



What Works to Prevent Violence: Impact at Scale Project Briefs 2026

March 2026



What Works to Prevent Violence

What Works to Prevent Violence: Impact at Scale is a seven-year initiative (2021-2028) funded by the UK's Foreign, Commonwealth and Development Office (FCDO) to scale global evidence-based and practice-informed efforts to prevent violence against women and girls (VAWG).

Fourteen projects have been selected, with rigorous evaluations exploring what works and assessing how effective approaches can be taken to scale. The grants include a number of focus areas:

- **Innovation grants** support the development and implementation of new or existing ideas with the transformative ability to contribute impact with potential for future scaling.
- **Mainstream grants** focus on integrating effective interventions, or key intervention components, into existing large-scale systems and infrastructure, in a way that is easily replicable by policymakers and practitioners.
- **Transition to Scale grants** support projects to evolve to the next stage on the pathway to scale. This may involve strengthening approaches to address multiple risk factors or types of violence, combining strategies, or adapting interventions to optimise them for scalability, particularly at the community and population levels.
- **Scale grants** expand and/or deepen evidence-based VAWG prevention programming and policy efforts in partnership with organisations, institutions and communities who share a commitment to sustainable change.

Learning is also being generated through What Works' [Ending Violence against Women and Children \(VAWC\) Helpdesk](#), which provides **technical assistance to three multi-year FCDO programmes**: a food security and livelihoods programme in Syria; a GBV prevention programme in South Sudan; and a climate resilience programme in Lebanon, Egypt, Jordan and the Occupied Palestinian Territories.

In addition, the **Technology-facilitated GBV (TFGBV) Portfolio** brings together five research grants administered through the Sexual Violence Research Initiative (SVRI), drawing on its global research networks and convening power to strengthen evidence on violence against women and girls. TFGBV is an emerging research area, and What Works is investing in building the evidence base.

2026 Project Briefs

All data presented in this document is preliminary and subject to change.

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1. Pamodzi Kuthetsa Nkhanza

Malawi, Scale Grant (November 2023 – March 2028)

Partners Involved

Grantee partners: The Women’s Legal Resources Centre (WOLREC), the Girls Empowerment Network (GENET), Human Rights for Women and Girls with Disabilities (WAG Disability)

Research partners: University of Cape Town, Imani Development, Global Women’s Institute

Brief Project Summary

The Pamodzi Kuthetsa Nkhanza (PKN) project is a holistic programme, involving both prevention and response components. It combines multiple interventions on community mobilisation, gender-transformative change in families, and institutional strengthening to prevent violence against women. The interventions include the following:

Prevention:

- SASA! Together, a community mobilisation approach to shift the norms and attitudes that drive violence against women and girls (VAWG)
- Moyo Olemekhezeka, a family-based, women’s economic and social empowerment programme adapted from the evidence-based Zindagii Shoista model for households

Response:

- Survivor Support Fund (SSF) and accompaniment, to provide financial, emotional, and practical support to enable survivors of violence to access needed services
- Gender transformative curriculum, to improve knowledge, attitudes, and skills of service providers and enable them to deliver more survivor-centered services

National Influencing:

- A technical advisor embedded within the Malawian Police Service
- Engagement with national-level policy makers and stakeholders to encourage prioritisation of VAWG

Randomised control trials are being utilised to evaluate two prevention models, implemented at scale. The response components are being evaluated through operations research.¹ An additional intervention Safe and Capable (S&C) is a supplementary resource pack designed to enhance

¹ What Works II accompanies PKN partners through dedicated Technical Advisors who provide tailored, context-responsive support to strengthen collective capacity, uphold feminist principles, and deliver high-quality programming at scale across all phases of the grant.

implementation of SASA! Together by strengthening attention to violence against women with disabilities. S&C is not a stand-alone methodology, but rather a suite of resources purposely designed to be used as part of SASA! Together. S&C includes training materials to build the capacity of SASA! Together Community Activists (CAs) and Community Leaders (CLs) to address the issue of violence against women with disabilities, as well as additional activity materials to be used in each phase of SASA! Together to foster community dialogue on violence against women with disabilities.

Research Questions

- What is the community-level impact of SASA! Together implemented across two districts in Malawi on the primary and secondary outcomes of violence for ever-partnered women?
- What is the additional value of adding a women's social and economic empowerment programme for households in communities that are already receiving SASA! Together?
- What is the impact of the institutional strengthening programming component of the intervention?

Progress in 2025

In 2025, PKN began implementation of SASA! Together and supported the development of the Malawi National Action Plan on GBV, launch of a Women's Manifesto and supported the police service to improve support to survivors. Co-design of the Moyo Olemekezeka research with the PKN team informed the operational plan for baseline data collection which was undertaken in October 2025. A baseline survey was conducted for the Gender Transformative Curriculum training and focus groups were held with service providers. Two baseline reports and a protocol paper were produced in 2025.

Priorities for 2026

In 2026, PKN will scale SASA! Together across seven communities in Lilongwe and Balaka, reaching an estimated 168,000 people, with a strong focus on disability inclusion. Under Moyo Olemekezeka, PKN staff will support and mentor facilitators and business assistants to deepen engagement with 300 families.

Work will also include delivery of the Gender Transformative Curriculum to 350 frontline service providers, including health workers, police officers, and chiefs. The team will work with the Ministry of Gender and Women's Network partners to advance the National Action Plan through three advocacy engagements and participate in external learning and influence spaces. Technical assistance to the PKN team, delivered through the Originator Technical Advisors and the What Works II Senior Technical Advisor, will ensure quality and fidelity across implementation, as well as help documentation of practice-based learning.

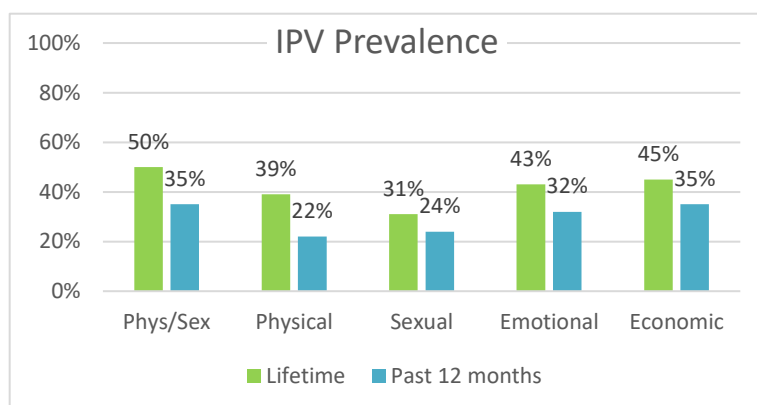
The Survivor Support Fund will ensure women and girls in all their diversity who report violence

receive accessible, inclusive accompaniment and access to services. Research priorities include analysing Moyo Olemekzeke baseline data, drafting reports and articles, undertaking operations research, and continuing monitoring and evaluation.

Summary of Baseline Findings

Among the 1,279 ever-partnered women aged 18-49 who completed the IPV module at baseline, almost 60% (57%) had experienced physical, sexual or emotional IPV and 43% experienced this violence in the past 12 months.

Half of all women reported experiencing physical or sexual violence from a partner at some point in their lifetime, with more than one-third (35%) reporting this violence in the 12 months prior to the survey. Reporting on social norms, women who agreed IPV was acceptable had greater odds of reporting personal experiences of IPV.



The GTC survey indicated that there is room to shift harmful beliefs around gender roles and IPV and improve the practice of survivor-centred approaches among frontline service providers. The prevalence of patriarchal norms was particularly evident in the qualitative findings, as described by one male respondent: *“Some people still believe that the man is the head of the household, and that a woman must remain silent. So even if the man is wrong, the woman should not speak. If the woman makes a mistake, she gets beaten, and that’s not seen as a problem.”*

Key Learnings

- All forms of IPV are highly prevalent, with nearly half of women reporting economic abuse.
- Alcohol use and controlling behaviours appear to be key drivers of IPV in these districts.
- Polygamy appears to also drive IPV, except in the case of sexual violence.
- Traditional patriarchal views on gender roles remain prevalent and are closely linked to financial control. This has implications for economic empowerment programmes for women such as MO, underscoring the need for programming to include mechanisms safeguarding and for continuous tracking of the potential for harm in the home.
- Mediation was commonly referred to as a mechanism to respond to reports of IPV, but the extent to which this upholds the rights and agency of women needs further exploration.

2. Uddan: Mainstreaming VAWG Prevention in a Health System

India, Mainstreaming Grant (November 2023 - December 2027)

Partners Involved

Grantee Partner: Mahila Sarvangeen Utkarsh Mandal (MASUM)

Research Partners: Centre for Enquiry into Health and Allied Themes (CEHAT), the World Health Organisation (WHO), the Global Women's Institute (GWI)

Brief Project Summary

What Works is evaluating the mainstreaming of a health systems strengthening initiative, which promotes response and prevention to violence against women in public health settings. The intervention is based on the LIVES model, a WHO curriculum for training health-care providers to recognise violence, provide compassionate care, and manage ethical challenges. It is an evidence-based tool (Listen, Inquire, Validate, Enhance safety, and Support) designed to strengthen the health system's response to violence against women by reducing immediate risks, and connecting survivors with essential services. The Uddan project focuses on mainstreaming and scaling up the health system's response to domestic violence including intimate partner violence (IPV) in primary healthcare settings through capacity building and system-strengthening interventions guided by the WHO *Clinical and Policy Guidelines (2013)*, while adding an innovation component involving community health workers to work more directly on a community awareness component.

Research Questions

- What is the impact of a health systems intervention on quality and uptake of services and women's perceptions of quality of care with respect to domestic violence, including IPV?
- Can a combined health systems and community health worker intervention contribute to reducing domestic violence, including IPV?

Progress in 2025

The intervention focused on strengthening the health system response to IPV through a package of activities implemented in primary health facilities. This included training of master trainers followed by cascade training of facility staff and managers. Alongside this, efforts focused on strengthening facility readiness by developing and equipping facilities with protocols, providing job aids for health workers, and producing Information, Education and Communication (IEC) materials for the general public. Facilities were also supported to systematically document cases that were identified,

managed, and referred. Dedicated counsellors trained to respond to domestic violence were deployed within primary health facilities, and a community health worker capacity-building component was initiated at the end of 2025.

Baseline and endline knowledge, attitudes, and practice (KAP) surveys were conducted with health workers in both intervention and control arms before and after the trainings. In addition, baseline prevalence of different forms of violence was measured through a large cross-sectional survey of 12,459 women attending the primary health facilities, alongside a facility readiness survey across all facilities. Quarterly analysis of facility registers was also undertaken to monitor the health system response over time. In addition, members of implementation and research teams worked to align roles and expectations including through in-person meetings.

Priorities for 2026

In 2026, implementation will focus on strengthening delivery at sub-centre and community health worker levels to ensure high-quality domestic violence prevention and response. Priorities include orienting community structure members on prevention and response, strengthening the capacity of Block Supervisors to support Accredited Social Health Activists (ASHAs), and delivering refresher training for healthcare providers across 17 facilities. Learning will be captured through building staff capacity in the Most Significant Change technique, bi-annual review meetings, and practice-based learning and advocacy briefs. Continued advocacy with the Health Directorate will support the phased scale-up of the interventions. Research priorities include developing manuscripts from baseline findings and identifying implementation gaps through systematic analysis of health facility registers. An endline KAP survey will be conducted with health workers in both intervention and control blocks to assess changes and measure programme impact.

Summary of Baseline Findings

The cross-sectional survey found high levels of IPV among women attending primary health facilities. This survey was carried out among women 18 and older attending primary health facilities in both intervention and control arm showed a higher prevalence of physical and/or sexual violence from intimate partner than the national and state level population-based prevalence. There were also low levels of health worker preparedness to identify survivors of violence and providing them first-line support. The system level preparedness in terms of multi-stakeholder linkages and supportive supervision was found to be non-existing. No health facilities met WHO recommended five minimum requirements to identify survivors and respond to them. These include trained health workers, having an SOP, privacy and confidentiality, and a facility register for documenting cases. Implementation challenges include inadequate infrastructure, lack of private counseling spaces, long distances to facilities, and frequent staff transfers and varying degrees of staff motivation, which affect the identification of survivors and their access to timely support.

Key Learnings

- Higher prevalence of IPV at baseline in health facilities than the population level prevalence (NFHS- 5, 2019-20) reinforces the importance of integrating VAW response and prevention into health systems.
- Community health worker component will be critical in improving awareness and perceptions among community members about VAW being a health problem.

3. Empowered Communities, Including Girls and Boys to Fight against VAWG

Somalia, Mainstreaming Grant (November 2023 – October 2027)

Partners Involved

Grantee Partners: The International Committee for the Development of Peoples (CISP) and Northern Frontier Youth League (NOFYL)

Research Partners: Johns Hopkins University, CISP

Brief Project Summary

This community-led intervention uses the VAWG prevention model *Communities Care (CC)*. Developed by UNICEF and partners, CC combines a community-based intervention with a schools-based intervention, using an adapted CC model for schools. The programme seeks to prevent violence against women and girls through social norms and beliefs transformation and strengthening survivor-centred care systems. Implemented in Banadir and Galmudug, Somalia, CC aims to reduce violence against women, boys, and girls by promoting positive social norms that uphold dignity, safety, and gender equity within schools, families, and communities. The CC intervention in schools consists of 17 sessions delivered by teachers over 17 weeks. A randomised control trial is being conducted to understand the impact of CC.

Research Questions

- Evaluate the effectiveness of the combined CC-Adult and CC-Adolescent intervention in reducing VAW and VAC.
- Evaluate the intervention's impact on personal beliefs and social norms that sustain VAW and VAC.
- Examine the implementation process of the combined CC intervention.

Progress in 2025

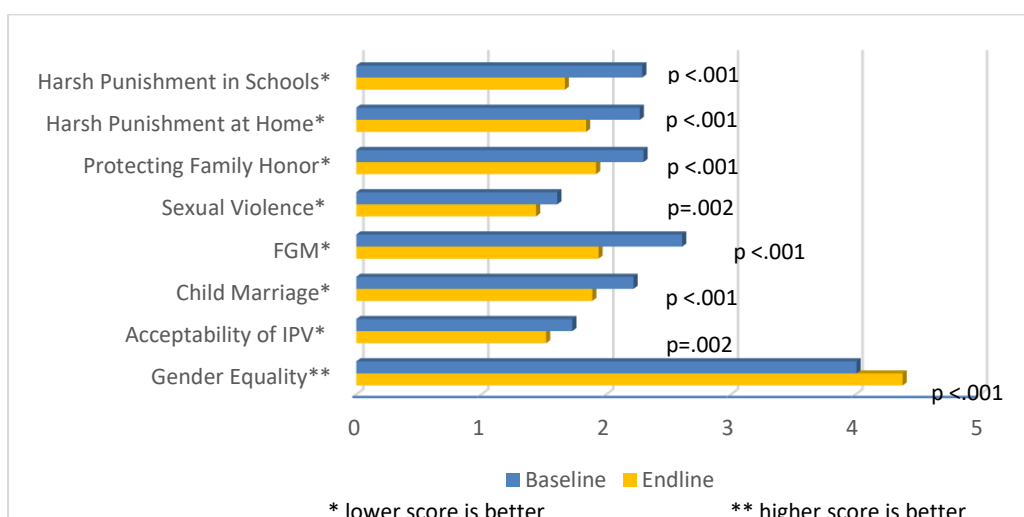
Completed Round 1 implementation of CC with adults and adolescents, endline data collection, and key analyses; completed Round 2 baseline data collection for CC participants and second-round of adult and adolescent community surveys. Second-round of CC with adult (16 groups) and adolescent (9 groups) started.

Priorities in 2026

Continue Round 2 implementation in communities and in schools; complete Round 2 endline data collection and analyses; draft reports and manuscripts; initiate Round 3 baseline data collection and third-round surveys. Initiate round 3 of the CC intervention after baseline data collection.

Summary of Key Round 1 Findings

One hundred and sixteen adults (n=116) completed the baseline survey; 98 (84.5%) completed the endline in Banadir (58% female). At endline (see Figure below), participants reported significant shifts in personal beliefs, including greater support for gender equality and reduced endorsement of victim-blaming, family honour over survivor safety, FGM, child marriage, and harsh child punishment.



Women reported greater partner control and sexual violence at endline, reflecting increased recognition of controlling behaviours and comfort disclosing sexual violence. There was no change at endline in physical violence or emotional abuse victimisation.

Two hundred and seventy-seven (n=277) adolescents completed the baseline survey, with 256 (92.4%) completing endline (59% female) in the two regions. At endline, adolescents showed increased knowledge of sexual violence, teen pregnancy, and child marriage; greater support for gender equality and sexual health confidence; and reduced acceptance of IPV and harsh punishment at school and home (data not shown). Improvements from baseline to endline were greater among boys for knowledge, gender equality, sexual health confidence, and child marriage, while girls showed greater reductions in acceptance of IPV.

At endline, peer violence and harsh punishment in school and homes declined in Galmudug, however, delayed data collection may reflect experiences during summer break rather than the school term. In Banadir, children reported increases in violence and harsh punishment which may

indicate greater awareness and willingness to report following participation in CC.

Key Learnings

- The combined CC Adult and Adolescent intervention show meaningful shifts in knowledge and beliefs that support violence prevention.
- Changes in reported violence likely reflect greater recognition, willingness to disclose and timing of data collection, highlighting the need for careful interpretation of early findings on violence outcomes.

4. Play for Prevention of VAWG

Pakistan, Mainstreaming Grant (November 2023 – March 2027)

Partners Involved

Grantee Partners: Right to Play (RTP), Aahung

Research Partners: The Aga Khan University

Brief Project Summary

This programme uses a play-based life skills curriculum model building on a previously evaluated play-based life skills intervention in Pakistan among students aged 11-15 that found a 59% decrease in peer violence against girls and 33% against boys, along with improved gender attitudes and less depression. Based on that success, the current intervention explores the transformative role of play in empowering youth and preventing violence in and around schools. Right to Play and Aahung are integrating play-based learning with a sexual and reproductive health and life skills curriculum into public and private schools in Sindh Province. The programme engages Grade 6 to 8 students, teachers, school management, and parents, while strengthening referral systems. A rigorous impact evaluation and operations research assess how this whole-school approach reduces violence in schools and beyond.

Research Objectives

- Assess the effectiveness of the adapted play-based life skills education (PLSE) in reducing violence against girls in 100 schools (cRCT- 50 in the intervention and 50 in the control arm)
- Evaluate the cost-effectiveness of the adapted PLSE in 50 intervention schools.
- Explore the implementation experiences, feasibility, and levels of acceptability of the adapted PLSE in 50 intervention schools.

Progress in 2025

In 2025, inception activities and baseline data collection was completed, and implementation expanded significantly in both scale and depth. Regular PLSE sessions (35-40 minutes each) are being delivered across 112 schools (Cohort 1- cRCT 50 intervention schools; Cohort 2- 62 operational schools). Trained teachers facilitated structured PLSE sessions around life skills addressing cooperation, emotional expression, conflict resolution, personal boundaries, gender equality, and safe decision-making.

Teachers in public and private intervention schools delivered an average of 30 sessions per school, meeting first-year dosage targets. At the research level, initial data analysis was conducted and a

baseline report drafted.

Collaboration with the Ministry of Education was strengthened, reflecting its central role in the programme and in supporting scale-up to additional geographies through other programmes. Two advocacy films were finalised, with the first widely shared and the second ready for dissemination. Engagement with women parliamentarians and high-level stakeholders further strengthened policy influence and supported systems-level change.

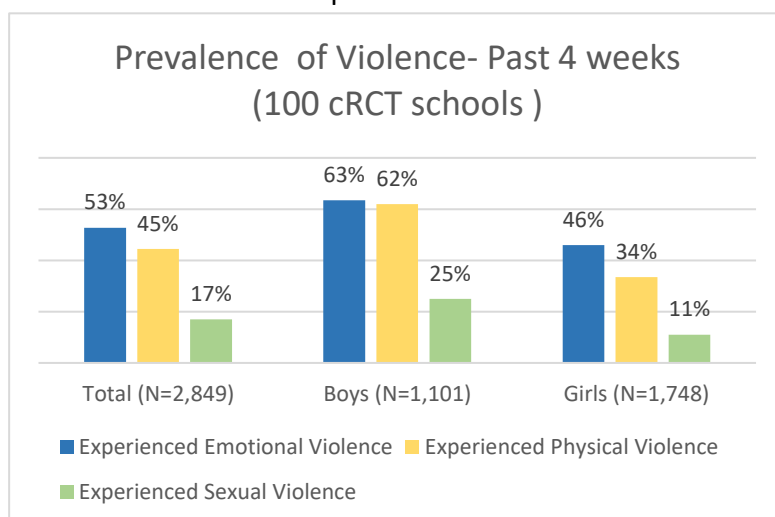
Priorities for 2026

The programme will continue implementation across 162 schools, including completion of 60 PLSE sessions in 50 longitudinal schools. It will also strengthen teachers' capacity as delivery agents, enhance SPC functionality through targeted facilitation and follow-up, initiate endline data collection, and advance the implementation of the cost-effectiveness study. The programme will continue to engage with the Ministry of Education and private schools' association. Clear and compelling advocacy products will be developed, including an elevator pitch tailored for policymakers and key stakeholders, targeted social media campaigns to amplify visibility and public engagement, and structured learning products and Practice-Based Learnings (PBLs) for wider dissemination. Existing advocacy strategies will be reviewed and strengthened, drawing on key lessons from the GPEA and ongoing stakeholder engagement to ensure they are evidence-informed and aligned with current programme priorities.

Summary of Baseline Findings

More than half of all students reported experiencing emotional violence. 34% of participants experienced being cursed at, insulted, shouted at or humiliated in the past four weeks. The prevalence of emotional violence was higher among boys than girls (63% vs. 46%).

Physical violence was overall reported by 44.5% participants, with consistently higher prevalence among boys (61%) compared to girls (33.5%). The most frequently reported form of physical violence was being slapped, punched, or otherwise physically hurt, with a prevalence of 30%. Among this for boys (24.9%), schools were the most common setting for physical violence, while girls (20%) most often



experienced incidents at home.

Sexual violence was stratified into contact (4%) and non-contact (15%) forms, with both types reported at higher prevalence among boys.

Key Learnings

- Both boys and girls reported progressive beliefs regarding gender equality. Acceptability of violence scores was low overall, demonstrating a strong rejection of domestic violence, however, boys reported higher acceptability of violence compared with girls.
- While students say they reject violence and support equality, 58% reported perpetrating peer violence in the last four weeks.
- Public and private school teachers reflected high support for gender equality and showed a strong preference for non-violent disciplinary practices. Female teachers in schools reported higher opposition to corporal punishment compared to male teachers.

5. Litsemba Rising - Campus Sexual Harassment Prevention Intervention

Eswatini, Innovation Grant (November 2023 – October 2026)

Partners Involved

Grantee Partners: Women Unlimited, Bantwana

Research Partners: University of Eswatini and the University of Cape Town

Brief Project Summary

In response to high prevalence of sexual harassment in Eswatini's Higher Education Institutions, Women Unlimited Eswatini and Bantwana Initiative are working together to implement a hybrid, club-based peer-driven campus sexual harassment prevention intervention which seeks to reduce incidence and tolerance of sexual harassment through improving knowledge, attitudes, perceptions, and practices (KAPP), and increasing awareness of policies and support mechanisms at University of Eswatini (UNESWA). The project uses the UIC model and delivery approach that centers students as the primary change agents. Working with an adapted, structured curriculum with 12 modules, including exercises, posters and group discussions, the facilitators deliver the module to small groups of participants in weekly, in-person meetings over a 6-week period. Prior to intervention implementation, a climate survey was conducted. The findings from the climate survey are included in this brief.

Research Questions

What is the impact of the intervention in reducing incidents of sexual harassment, changing students' attitudes and behaviours towards sexual harassment, increasing awareness and understanding of sexual harassment policies and resources?

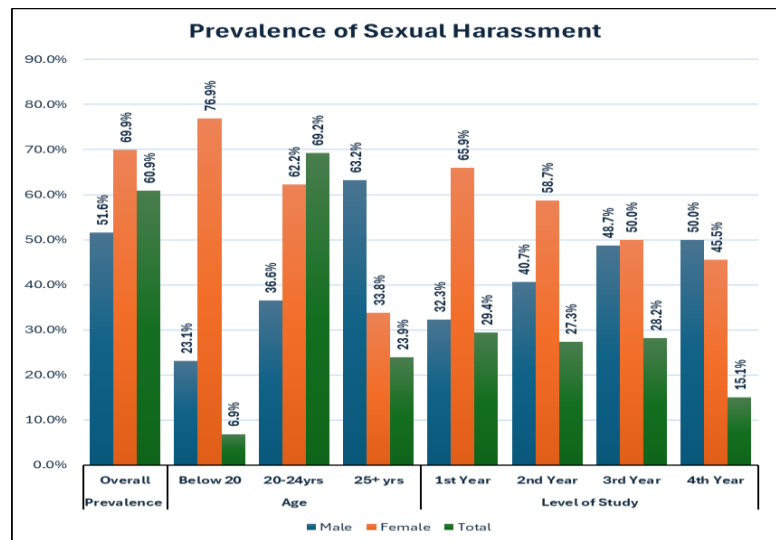
Progress in 2025

A climate survey was conducted with 1,274 students and staff, while nine key informant interviews were completed. These aimed to provide critical contextual understanding of the campus environment by students at the start of the intervention, including prevailing attitudes, levels of knowledge, perceptions of safety, experiences of sexual harassment, and awareness of institutional policies. Programme implementation did not begin in 2025 due to prolonged university closures caused by student and staff strikes and persistent internet connectivity challenges that delayed communication with the Institutional Research Review Board.

In 2025, 25 students were trained as Student Champions and commissioned by the UNESWA management. A total of 238 students enrolled in the first cohort, with 228 completing the UIC sessions, representing 95% of the target. Early results indicate positive shifts in participants' knowledge, with 36.5% of those who completed the first cohort showing a 40% increase in knowledge. 13.7% showed a reduction in tolerance of sexist norms. In addition, the project engaged university-level and national-level stakeholders through policy dialogues to strengthen commitment to learner safety and contribute to a more supportive enabling environment.

Priorities for 2026

The Litseba project is scheduled to end this year. Activities will focus on refresher training and ongoing supervision for Student Champions, alongside the delivery of UIC sessions for Cohorts 2 and 3. The project will also implement gender sensitivity training for UNESWA staff and continue stakeholder engagement through meetings and university orientation campaigns. To inform programme learning, the team will conduct the Cohort 1 endline, baseline assessments for Cohorts 2 and 3, and complete endline data collection and analysis.



Summary of Baseline Findings

The prevalence of sexual harassment was 60.9%, higher among females (69.9%) compared to males (51.6%). Females who were younger (below 20 years), and who were in their first year of study had higher prevalence, while the opposite was observed among males. The majority of perpetrators were reported to be males (61.1%), and a higher proportion were undergraduate students (75.7%). Male-to-male perpetration was also high (37.9%), while female-to-female was also reported by 15.2% of participants.

When considering reporting and response to sexual harassment, 41.8% students disclosed sexual harassment; 73.1% felt supported but only 9.8% reported that disciplinary action was taken against the perpetrator. Compared to males, females were less likely to report sexual harassment incidents (9.5%); and had disciplinary action taken (7.8%) following reporting. Although UNESWA has a sexual harassment policy, very few students and staff knew about it, and those who did, described it as "toothless" (KI-7).

Being female, poor socioeconomic background, societal norms, gender inequality, staying off campus, and drinking alcohol were identified as risk factors for sexual harassment. A quote from

the qualitative data highlights some of these risk factors: *“It is the marginalised and destitute students. Those who find out they may not be able to afford rentals and afford meals. You find that others are double orphan, others are single orphan. And also the girl or the ladies, the students the females are also under the vulnerable category” (KI-2).*

Key Learnings

- Sexual harassment is common in UNESWA, with a lifetime prevalence of 60.9%.
- Prevalence was higher among females, those of younger ages and lower study levels.
- Perpetrators were generally males, and undergraduate students.
- Low reporting of sexual harassment to the university, due to fear, shame, trauma, and lack of trust.
- Poor socioeconomic, being female, staying off campus, first year, drinking alcohol are risk factors for sexual harassment.
- A majority of the students were not aware of the sexual harassment policy.

6. Safer Workplaces for Women

Pakistan, Innovation Grant (January 2024 – December 2026)

Partners Involved

Grantee Partners: Shirkat Gah Women's Resource Centre

Research Partners: The Aga Khan University

Brief Project Summary

The Standing Together Against Workplace Harassment (SATH) seeks to promote safer and more gender-equitable workplaces in Pakistan by strengthening understanding and enforcement of the Protection against Harassment of Women at the Workplace Act, 2010 (amended 2022). The project addresses workplace harassment by transforming institutional culture and strengthening the ability of Labour Right Women Workers Organisations (LRWWOs) accountability. The intervention engages corporate institutions, LRWWOs, and Ombudspersons in Karachi and Lahore to reform management practices, build awareness of rights and redress mechanisms, amplify collective voices against harassment and provide survivor support and training. Mixed methods research is being conducted alongside the programming to assess project implementation and its effects.

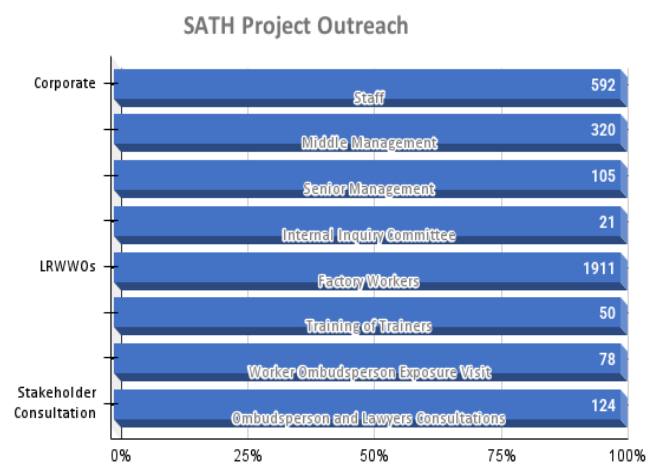
Research Objectives

The overall research seeks to assess how the project is facilitating:

- Improved implementation of “The Protection Against Harassment of Women at the Workplace Act” and enhancement of women workers/employees’ safety in project-engaged corporate institutions
- Increased capacity of Labour Rights Women Worker's Organisations to Facilitate Increase in Cases of Sexual Harassment Complaints
- Improved linkages with Ombudsperson offices & Legal Aid Providers for women safety.

Progress in 2025

In 2025, baseline quantitative data collection was completed using two tools including the Workplace Integrated Safety and Health (WISH) Assessment, and the Respectful Workplace Survey (RESPECT) while the qualitative data was collected through self-developed interview guide. The reach of the project is presented in the graph:

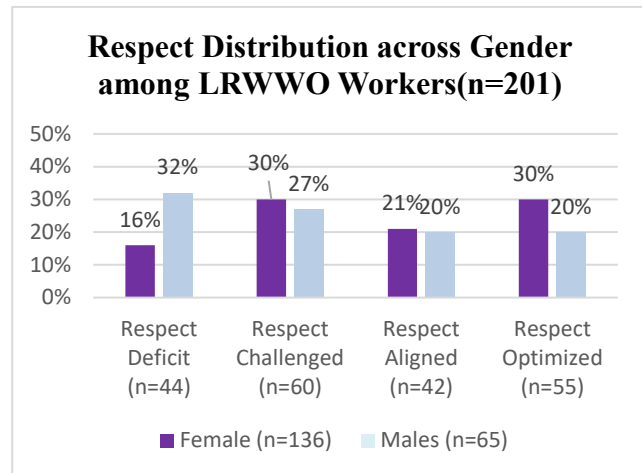


Priorities for 2026

Continue implementation of the programme. Finalise analysis of baseline data and draft reports and articles.

Summary of Baseline Findings

The Respectful Workplace Survey tool measures employees' experiences (rating scale) of bullying, harassment, and discrimination to assess the overall level of respect and psychological safety in the workplace. In this assessment, about 50% of female respondents reported that they were in a respect deficit or respect challenged environment, while the other 50% felt they were in a respect aligned or optimised place.



Key Learnings

- Harassment is often embedded within broader workplace cultures where inappropriate comments, intimidation, and gendered power dynamics are normalised.
- Many workers are unaware of the existence of Internal Inquiry Committees or complaint procedures and, even in workplaces where policies exist, workers reported limited visibility of these mechanisms and uncertainty about how to access them.
- Barriers to reporting harassment, including fear of retaliation, lack of confidentiality in complaint processes, and uncertainty about how cases would be handled by management.
- Among the corporate sector, perceptions of workplace respect vary by organisational hierarchy and gender. Senior management predominantly perceived their workplaces as respect-aligned or respect-optimised. In contrast, middle management and employees, especially women, were far more likely to report respect challenged or respect deficit environments.
- Women at middle management and employee levels reported consistently poorer experiences of respect than men, reinforcing evidence that workplace sexual harassment and disrespect are shaped by broader gendered power relations rather than isolated incidents.
- Findings from the WISH survey complement these findings by revealing critical weaknesses in institutional systems. A majority of workers reported limited leadership commitment to diversity, equity and inclusion; insufficient allocation of resources for anti-harassment initiatives; weak enforcement of policies; and inadequate confidentiality and non-retaliation safeguards.

- Difficulty in onboarding institutions while ensuring access to their employees/workers for the intervention, in particular garment and other sectors where women constitute a large proportion of the workforce.
- LRWWOs are critical for accessing garment sector and other lower skilled and paid workers. Many workers indicated that they would not feel comfortable reporting harassment through formal workplace channels but were willing to seek guidance through LRWWO networks.
- Addressing workplace harassment requires engaging male colleagues and supervisors, as they often hold decision-making power in workplace hierarchies and play a key role in shaping organisational culture.

7. Comprehensive Sexuality Education to Prevent Violence

Madagascar, Innovation Grant (November 2023 – October 2026)

Partners Involved

Grantee Partners: Projet Jeune Leader (PJL)

Research Partners: John Hopkins University, PJL

Brief Project Summary

In rural Madagascar, Projet Jeune Leader (PJL) is demonstrating how comprehensive sexuality education (CSE) can prevent violence by shaping gender norms, relationship skills, and agency during early adolescence. Implemented in partnership with government middle schools, the four-year programme equips students with essential life skills, including emotional recognition, communication, self-confidence, and gender-equitable attitudes.

Trained young adult CSE Educators deliver scripted, classroom-based lessons using discussion and role-play to challenge harmful norms, foster empathy, and provide age-appropriate information on puberty and sexual health. The project is being evaluated using a randomised control design, with data collected at baseline and endline across two stages – Round 1 (the 2024-2025 school year) and Round 2 (the 2025-2026 school year).

Research Questions

- Assess the effectiveness of the PJL CSE programme in reducing bullying and violence victimisation among adolescent girls and boys
- Identify pathways through which the programme prevents violence
- Examine effects on school safety and climate among students, teachers, and school leaders

Progress in 2025

The programme model was implemented in 24 rural middle schools, with Round 1 baseline and endline data collected in intervention and control schools (N=49) to inform the evaluation; stakeholder qualitative data and baseline data for Round 2 of the intervention were also collected.

Priorities for 2026

Continue Round 2 programme implementation, complete Round 1 data analyses, prepare manuscripts, and collect Round 2 endline data.

Summary of Round 1 Findings

The PJI CSE programme is being evaluated using a cluster-randomised design with repeated surveys among 5,872 adolescents attending intervention (n=24) and control (n=25) schools. Emerging findings from Round 1 (baseline and endline) data collection show that adolescents in intervention schools showed significantly greater reductions in acceptance of IPV, forced sex, and child marriage compared with controls (all $p < .001$). In addition, students exposed to the programme demonstrated significant increases in sexual health confidence ($p < .001$), including stronger endorsement of shared responsibility for pregnancy prevention. Intervention schools showed increases in prosocial behaviour and significant reductions in hyperactivity, suggesting improvements in self-regulation and social functioning. Positive effects were also observed for both girls and boys. Boys showed larger gains in gender-equitable attitudes and sexual health confidence, while girls had greater reductions in acceptance of IPV.

Key Learnings

- These findings provide early evidence that comprehensive sexuality education can shift attitudes and build skills that reduce vulnerability to violence.

8. Preventing Intimate Partner Violence and Enhancing Resilience to Impacts of Climate Change

Uganda, Innovation Grant (December 2023 – October 2027)

Partners Involved

Grantee Partners: CEDOVIP

Research Partners: Makerere University, Equality Institute

Brief Project Summary

In collaboration with the Government of Uganda's Ministry of Water and Environment at national and district levels, CEDOVIP is integrating violence against women (VAW) prevention and response into climate change mitigation efforts for wetland restoration and alternative livelihoods programmes. CEDOVIP's project focuses on three main strategies:

- **Institutional Strengthening:** Supporting the Ministry of Water and Environment, its partners and Pallisa District staff to build capacity and integrate GBV prevention and response into climate change policies and programme.
- **Community Mobilisation:** utilising the *SASA! Together* approach with communities in Pallisa District to challenge harmful norms and behaviours that drive GBV at individual and household levels, to prevent violence.
- **Improving VAW response:** strengthening the capacity of VAW response institutions (such as police, health, local government, and CSOs) to provide survivor-centred services.

The project will be evaluated by a quasi-experimental study design.

Research Questions

- What are the community-level impacts of *SASA! Together* on: rates of intimate partner violence (IPV); community attitudes on VAW; and bystander action in response to VAW?
- What impact does the institutional strengthening pillar have on communities who are receiving climate change response intervention and livelihood programme?
- When *SASA! Together* is implemented at the community level alongside institutional strengthening, is there a more effective reduction in IPV and shifts in social norms?

Progress in 2025

In 2025, implementation of the *SASA! Together* intervention has commenced. Baseline data collection, including community-based surveys, qualitative data collection, capacity assessments of duty bearers and Institutional Capacity Assessments, was completed.

Priorities for 2026

Continue implementation of the programme in communities and with government partners.
Finalise analysis of baseline data and draft reports and articles.

Summary of Baseline Findings

IPV is widespread in the surveyed communities, with variations observed across intervention and comparison groups. Economic IPV was higher in intervention communities (46% lifetime, 37% past 12 months) than comparison communities (34% and 28%). Economic control, for example restricting women's work, seizing earnings, and unilateral resource management—reinforces other forms of IPV. Lifetime emotional abuse affected 62% of women in intervention communities vs. 54.4% in comparison communities. Emotional IPV manifested as insults, threats, intimidation, and social isolation, often intensified by resource scarcity. Lifetime physical IPV prevalence was slightly higher in comparison communities (55%) than intervention communities (48%), although severe acts (kicking, dragging, hair-pulling) were reported in both groups. Lifetime sexual IPV prevalence was similar across groups (30% intervention, 34% comparison). Sexual coercion, often tied to economic dependence or male control over household resources, was reported, with societal norms limiting disclosure.

Key Learnings

- There are gendered impacts of climate change and wetland restoration. Respondents highlighted that resource scarcity and financial strain amplify household stress, increasing women's vulnerability to IPV.
- 73% justified wife beating for at least one reason, and 44% viewed IPV as a private matter. Reporting of VAW remains constrained by economic dependence, stigma, informal settlements, and weak survivor-centred services.
- Nearly all duty bearers had strong awareness and felt personal agency to effect change (96%) and responsibility for preventing VAW (93%). However, only 74% believed their institutions were committed to addressing VAW.
- Only 32% of individual response service providers had formal training on VAW and child abuse, though most organisations had at least some trained staff (82%)

9. 'Alpasabhik ka aawaz ko sabalikaran'

Advancing Minority Rights

Nepal, Innovation Grant (April 2025 – March 2028)

Partners Involved

Grantee Partners: Nagarik Awaaz and Mitini Nepal

Research Partners: Progress Inc Nepal and Equality Institute (EQI)

Brief Project Summary

The '*Alpasabhik ka aawaz ko sabalikaran*' (Advancing Minority Rights) project aims to reduce stigma, violence, and discrimination against lesbian and bisexual women and transgender (LBT) individuals by fostering greater acceptance within families and communities. Across four sites (Kathmandu, Chitwan, Jhapa and Sunsari), the project involves the adaptation and implementation of an innovative peacebuilding and conflict transformation approach – specifically, Peace Circles and related peace initiatives – to address violence and discrimination against LBT individuals. The project aims to strengthen the mental and psychosocial wellbeing of LBT women and transgender men, who are engaged to co-facilitate the activities in the communities. The Peace Circles and other Peace Initiatives, such as street dramas, psychosocial orientations and stakeholder trainings aim to build knowledge, shift attitudes and promote positive by-stander behaviour among key stakeholders, including family members, local educators, government officials and service providers such as One-stop Crisis Management Centre (OCMC) staff and Female Community Health Volunteers (FCHVs).

The project will be evaluated through a mixed methods research study, with qualitative methods serving as the primary methodological focus. Some evaluation activities will fit a traditional baseline/endline format, while others will be conducted using rolling pre-/post-surveys to evaluate the ongoing Peace Circles conducted throughout the life of the intervention. The key objectives of the evaluation are to:

1. Understand the nature of violence and discrimination against LBT women and transgender men in Nepal and the drivers of this violence and discrimination.
2. Explore the primary innovative component of this project (i.e. adapting a Peace-building approach to promoting LBT rights and preventing violence against LBT women and transgender men).
3. Examine the effectiveness, impacts and process of the intervention.

Research Questions

Key evaluation questions include:

- What are the specific forms, drivers and impacts of violence and discrimination faced by LBT women and transgender men in Nepal?
- What are some common misconceptions, discriminatory attitudes, and harmful norms that community members hold about LBT women and transgender men?
- How can 'Peace-Building approaches' (such as Peace Circles and Peace Initiatives) be adapted to safely and effectively shift harmful norms and reduce violence experienced by LBT women and transgender men and improve positive by-stander action?
- Has the project improved the accessibility, LBT sensitivity, and inclusiveness of referral pathways, OCMC, and local service providers for LBT survivors of violence?
- Has the project resulted in improved mental health and well-being, and improved confidence, capacity, sense of agency, and leadership skills of LBT women and transgender men involved in the project?
- Has the project resulted in positive shifts in social relationships and family dynamics for LBT individuals who engaged in this intervention?

Progress in 2025-2026

The project received an extension to its Inception Phase, due to political instability in Nepal, which hindered engagement with government stakeholders, limited youth willingness to speak out against corruption, and caused emotional distress among staff and communities. Travel restrictions and difficulties convening gatherings delayed implementation to 2026. Despite these challenges, partners have shown strong resilience and commitment, and the Grantee Partnership Team have been working collaboratively to commence the project and evaluation by mid-2026.

Priorities for 2026

The inception phase activities were completed by December 2025. The general elections held in March also led to slowing down of some the early activities of the implementation phase. In anticipation of this, the organisations had adjusted their workplan in order to frontload key activities, prioritising their completion in Jan–April 2026. This will ensure that the current momentum is maintained and that the programme experiences as little interruption as possible during the election season.

In 2026, a core focus will be capacity strengthening of team members, supporting programme delivery and strengthening monitoring. This will include regular monitoring of project activities, and two field monitoring visits will be conducted in the project district over the next six months. Capacity strengthening will be delivered through a series of trainings on gender, conflict and peacebuilding (3 days), non-violence and conflict transformation (2 days), power and patriarchy (2

days), and dignity and transformative peace leadership (3 days). The teams will also be increasing community outreach through the formation of 15 peace groups across 4 districts and strengthening their capacities through regular community level engagement. Peace volunteers will also initiate the designing bystander intervention awareness through peace groups and other community engagement processes.

The project will also advance organisational accountability and safeguarding measures. Planned policy updates include exchange gain, record retentions, and documentation requirements. In addition, mandatory safeguarding and SEAH training will be delivered bi-annually to staff, partner organisations, volunteers, peace ambassadors, and other associated individuals.

Evaluation priorities for 2026 have included working collaboratively with the implementing partners to design the evaluation so it is fit-for-purpose to the intervention.

10. Safe To Be Me

Nigeria, Innovation Grant (April 2025 – March 2028)

Partners Involved

Grantee Partners: Vision Spring Initiatives (VSI) and Centre for Health Education and Vulnerable Support (CHEVS)

Research Partners: University of Ibadan and John Hopkins University

Brief Project Summary

The Safe To Be Me project addresses both intimate partner violence and non-partner sexual violence, particularly sexual harassment amongst diverse women at the University of Lagos. It seeks to challenge harmful gender norms through an adapted Values Clarification and Attitudes Transformation (V-CAT) model for diverse audiences. It also tackles systemic barriers faced by diverse women, including invisibility and exclusion from research, policy, advocacy, and funding for VAWG prevention and response, contributing to the broader goal of ending violence against women and girls in all its forms.

Research Questions

1. What is the effectiveness of programming (V-CAT model) on VAWG and attitudes that sustain VAWG among women in all their diversity?
2. What is the prevalence of VAWG among diverse women in the University of Lagos?
3. What is the effectiveness of programming (V-CAT model) on attitudes that sustain VAWG among diverse women?
4. What is the effectiveness of protected peer support spaces and organising on inclusion and movement strengthening?
5. What is the impact of the demonstration of engagement/inclusion of diverse women's and community's priorities on WRO and VAWG agendas, and engagement in agenda setting?

Progress in 2025

The project inception period was April to October 2025. During the inception meeting in September 2025 attended by colleagues from VSI, CHEVs, and technical advisors under the WW2 programme, the team shaped the programme's strategic and technical direction, refined their Theory of Change, and produced a clear, strengthened VCAT + curriculum methodology. This revised methodology focuses on behaviour change rather than attitude change and is aligned with best practice from other interventions.

Priorities for 2026

In 2026, the project will prioritise finalising and validating the curriculum for both Higher Education Institutions and diverse women, ensuring contextual relevance, safety, and fidelity to violence-prevention principles. A key focus will be supporting the research team to conduct baseline research ahead of implementation, generating the evidence needed to inform delivery and measure change. Following the baseline, partners will undertake a phased roll-out of the VCAT-curriculum-based interventions in higher education institutions (with students and lecturers) and with diverse women, aligning all activities with safety and risk-mitigation protocols.

Alongside implementation, the project will deepen its engagement with Women's Rights Organisations, feminist groups, and organisations working on inclusion of diverse women to build and sustain allyship, strengthen movement-building, and co-create referral pathways that connect beneficiaries (particularly diverse women) to justice, psychosocial support, and trauma-informed care. The team will also convene annual in-person Healing Justice and collective care sessions for diverse women to centre wellbeing, resilience, healing and peer connection across participant cohorts.

11. Familia Imara

Tanzania, Scale Grant (May 2025 – April 2028)

Partners Involved

Grantee Partners: Global Communities and Kivulini Women’s Rights Organisation working in collaboration with Government of Tanzania.

Research Partners: Emory University and National Institute for Medical Research (NIMR)

Brief Project Summary

The Familia Imara project builds on the evidence from the original Engaging Fathers for Effective Child Nutrition and Development in Tanzania (EFFECTS) trial (2018-2021), which demonstrated positive impacts on child nutrition, child development, parenting practices, and reduction in intimate partner violence (IPV).

Now being scaled through What Works II, Familia Imara is adapting and expanding this gender-transformative parenting and nutrition programme to prevent violence against women and girls through a gender-transformative approach that engages mothers and fathers, works with community leaders and local authorities, and builds the capacity of both community health workers and social workers to support survivors of violence. It will also support the integration of the programme into government guidelines. Core activities include delivering a group-based nurturing care curriculum through separate and mixed-gender peer groups, adapting the EFFECTS intervention to add and strengthen violence prevention content, training and mentoring community health workers, and collaborating with government ministries in line with the National Plan of Action to End Violence Against Women and Children. It is being evaluated through a two-cohort cluster randomised control trial (RCT). In doing so, it will contribute to the global evidence on how to scale up parenting programmes to prevent both violence against women and children while improving child nutrition and development outcomes.

Research Questions

1. What is the effectiveness of Familia Imara in reducing IPV and violence against children using a two-cohort cluster RCT?
2. What is the effectiveness of Familia Imara in improving child development and nutrition outcomes using a two-cohort cluster RCT?
3. What factors influenced the implementation and scaling process of Familia Imara?

Progress in 2025

The project held a national Inception meeting that aligned all partners (What Works II, Global Communities, Kivulini WRO) and Government of Tanzania ministries. Implementation was expanded to four regions and 15 councils, revising the total reach to 54,880 direct participants and 321,000 indirect participants. The team completed and validated the GPEA to inform program design and advocacy, finalised an advocacy strategy aligned with National Plan of Action NPA-VAWC II, and completed the two-cohort RCT design and research protocol. They also finalised the Theory of Change, logframe, PMP, and MEL framework. The curriculum was adapted (added IPV/VAC sessions, reduced to 20 sessions, improved GESI). Piloting of adapted curriculum was completed, and the resulting formative research provided highly informative insights that guided further curriculum refinement and implementation approaches. Finally, a tri-ministerial draft MoU was developed to strengthen coordination and government ownership.

Priorities for 2026

In 2026, the project will focus on project roll out, starting with the training of Government of Tanzania ministry trainers-of-trainers. The team will recruit and train 216 community health workers across 108 villages for Cohort 1. This year, the project will also develop and roll out the digital MEL system for data collection, analysis, and dashboarding. Baseline assessments will be conducted in March, roll out of full implementation of Cohort 1 activities during the year, and endline assessments in early 2027 for Cohort 1.

12. Shay'indlela

South Africa, Innovation Grant (September 2024 – August 2027)

Partners Involved

Grantee Partners: Soul City Institute for Social Justice (SCI)

Research Partners: WITS School of Public Health and Research and Training for Health and Development

Brief Project Summary

Soul City Institute's Shay'indlela (Pave the Way) initiative is a multi-level intervention aimed at preventing violence, particularly partner (dating) violence (IPV), shift attitudes towards transactional sex and improve mental health among adolescent girls and young women (AGYW) aged 14-17. The intervention is being implemented in South Africa, in the Ekurhuleni District within the Gauteng Province. It combines mass multimedia components (13-part TV drama series, radio and social media) with community mobilisation strategies such as after-school Rise Clubs, parenting workshops and Watch Parties (with a facilitated discussion) to empower young women and their communities (parents, boys and men), challenging harmful norms and behaviours while promoting safer, healthier relationships. Its effectiveness is being evaluated through a cluster randomised control trial (RCT).

Research Questions

1. What effect does Soul City Institute intervention, including edutainment and community mobilisation (TV drama series, radio, social media, Rise Clubs, parenting workshops, Watch Parties), have on partner violence (IPV), mental health (MH) and knowledge and attitudes towards transactional sex (TS) among adolescent girls in Grades 8-10 over 18 months of follow up in Ekurhuleni district?
2. What is the effect of the TV drama and other media on IPV, MH and TS among adolescent girls in the control arm from baseline to endline?
3. What is the added effect of the parenting workshops on adolescent girls' outcomes when parents are fully engaged vs partially or not engaged?
4. What effect does the Soul City Institute Watch Parties have on social norms, beliefs and attitudes among adolescent boys (14-18 years) and men (19-40 years)?

Progress in 2025

SCI successfully secured the buy-in from school management teams in the three circuits of the Department of Education in Gauteng to support the implementation of the Shay'indlela Programme within their schools, with 62 schools recruited (half with receive the Shay'indlela

intervention and the other half a short intervention focusing on sexual and reproductive health and rights). Staff appointments have been successfully completed, and all programme staff onboarded through feminist-grounded orientation and capacity building workshops. The curriculum for the girls’ clubs (Rise Clubs) and the parenting intervention was tested successfully with minor facilitation adaptations. TV drama scripts were advanced through revisions and casting, and SCI strengthened regional advocacy through participation in the EEI Convening in Eswatini. Baseline data collection was completed ethically despite logistical challenges. The baseline study focused on adolescent girls in Grades 8 and 9, aged 14 - 16 years, in selected schools. Social workers were recruited to provide support to adolescents who were flagged in the baseline data collection as having experienced violence and /or mental health challenges.

Priorities for 2026

Priorities for 2026 include but are not limited to: supporting adolescents during implementation; rolling out the social mobilisation in schools; finalising the TV drama production; launching the actual TV drama in August 2026; and rolling out the watch parties (dialogue-based engagements to discuss the key issues and to reinforce the messaging from the TV series).

Summary of Baseline Findings

Baseline data were collected from 1,213 adolescent girls attending the 62 schools included in the study. The mean age was 14.6 years and 70.6% were in Grade 9. More than one-third (38.6%) were moderately to severely food insecure. Less than half (46.3%) had ever had a romantic (dating) relationship and 5.6% had ever had vaginal, anal or oral sex.

IPV among girls who reported ever having a romantic relationship (n=610) and transactional sex among those reporting vaginal, anal or oral sex (n=68)

Outcome	N (%)
Physical IPV	134 (22.0)
Sexual IPV	91 (14.9)
Physical and / or sexual IPV	177 (29.0)
Emotional IPV	269 (44.1)
Depression symptoms	735 (55.8)
Anxiety symptoms	298 (22.6)
PTSD symptoms	200 (15.2)
Suicidality	693 (52.7)
Mental Health (dep, anxiety, suicidality)	745 (56.6)
Transactional sex among ever sex	21 (30.9)

Of the adolescents who have had a romantic relationship, 29% have experienced physical and / or sexual IPV and 40.1% have experienced emotional IPV. Of the sixty-eight adolescent girls who

reported ever having sex, 30.9% reported engaging in transactional sex. More than half (56.6%) of the adolescents reported moderate to severe mental health symptoms (depression, anxiety and or suicidality). Over half (55.8%) reported probable depression, 22.6% reported probable generalised anxiety, 15.2% probable PTSD and 52.7% suicidal ideation.

Key Learnings

- These baseline results show that there is enormous opportunity for IPV prevention programming among this age group as only half of the adolescents had experienced a romantic relationship and less than 6% have had sex.
- Among adolescents in non-sexual romantic relationships, violence is high, with IPV rates amongst this age group similar to rates experienced by adult women.
- Multiple mental health challenges were reported by adolescents in this sample. More than half the adolescents had probable depression, and a similar percentage reported suicidal ideation or attempts. This highlights the need to address mental health concerns in violence prevention among adolescents.

13. Safe Signs

South Africa, Transition to Scale Grant (October 2024 – October 2027)

Partners Involved

Grantee Partners: Reach Digital Health, IPAS African Southern Region, and Lovelife

Research Partners: Human Science Research Council (HSRC)

Brief Project Summary

The SafeSigns project received an Innovation Grant from the What Works II initiative to implement an evidence-based Chatbot intervention, a promising modality for directly engaging girls and young women via WhatsApp, a space they consider accessible, acceptable and private on healthy relationships. They will deliver a carefully scripted, pre-tested chatbot to equip adolescent girls and young women with skills for identifying harmful behaviours in dating relationships; encourage them to seek the social and institutional support they desire; build self-efficacy and agency to make their own choices; and foster equitable gender norms and beliefs and awareness to services. The chatbot will engage the users over a 9-day period covering 8 modules and quizzes of each module. The app is designed in a way that users get quizzed on the previous day's module before they can start the next module. This intervention will also enable timely connections to psychosocial support when early signs of abuse manifest. Its effectiveness will be evaluated through a randomised control trial (RCT).

Research Questions

How effective is the SafeSigns digital chatbot in reducing dating violence experienced in the past three months among adolescent girls and young women (AGYW) aged 15-18 in the Gqerberha - Eastern Cape, South Africa?

Progress in 2025

In 2025, the project adapted the ChattyCuz application based on formative research to create the SafeSigns prototype for girls aged 15–18 by adding audio features, avatars and age-appropriate content for the target age group. To ensure responsiveness, further usability testing was conducted in October with 54 AGYW in Gqerberha. This testing informed critical refinements, including streamlining onboarding for clarity, implementing a text-to-audio toggle for flexible engagement, and expanding the "Hot Topics" menu to include self-confidence, SGBV, and gender justice. These updates, shaped by the AGYW and the Community Advisory Group (comprising of young people and individuals who work with young people), are being finalised by the Technical team as they

prepare for the community rollout with 20 champions who participated in the usability testing and continuous mentoring sessions. These champions will play a central role in supporting the rollout of the SafeSigns chatbot in their communities, which will be the cornerstone of the implementation.

A National Advocacy Strategy has been drafted using findings from the Gendered Political Economy Analysis, and the team has engaged in multiple advocacy forums, including GBV meetings linked to the South Africa G20 Summit, HIVOS Regional Convening on GBV, and the Centre for the Study of Violence Conference in South Africa, UNESCO Global Symposium on Technology and GBV, National Teenage Pregnancy Indaba and has initiated a cost-effectiveness study. Challenges remain in including trans girls due to parental resistance, prompting ongoing work to establish a clear, inclusive, and ethically sound approach to eligibility and consent.

Priorities for 2026

In 2026, the SafeSigns project will move from refinement to implementation, focusing on finalising the chatbot improvements ahead of the deployment scheduled for May. Recruitment activities will begin with a target reach of 3,000 AGYW, accompanied by a coordinated launch of the chatbot intervention. Another priority for early 2026 is the baseline data collection, before moving to the initial stages endline towards the end of the year.

14. Imarisha Mahusiano

Kenya, Transition to Scale Grant (September 2024 – August 2027)

Partners Involved

Grantee Partners: Centre for Rights Education and Awareness (CREAW) and Agency for Empowerment of Pastoralists (AFEOP)

Research Partners: International Centre for Reproductive Health-Kenya and Johns Hopkins University

Brief Project Summary

CREAW was awarded a Transition to Scale Grant to deliver a curriculum for heterosexual couples focused on household power dynamics, promoting non-violent, healthy, and equitable relationships through individual-level social norms change. The curriculum is an adaptation of the Indashyikirwa Couples Curriculum which engages couples in a structured dialogue session. The model uses peer-to-peer learning and media tools to support accountability and sustain new norms. The team adapted the Imarisha Mahusiano model into radio dramas and listener groups to diffuse the curriculum among couples, opinion leaders, and communities. The radio programme will enable couples to learn and transform attitudes and behaviours, while radio broadcasts will extend reach and reinforce change across the wider community. The programme is being evaluated through a randomised control trial (RCT).

Research Questions

1. What is the impact of Imarisha Mahusiano (IM) on gender equity, healthy conflict resolution and IPV for couples receiving programming compared to no programming?
2. What is the effect of radio listening groups on community-level gender equity, non-violence attitudes and IPV at a household level in households exposed to radio programming within the context of an IM intervention?

Progress in 2025

The project made good progress in 2025, beginning with inception meetings in Meru and Tharaka Nithi counties to familiarise the project to both local and national government officials and communities. Pre-screening of couples, alongside collection of baseline data, are in place. Master facilitators were identified and trained in both counties, and the project was formally launched in Meru. Additional achievements included the development of production of the first episode of the radio drama, the establishment of a Content Advisory Group (CAG), and the onboarding of Mwendantu FM as the project's local radio partner.

Priorities for 2026

In 2026, the project will finalise all the radio episodes, begin pre-testing and piloting the radio drama. It will also offer the 22-session couples' curriculum to couples on a weekly basis across Meru and Tharaka Nithi counties as well as hold feedback meetings with trained couples and facilitators to monitor delivery of the sessions. Additional priorities include selecting Community Diffusion Group (CDG) facilitators from couples participating in Imarisha Mahusiano programming, training these facilitators, and FM stations on social media engagement. The team will also finalise the adaptation of the opinion leaders' curriculum, print training manuals and other facilitation materials for opinion leaders training, roll out the opinion leaders' curriculum, and support County Technical Working Groups on SGBV.

Another priority for 2026 is the finalisation of the baseline research for couples who will be part of the intervention and midline for couples in the first stream.

15. Building Local Resilience in Syria - VAWG Prevention Pilots

Syria, Helpdesk TA to FCDO Programme (May 2022 – March 2028)

Partners Involved

Grantee Partners Consortium 1: Syria Resilience Initiative (SRI), including CARE and Mercy Corps.

Grantee Partners Consortium 2: Food and Agriculture Organisation of the United Nations (FAO) and United Nations Population Fund (UNFPA)

Research partner: International Security and Development Center (ISDC)

Brief Project Summary

Through the Ending Violence against Women and Children (VAWC) Helpdesk, which forms part of the What Works to Prevent Violence initiative, technical assistance is being provided to support the integration of VAWG prevention pilots into an FCDO-funded food security and livelihoods (FSL) programme called Building Local Resilience in Syria (BLRS). The pilots combine social and economic empowerment curricula with community-level interventions to prevent intimate partner violence (IPV) and child marriage.

PILOT 1: SRI	PILOT 2: FAO and UNFPA
<p>The VAWG intervention is delivered to women participating in FSL activities, including micro-grants and vocational training to establish Small and Medium Enterprises.</p> <p>The two VAWG intervention elements are:</p> <ol style="list-style-type: none"> 1) An adaptation of the Indashyikirwa couples' curriculum with additional sessions on children's rights and child marriage, implemented in Phases 1 and 2 of the programme. 	<p>The VAWG intervention is delivered to women and men participating in FSL activities, including Farmer Field Schools and agro-processing vouchers.</p> <p>The two VAWG intervention elements are:</p> <ol style="list-style-type: none"> 1) An adaptation of IRC's Economic and Social Empowerment (EASE) couples' curriculum, integrating stronger gender transformative content on power, communication and conflict resolution, and sessions on child marriage.

PILOT 1: SRI

- 2) An adapted version of the Indashyikirwa community mobilisation intervention, where a selection of couples becomes gender champions and shares messaging with community members. This has only been piloted in Phase 2.

These elements are complemented with training and support to Women's Committees to enable stronger psychological first aid to survivors and referrals to services.

Progress in 2025

Phase 1 of the programme ended in 2025. The roll out of the couples' curriculum was completed in Al-Hasakah, North-Eastern Syria, and ISDC completed the endline of the cluster randomised controlled trial. SRI began Phase 2 activities in 2025, starting the roll out of the couples' curriculum with a new cohort of couples, and designing and piloting the community intervention with gender champions. Work with Women's Committees also continued.

Priorities for 2026

The BLRS Phase 2 contract for SRI was terminated prematurely, with all programming due to close in March 2026. SRI is currently completing all ongoing activities and, in partnership with ISDC, is developing further programme learning including conducting follow-up research with couples and community members and developing learning outputs and briefs.

PILOT 2: FAO and UNFPA

- 2) The roll out of Dimitra Clubs, FAO's flagship Community Action Group (CAG) approach, to support communities to identify and implement solutions to IPV and child marriage.

These elements are complemented with an adapted EAŞE business skills curriculum for women and VAWG response services, the latter led by UNFPA.

Progress in 2025

Phase 1 of the programme ended in 2025, with the roll out of EAŞE and Dimitra Clubs ending in Homs and Rural Damascus. ISDC completed the endline of the cluster randomised controlled trial with couples participating in EAŞE. FAO's evaluation of Dimitra Clubs is currently being finalised. FAO also completed a small pilot of EAŞE with female breadwinners who also experience economic violence at the hands of other family members.

Priorities for 2026

Learning from Phase 1 and adaptations are currently underway, with plans to roll out Phase 2 of the intervention in new communities in Rural Damascus and Aleppo. The pilot with single women and women in female-headed households is being further adapted and scaled up. ISDC will conduct a post-endline evaluation with Phase 1 couples and a baseline with Phase 2 couples and women breadwinners.

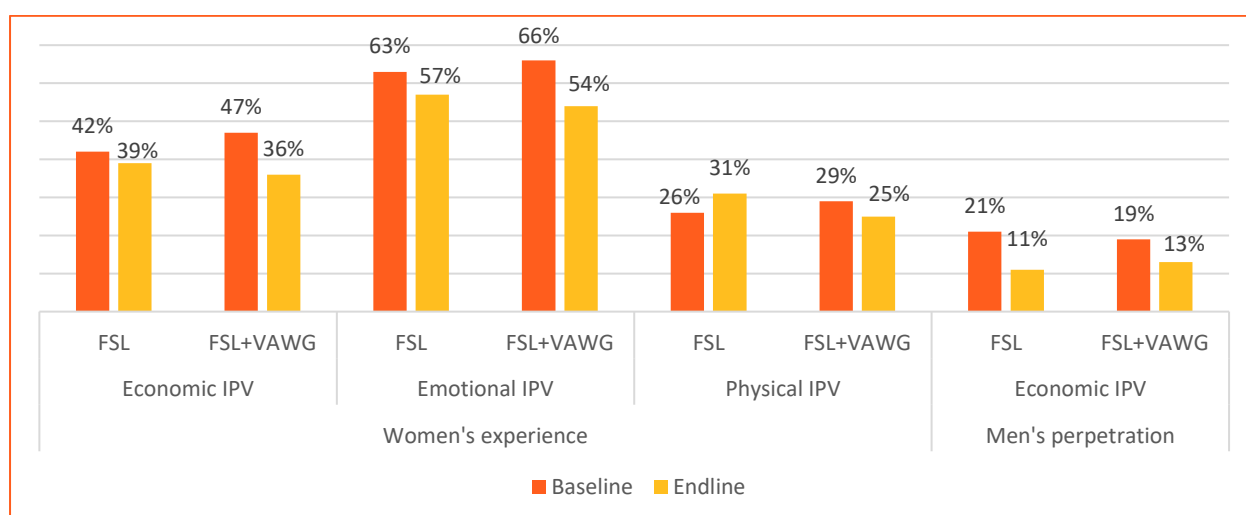
Summary of Endline Findings

Research Questions

What are the impacts of the FSL+VAWG pilots compared to the FSL-only groups on perceptions of gender norms, household dynamics, women's empowerment, joint decision making, attitudes towards child marriage, economic outcomes (engagement in income generating activities, time spent on work and food security), women's experience of IPV and men's perpetration of economic IPV?²

SRI Results

A total of 610 couples (300 in the FSL group and 310 in the FSL+VAWG group) participated in the SRI endline evaluation. The graph below shows baseline and endline prevalence of past-year IPV among women and men in the control group (FSL) and intervention group (FSL+VAWG). The intervention had no significant impact on women's past-year experience of economic, emotional or physical IPV. However, there was a significant reduction in the frequency and severity of physical IPV, particularly among those who attended more than 17 sessions of the curriculum. There was no impact on men's perpetration of economic IPV.

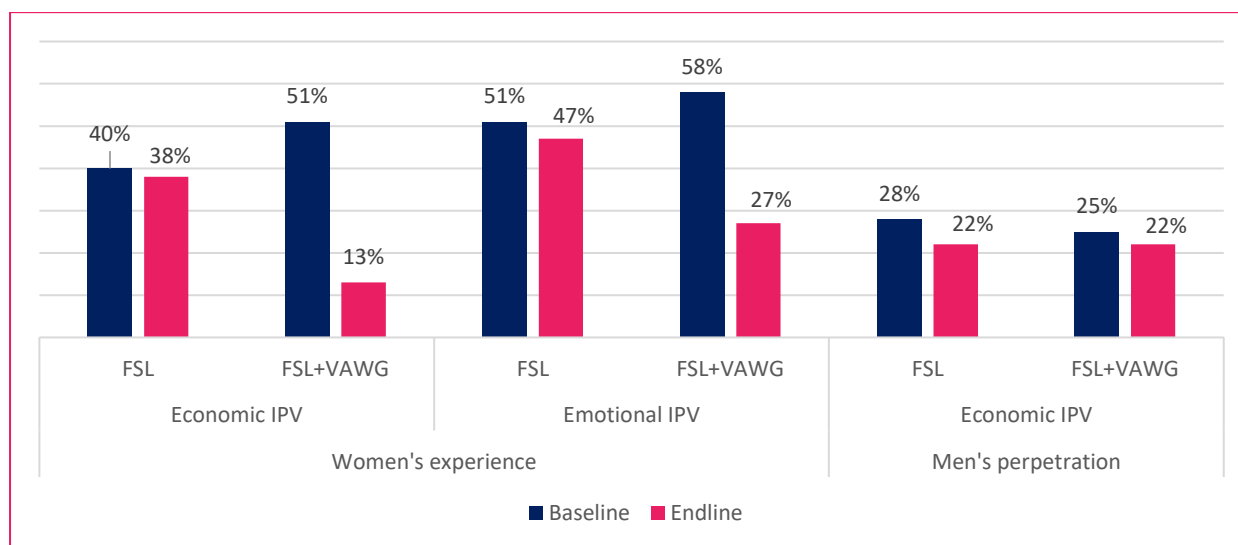


The VAWG intervention had positive impacts on secondary outcomes, improving women's participation in decision-making in the household and gender equitable attitudes among women and men, including attitudes around reducing acceptance of child marriage, and women's tolerance of violence and shame in help-seeking. These impacts were more pronounced among those who attended a higher number of sessions. The VAWG intervention did not impact food security or livelihoods outcomes.

² SRI's evaluation measures women's past year experience of emotional, economic and physical IPV, and FAO/UNFPA's evaluation measures women's past year experience of emotional and economic IPV.

FAO/UNFPA Results

A total of 581 couples (273 in the FSL group and 308 in the FSL+VAWG group) participated in the FAO/UNFPA endline evaluation. The graph below shows baseline and endline prevalence of past-year IPV among women and men in the control group (FSL) and intervention group (FSL+VAWG). The evaluation found a significant reduction in women's experience of economic and emotional IPV in the FSL+VAWG intervention group when compared with the FSL-only group. There was no significant change in men's perpetration of economic IPV; however, there was greater alignment in reports of economic IPV between women and men in couples in the FSL+VAWG group at endline.



The VAWG intervention also had positive impacts on secondary outcomes, improving women's participation in decision-making in the household, particularly about making major purchases and working outside the home. The intervention reduced women's daily time on domestic work and improved women's gender equitable attitudes, including towards child marriage, but no attitudinal change was observed for men. There were also improvements in women and men's wellbeing and feelings of being cared for by their spouse. There were no changes to household income.

Key Learnings

The two BLRS VAWG pilots had varying impacts on IPV. While SRI's pilot impacts on IPV were limited, the FAO/UNFPA pilot was successful in reducing women's experience of IPV although no reduction was observed in men's perpetration of economic IPV in either programme. Nevertheless, both pilots had significant positive impacts on some secondary outcomes, including attitudinal and empowerment outcomes, and the SRI pilot observed stronger results for couples who attended more sessions. These results suggest that economic and social empowerment interventions integrated into FSL programmes show early promise in improving outcomes for women in Syria. Where lack of impact was observed, this is potentially linked to entrenched patriarchal norms and the ongoing challenges of implementing prevention programming in conflict-affected settings.

16. Al Murunah+

Jordan, Egypt, Occupied Palestinian Territories, Lebanon - Helpdesk TA to FCDO Programme (January 2024 – June 2026)

Partners Involved

Grantee Partners: International Water Management Institute (IWMI)

Research Partners: Social Development Direct

Brief Project Summary

Al Murunah+ is a gender-transformative extension of the FCDO-funded Al Murunah climate resilience programme in Lebanon, Egypt, Jordan, and the Occupied Palestinian Territories. It addresses evidence that intimate partner violence and community backlash limit women's participation in climate adaptation and weaken household resilience to climate shocks. Through four pilot initiatives, Al Murunah+ integrates GBV prevention and women's economic empowerment into nature-based water management, strengthening households' and communities' capacity to adapt to climate change. The VAWC Helpdesk provides technical assistance to partners, ensuring the design and implementation is informed by best practice.

Research Questions

- To what extent has the Al Murunah+ project contributed to positive changes in gender norms, roles, and practices within households?
- To what extent has the Al Murunah+ project contributed to creating more gender equitable leadership and decision-making structures?
- To what extent has the Al Murunah+ project strengthened women's economic empowerment and climate smart agriculture skills, and how has this contributed to household resilience?
- What are the factors that have enabled and hindered progress towards the project's intended outcomes across the four pilot countries? Is there evidence to suggest that these results are sustainable?

Progress in 2025

Adaptation and implementation of the EAŞE curriculum across all 4 countries with the first cohort of couples, and development of the content of the opinion leaders' sessions. Implementation has faced delays due to security challenges and some early community resistance to mixed-sex groups in Jordan. Following further community consultations, Jordan was able to go ahead with mixed-sex groups. A total of 688 couples registered to take part in the EAŞE sessions, only 39 couples withdrew and 902 individuals attended all 10 sessions.

Priorities for 2026

Teams will complete the roll out of the EAŞE curriculum and begin the roll out of the opinion leaders' sessions and the economic interventions. If funding continues, a second cohort of couples will receive the full implementation package. The TA team will also produce a series of learning pieces. The endline evaluation will also be conducted.

Summary of Baseline Findings

Baseline data collection was carried out between October and November 2025 in Jordan, Lebanon, and OPT. A decision was made in consultation with FCDO to not go ahead with baseline data collection in Egypt, due to feasibility, security and ethical constraints. Interviews and workshops were conducted with 105 couples, 34 opinion leaders, 13 community stakeholders, and 97 additional project participants. Analysis and reporting are underway. Key (early) findings include:

- Traditional gender norms prevail, with domestic and unpaid care work seen as the responsibility of women, and men viewed as responsible for providing for the household.
- Emotional and economic IPV were reported across all three countries and are often not recognised as violence. Disclosures of physical IPV were especially prevalent in Lebanon.
- Women face several barriers to accessing work at individual, household, and community levels, including restricted mobility and community stigma.
- Women's inclusion in decision-making processes in climate-smart farming systems and value chain is limited and significantly constrained by gender norms. Similarly, at the household-level, men retain more financial-decision-making power, particularly for large purchases.
- Several households are facing severe economic hardship caused by economic or conflict related crises and climate-related shocks

Learning

Flexibility is key: Recognising the fragile and rapidly changing conditions of some sites, both implementation and evaluation have involved regularly assessing feasibility and ethical considerations in consultation with FCDO and national stakeholders. This has resulted in the need to work in an agile and flexible way, including adjusting plans as needed to ensure activities remain safe, inclusive, and appropriate.

Context is everything: All data collection tools, protocols, and operational plans are grounded in local knowledge and shaped by the cultural, social and political realities of each setting. National partners and locally-based WROs played a central role in adapting existing materials and the EAŞE curriculum, with TA providing guidance and support.

17. Gender-Based Violence Prevention in South Sudan (GBVPSS) Programme

South Sudan, Helpdesk TA to FCDO Programme (April 2024 – 2027)

Partners Involved

Implementing Partners: Gender Empowerment for all South Sudan (GEFASS), Women for Justice and Equality (WOJE), African Initiative for Rural Development (AIRD), Eve Organisation, Support for the Empowerment of Women and Their Rights for Development (Steward Women), Titi Foundation and UNICEF³

Learning Partnership: Social Development Direct (SDDirect)

Brief Project Summary

The GBV Prevention Programme in South Sudan (GBVPSS) is a five-year project funded by FCDO, aimed at developing and delivering effective approaches to counter harmful norms that sustain gender-based violence against women and girls across South Sudan. It supports the UK's goal that South Sudanese women and girls' safety, dignity and agency are improved, and the intended outcome of the programme is that GBV is reduced within the targeted communities. To support the effective implementation of the programme and to further generate learning on GBV prevention in humanitarian and conflict settings, What Works II provides TA support to accompany the programme through the Ending VAWC Helpdesk.

Progress in 2025

In 2025, GBVPSS showed strong gains in access to specialised GBV services, including case management and psychosocial support exceeding the target by 41%, due to the creation and expansion of Women and Girl Friendly Spaces (WGFS) and community care activities. The programme also completed its first round of *Communities Care: Transforming Lives and Preventing Violence*, generating new learning on shifting harmful social norms. During the first round of implementation of *Communities Care*, the programme engaged 376 dialogue participants and reached over 11,000 community members through public events and localised action plans. What Works TA (through the Helpdesk) has compiled data, evidence and learning from the first round of implementation in a Learning Report: [Progress and Learning on Transforming Social Norms Around Gender-Based Violence in South Sudan](#).

The Learning Partnership Advisors also worked with UNICEF to deliver a feminist leadership

³ Titi Foundation and Steward Women have since discontinued and UNICEF is scoping for new partners to join in the implementation.

programme, developed for the Executive Directors and Programme Managers of WLO partner organisations, combining workshops and coaching, which received very positive feedback, increased knowledge of feminist leadership core concepts/approaches and confidence gains in relation to applying these to their own practice. To address gaps in working with adolescent girls including those with disabilities, UNICEF and the Helpdesk supported curriculum development to build girls' knowledge, life skills, and access to GBV and sexual and reproductive health rights (SRHR) information and services. A five-day training in May 2025 prepared 25 WLO staff and UNICEF participants to implement the curriculum and UNICEF has established girl groups across nine locations. Additional support provided by the Helpdesk included a workshop on emergency preparedness (including contingency planning) for local partners.

During 2025, progress was influenced by political instability and weak governance, prompting a crucial focus on community engagement and strengthening GBV response systems at State and County levels. Planned work on women's economic empowerment did not proceed due to reduced FCDO funding and is likely to be removed from the Theory of Change.

Priorities for 2026

In 2026, the team will convene the first annual GBVPSS learning event, bringing partners together to connect and reflect on progress made during the programme's first year which will be consolidated into an annual learning report. It will also provide an opportunity to update and simplify the GBVPSS Theory of Change to reflect current evidence and realities, and to identify successes, challenges, unintended consequences, and opportunities to strengthen implementation in year two.

18. Technology-facilitated GBV Portfolio

The What Works: Impact at Scale Technology-facilitated GBV (TFGBV) Portfolio comprises of five grants administered through the Sexual Violence Research Initiative (SVRI)'s established grant-making process—one way that What Works is strengthening existing mechanisms for global evidence generation on violence against women and girls (VAWG). SVRI is a key resource partner within the Research Consortium, bringing extensive global research networks and strong convening power. TFGBV is an emerging area in VAWG research and What Works is committed to build evidence in this gap area. The following are the research grants being supported through this project component:

Active Parental Mediation Skills for the Prevention of Online Violence Against Children and Adolescents: Pilot of a Chatbot in Colombia

This project, being implemented by Aulas en Paz and Sistema Futura, aims to design and pilot an evidence-based intervention to reduce the risks and harms that children and adolescents face in digital environments, particularly in relation to online child sexual exploitation and abuse. It builds on findings from the Columbian nationally representative study "*Risks and Opportunities for Children and Adolescents on the Internet in Colombia*" (Universidad de los Andes, Tigo, Aulas en Paz, 2024), which revealed widespread exposure to harmful online content and a negative association between these risks and youth mental health. The study found that active parental mediation—such as guiding, discussing, and setting rules around internet use—was linked to lower exposure to online risks. However, very few caregivers reported using such strategies, and digital literacy levels among parents, caregivers, and teachers were generally low. To address this gap, the project is developing an accessible, scalable programme delivered through WhatsApp (via chatbot or group messages) that provides parents and caregivers with engaging multimedia content (videos, audio, images, interactive activities) to build skills and encourage the adoption of active mediation practices.

DRAGON-Shield Colombia: Adaptation and Prevention of Online Grooming

DRAGON-Shield Colombia is an applied research and capacity-building initiative that adapts an advanced online training platform (originally developed at Swansea University) to strengthen the prevention of online grooming in Colombia. In response to increasing digital risks and limited specialised tools in the region, the project aims to ensure that child-protection professionals are equipped with culturally relevant, context-specific knowledge and skills to identify and respond to grooming tactics targeting children. The project is jointly implemented by Red PaPaz and Swansea University, with the support of the National University of Colombia. The project unfolds in three

phases. The first involves a participatory diagnostic process through focus groups with professionals and with children and adolescents, identifying gaps, perceptions, and contextual needs in Colombia. The second phase focuses on the translation and cultural-linguistic adaptation of DRAGON-Shield, integrating local insights and regulatory considerations. The final phase consists of a pilot implementation with 20 professionals, gathering feedback to refine the platform and ensure its usability, relevance, and impact. The expected outcome is a fully adapted, validated Spanish-language version of DRAGON-Shield to the Colombian context, contributing to stronger national prevention efforts and to global evidence on child sexual exploitation online in low- and middle-income countries.

Gender-based violence and digital: Women with Disabilities' experiences and their practices of safety and wellbeing in South Africa

The project is a collaborative study between the Division of Disability and Rehabilitation Studies at Stellenbosch University under the Leadership of Prof Lieketseng Ned and Canada Excellence Research Chair—Health Equity and Community Wellbeing at Toronto Metropolitan University under the leadership of Prof Karen Soldatic. It draws on three methodologies to explore the intersection of disability and TFGBV in South Africa: 1) a scoping review on TFGBV in LMICs, 2) a quantitative cross-sectional online survey in South Africa to explore the level and intensity, prevalence, and frequency of TFGBV targeted at women with disabilities, and identify potential resources women use to respond to TFGBV, and 3) a qualitative study (using interviews with women with disabilities in South Africa) to document lived experiences. These findings are being used to co-develop educational resources for women with disabilities to increase their agency and self-confidence in addressing TFGBV.






Mtandao Salama in Tanzania

Mtandao Salama—which is implemented by Muhimbili University of Health and Allied Sciences [MUHAS] and WiLDAF Tanzania—is a research project designed to address the growing challenge of TFGBV, a rapidly increasing form of violence exacerbated by the widespread use of digital technologies. Current research on TFGBV uses inconsistent definitions and methods, resulting in an incomplete picture of its true scale. A key obstacle to effective prevention and response is the lack of a standardised, validated tool to measure the full range of technology-facilitated violence against women and girls. This project addresses that gap by creating and validating a comprehensive TFGBV measurement tool. The study is being implemented in two phases using a mixed-method design. Phase 1 involves a systematic review, stakeholder engagement, cognitive interviews, and psychometric validation of the tool among university students. Phase 2 will apply the validated tool to estimate the prevalence of TFGBV among a sample of about 400 female students in selected higher learning institutions in Tanzania. This project will produce strong evidence to guide TFGBV

policy design, prevention, and digital safety initiatives.

Unpacking the Frame: Addressing image-based sexual abuse in India

This study, implemented by Unpacking the Frame – India, is using a range of qualitative methods to understand the experiences and harms that women, specifically, sex workers, queer and trans persons, and women with disabilities, face related to image-based sexual abuse. Through mapping of the current state of knowledge about image-based sexual abuse in India, focus group discussions, individual interviews and key informant interviews, the study aims to build a granular understanding of this form of abuse as well as effective responses to it. Relevant stakeholders will be invited to participate in a speculative design workshop to collectively imagine new and effective responses to address image-based sexual abuse. Through the amplification of a range of experiences of individuals facing image-based sexual abuse and a deeper understanding of the various sites, spaces, and points of harm, stakeholders will be better equipped to address image-based sexual abuse more effectively in India.

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