

The Gender Innovation Lab (GIL) Federation is a World Bank community of practice coordinated by the Gender Group that brings together the Bank's five regional GILs: Africa (AFR), East Asia and Pacific (EAP), Latin America and the Caribbean (LAC), Middle East and North Africa (MNA), and South Asia (SAR). Together, they are conducting impact evaluations of development interventions to generate evidence and lessons on how to close gender gaps in human capital, earnings, productivity, assets, voice and agency. With over 188 impact evaluations in 66 countries completed to date, the GIL Federation is building the evidence base for governments, development organizations, and the private sector to increase uptake of effective policies that address the underlying causes of gender inequality.

Gender-based violence (GBV) affects more than one in three women over the course of their lifetimes, regardless of social or economic boundaries.¹ Violence against women and girls takes a significant toll on survivors and their families and exacts heavy social and economic costs. In some countries, violence against women is estimated to cost up to 3.7 percent of GDP—more than double of what most governments spend on education.² Lockdowns and reduced mobility during the COVID-19 pandemic led to sharp increases in violence against women and girls. The GIL Federation is generating rigorous evidence across the world to understand what works, and what does not, in reducing GBV. This note presents evidence on four key findings based on impact evaluations from three regions.

FINDING 1. WOMEN'S ECONOMIC EMPOWERMENT CAN REDUCE GBV

Randomized controlled trials (RCTs) by the Africa and LAC GILs evaluating adolescent multifaceted empowerment programs indicate that these interventions can reduce young women's experience of violence. In Uganda, the Africa GIL conducted an RCT to evaluate an empowerment program that offered girls in selected communities vocational training as well as information on sexual and reproductive health. The study finds that, four years later, girls in program communities were less likely to report having experienced forced sex.³

Another RCT by the Africa GIL in Tanzania evaluated a program that offered a goal-setting activity to girls who had previously participated in safe space clubs modeled on the Uganda program, where they received mentorship and life skills training. The research finds the intervention led to reductions in young women's reports of intimate partner violence (IPV),⁴ as did a related program that organized a soccer club for the male partners of the girls. It too offered education on sexual and reproductive health.

These encouraging findings are echoed in a study conducted during the COVID-19 pandemic in Bolivia. An RCT of a program that combined training in soft skills and technical skills with sex education, mentoring, and job-finding assistance finds that the program reduced the violence experienced by girls, even during the first six months of pandemic-related lockdowns.⁵ Additional ongoing evaluations by the Africa GIL in the context of the Sahel Women's Empowerment and Demographics Project ([SWEDD](#)) will provide more evidence on the type and composition of economic empowerment programs that show most promise for reducing GBV among adolescents.

The finding that women's economic empowerment can reduce GBV is also highlighted in quasi-experimental work by the LAC GIL and survey data analyzed by the EAP GIL. A study by the LAC GIL in Brazil used a difference-in-differences strategy to estimate how narrowing the gender wage gap impacts female homicides, hospitalizations, and reports of violence.⁶

The study finds that a narrowing of the gender wage gap among poor populations and younger women is associated with a reduction in homicides.

The EAP GIL conducted a phone survey during the COVID-19 pandemic, which captured information on exposure to GBV and the factors potentially associated with it.⁷ The study finds that the COVID-19 pandemic significantly exacerbated women's perceived risk and experience of violence. Correlational analysis using machine learning and stepwise linear regression suggests that two key correlates of GBV are food insecurity and women's access to jobs, with food insecurity increasing GBV and access to jobs mitigating the increase during the pandemic in Indonesia.

FINDING 2. SOCIAL PROTECTION CAN REDUCE ECONOMIC STRESS FOR WOMEN, BUT PROGRAM DESIGN IS KEY TO ACHIEVING REDUCTIONS IN GBV

Recent global evidence suggests that, on average, cash transfer programs to households experiencing poverty are likely to reduce rates of IPV, primarily by reducing economic stress.⁸ However, program design matters. The link between the provision of social safety nets and a reduction in IPV is not automatic, and in some contexts, there may be risks of increased household conflict and backlash against some women recipients. This needs to be closely monitored. The GIL Federation has contributed to this literature with studies in East Asia and Africa.

Public work programs provide a source of income to women that can reduce economic stress and, potentially, GBV. A study by the EAP GIL in the Lao People's Democratic Republic analyzed the impact of a randomly allocated public work program.⁹ The program was targeted at rural women who received wages for 18 months. The research finds that the program increased women's income, but it did not affect their self-reported experience of GBV. The study argues that the lack of effects on IPV may be linked to the need of complementary interventions, such as behavioral change components targeted at both men and women.

The Africa GIL conducted an RCT to evaluate an anti-poverty program in northern Nigeria.¹⁰ The study compared impacts across control communities and communities assigned to three treatment arms: a livelihoods program that provided benefits to both men and women in the community, a cash transfer to women, and the combination of the two. Twelve months

after the end of the program, there was no IPV impact for women in households that received only the community livelihoods program. Cash transfers to woman alone increased sexual IPV by 6 percentage points, but cash transfers to women in villages receiving the community livelihoods program reduced sexual IPV by 13 percentage points. These results suggest that in communities where norms are conservative and the broader community is not benefitting, boosting women's bargaining power can lead to an IPV backlash that persists a year after the program ends. When whole communities benefit, transfers to women may be less threatening to men and can generate significant reductions in IPV.

A quasi-experimental study by the EAP GIL in the Philippines used regression discontinuity design to examine the effects of a conditional cash transfer program on GBV.¹¹ The study finds no statistically significant effect on IPV or GBV outside of home, but it estimates a decline in emotional non-partner domestic violence. The authors argue that the main channels by which the decrease in violence occurred were stress reduction due to higher income, increase in empowerment and bargaining power, and strengthened social networks. Similarly, a quasi-experimental evaluation by LAC GIL of Bolsa Familia conditional cash transfers program in Brazil finds no impact on female homicides.¹²

Overall, these studies show that social protection programs reduce economic stress for women, but this does not always translate into reductions in GBV. Complementary interventions may be needed to achieve the desired outcome, and close attention should be paid to possible backlash from men or other community members.

FINDING 3. ACCESS TO PROTECTIVE INFRASTRUCTURES CAN COMPLEMENT THE EFFECTS OF EMPOWERMENT PROGRAMS

A quasi-experimental study by the LAC GIL in Brazil suggests policies that directly focus on women's safety successfully reduce violence against women. The study used data from 2,074 municipalities and a difference-in-differences methodology.¹³ It finds that the establishment of police stations specifically designed to address crimes against women is associated with a 15 percent reduction in the female homicide rate for women between 15 to 49 years of age. The reductions in homicide rates were even higher for younger women. This finding indicates that the establishment of women's

police stations is a promising intervention, but additional causal evidence from other contexts should be gathered to provide external validity.

FINDING 4. DISCUSSION GROUPS THAT ENGAGE MEN CAN REDUCE INTIMATE PARTNER VIOLENCE BUT RESULTS DEPEND ON CONTEXT AND IMPLEMENTATION

Analysis of Demographic and Health Survey data suggests joint decision making can be important for reducing IPV. The Africa GIL analyzed these data from 12 Sub-Saharan countries and found that rates of IPV are lowest in couples where both members report joint decision making for major household purchases.¹⁴ These correlations suggest that fostering shared accountability and cooperation within couples may be important for reducing rates of IPV.

In the same vein, the Africa GIL conducted an RCT to assess a couple's discussion group program for new and expecting parents in Rwanda. Surveying nearly 1,200 couple across four districts, the study finds that the program led to substantial reductions in IPV, increases in reproductive health-seeking behaviors, increases in women's participation in household decision making, and increases in men's participation in housework.¹⁵ The program included 15 weekly sessions with curriculum content on concepts of gender and power, fatherhood, household decision making, violence against women, child development, and men's engagement in reproductive and maternal health. Twenty-one months after baseline, women in the intervention group reported less past-year IPV than the control group: 23 percentage points lower in physical IPV and 25 percentage points lower in sexual IPV.

In contrast, preliminary results from another RCT by the AFRICA GIL concerning a couples' discussion group program for members of village savings and loan associations (VSLAs) in Rwanda show increases in IPV. Compared to couples in control communities, the program led to substantially higher rates of IPV among participating couples and even higher rates among non-participating members of the same VSLAs.¹⁶ Ongoing discussions with the implementing partners have identified several possible reasons for the negative results, including issues with facilitator experience and training, facilitator supervision and support, overall program management, accelerated timelines to accommodate funding constraints, adequacy of community-level engagement, and program adaptations to facilitate the research design. This indicates that gender transformative couples' programs must be implemented carefully and monitored throughout implementation to avoid negative impacts.

The Africa GIL also evaluated the impact of men's only discussion groups in the North and South Kivu provinces of the Democratic Republic of Congo.¹⁷ The program included 16 weekly meetings and followed a standard curriculum focused on challenging unequal gender norms and reducing violence against women and girls. Villages were paired based on socio-demographic characteristics and, within each pair of villages, one site was randomized to either the treatment arm receiving the program or the control arm not receiving the program. A follow-up survey conducted 8-12 months after the program ended finds that the intervention led to improvements in intrahousehold relationships (increased quality of intimate relationships, increases in men's participation in housework, and more equal gender attitudes), but it did not impact rates of IPV.





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