PREVENTION ESSENTIALS

BRIEF 1: WHAT IS PREVENTION OF VIOLENCE AGAINST WOMEN?

Gender-Based Violence (GBV) refers to violence directed against someone because of their sex or because their gender identity or expression does not follow socio-cultural norms. Most GBV is perpetrated by men against women, girls and gender minorities.

Violence against women (VAW), a type of GBV, includes a range of abuses through the life cycle from sex selective abortion and forced child marriage to domestic violence and ‘honour’ killings. Abuse by an intimate partner — intimate partner violence (IPV) — is the most common type of VAW.

Preventing VAW can mean stopping violence before it starts, or reducing the frequency and severity of new episodes of abuse at a community or group level. This is different from response, which is about providing support and services to survivors of violence. Response services are critical, but we cannot reduce today’s high levels of violence by supporting one survivor at a time. To prevent violence against women and girls, we must address the underlying causes of the violence.

While VAW is rooted in gender inequalities, patriarchy and unequal power relations between men and women, there is no single cause of violence, nor is there a single pathway to perpetration. Therefore, preventing violence requires interventions to reduce the multiple risk factors and triggers of VAW. (See Brief 2.)

ABOUT THIS BRIEF
This brief introduces VAW prevention and looks at the differences between prevention and response programmes. With other briefs in the series, it is designed to support practitioners, activists and policy makers to develop prevention programmes and initiatives to prevent VAW using a feminist-inspired approach.
DEFINITION OF VAW

Violence against women is any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life.

A FEW COMMON TYPES OF VIOLENCE

CHILD SEXUAL ABUSE
About 120 million girls under the age of 20 experienced forced sexual contact at some point in their lives. An analysis of 24 countries showed that child sexual abuse ranged 8–31% for girls and 3–17% for boys.

FEMALE GENITAL MUTILATION/CUTTING
More than 200 million girls and women alive today have been cut in 31 countries where the practice is concentrated.

KILLINGS IN THE NAME OF HONOUR
A total of 1,957 honour killing events occurred in Pakistan from 2004 to 2007.

FORCED/EARLY MARRIAGE
Each year at least 12 million girls are married before they reach the age of 18. Levels of child marriage are highest in sub-Saharan Africa (35%) and South Asia (~ 30%).

SEXUAL VIOLENCE
Globally, 6% of women have been sexually assaulted by someone other than an intimate partner in their lifetime, although data is lacking in some regions.

INTIMATE PARTNER VIOLENCE
Globally, 27% of women have experienced physical and/or sexual violence by their intimate partner in their lifetime.

Adapted from: Michau, Keritare and Horn (2014) A Call to Action on Violence Against Women.

PREVENTION APPROACHES

Historically in public health, interventions have been categorised as primary, secondary or tertiary prevention (also called response) depending on the timing of the intervention. Primary prevention aims to stop violence before it starts; secondary prevention aims to detect violence early and prevent its recurrence; and tertiary prevention, or response, works to meet the immediate needs of survivors to limit the impacts of violence.

A more recent categorisation, based on the group being targeted by the intervention, distinguishes between universal prevention programmes, selective prevention programmes and response programmes:
Universal prevention programmes are directed at an entire population, community or group regardless of whether participants have experienced or used violence or their individual / family risk profile.

Selective prevention programmes are directed at specific groups or individuals considered to be at higher risk (e.g. families under stress and/or with mental health and substance use problems) or individuals or families already experiencing violence.

Response programmes offer services to address the short- or long-term needs of VAW survivors, and work to strengthen institutional capacities to provide more relevant and timely services and accountability.

Universal, selective and response initiatives complement one another. As universal prevention targets the whole population, it inevitably reaches those who are already experiencing or perpetrating violence, or who are at increased risk. It can therefore enhance selective prevention and response programmes by helping to reduce recurrent violence and transforming structures, norms and practices that enable violence. All levels of intervention across the prevention-to-response continuum are important for a comprehensive approach to VAW, adapted to the local context.

PREVENTING VIOLENCE AGAINST WOMEN IS POSSIBLE

Rigorous evidence shows that VAW is preventable and greater gender equality can be achieved. Several evidence-based prevention strategies have shown substantial reduction in the levels of VAW after only a few years of implementation. (See Brief 3). Evidence also shows that well-designed programmes can target individuals at higher risk of VAW and address intersections between violence against children (VAC) and VAW, helping to break the intergenerational cycle of abuse. See Brief 4 for guidance on designing a prevention programme.
IS IT UNIVERSAL, SELECTIVE OR RESPONSE?

The cards below contain examples of different programmes which fall within the categories of universal prevention, selective prevention and response programmes:

UNIVERSAL, SELECTIVE OR RESPONSE?
Working with parents at a school to provide them with information on positive discipline.

UNIVERSAL
this approach works with all parents without identifying specific parents who may be using corporal punishment against their children.

UNIVERSAL, SELECTIVE OR RESPONSE?
Conducting a school-based programme with adolescents on healthy relationships.

UNIVERSAL
if the programme is available to all adolescents in the specific grade(s)

SELECTIVE
if the sessions are delivered only to adolescents who are at higher risk of experiencing or using violence.

UNIVERSAL, SELECTIVE OR RESPONSE?
Reviewing government GBV crisis centre protocols to help improve delivery of services.

RESPONSE
Improving delivery of GBV services.

UNIVERSAL, SELECTIVE OR RESPONSE?
Conducting a group discussion with men who have a history of perpetrating IPV to help them reflect on the causes of violence and learn how to prevent it from happening again.

SELECTIVE
this involves working with a specific group of men who have perpetrated IPV and therefore require a focused approach to prevent the reoccurrence of violence.

UNIVERSAL, SELECTIVE OR RESPONSE?
Providing counselling services to survivors of violence.

RESPONSE
Counselling services are being offered to someone who experienced violence.

UNIVERSAL, SELECTIVE OR RESPONSE?
Conducting a community radio programme that provides information and conducts discussions on reducing VAW.

UNIVERSAL
the information is being shared with the entire community without focusing its messaging on a particular group within that community that may be at higher risk of VAW.

A FEMINIST-INSPIRED APPROACH TO PREVENTING VAW

If violence prevention programmes are to have a sustained and powerful impact on women’s lives, they need to keep women at their centre. Feminism is a collection of social movements globally that advocate for the fundamental equality of people of all genders, and is a useful framework for violence prevention work. For the Prevention Collaborative, a feminist approach to designing and implementing programmes to prevent VAW:

- Ensures that violence prevention programmes are accountable to women first and foremost, respecting their fundamental rights to physical, mental and emotional wellbeing and supporting women to make their own choices and decisions about their lives. This includes ensuring that survivors and women at risk have access to information, support services and resources, and can express their issues and take action concerning their safety and wellbeing.

- Means a commitment to addressing the unequal relations of power between men and women that drive VAW. The Prevention Collaborative focuses primarily on violence in the home because this is where rates of VAW are most prevalent globally.

- Recognises that women’s experiences of violence are shaped by their race, ethnicity, class, sexuality, age, (dis)ability, geographic location, etc. as well as legacies of slavery, colonial violence, ethnic conflict, genocide, state nationalism and neoliberal globalisation.
Brief 2 explains risk factors and triggers for VAW perpetration as well as protective factors that reduce the risk of VAW. It focuses on how a prevention programme can address these factors across individual, relational, community and societal levels.

WHAT’S NEXT?

REFERENCES

1. The acronyms VAW and GBV are often used interchangeably because most GBV is perpetrated by men against women and girls. However, it is important to recognise that GBV includes violence directed at anyone based on their sex assigned at birth, their actual or perceived gender identity or their perceived adherence to socially defined norms of masculinity or femininity (a concept known as gender expression). This expands the category of GBV to include violence directed at Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ+) individuals.


5. UNICEF. (2020). Female genital mutilation (FGM) — UNICEF DATA. For further data see https://data.unicef.org/topic/child-protection/female-genital-mutilation


