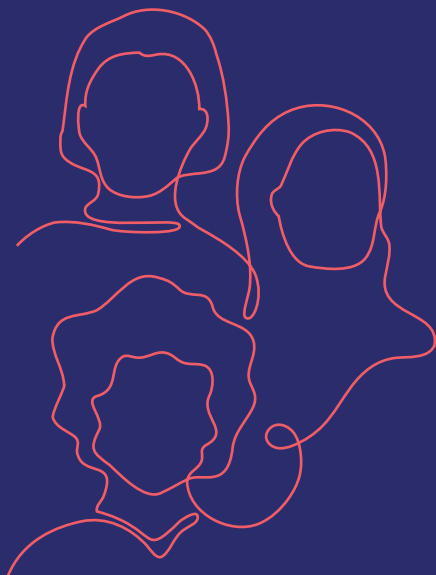




What Works II Brief

Ready for Scale: Lessons on Expanding Violence Against Women and Girls Prevention Approaches Through Civil Society and Government Partnerships



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Acronyms

CSO	Civil society organisation
CUSP	Community for Understanding Scaling Processes
DfID	UK Department for International Development
EFFECTS	Engaging Fathers for Effective Child Nutrition and Development, Tanzania
FCDO	UK Foreign, Commonwealth and Development Office
IPV	Intimate partner violence
NGO	Non-governmental organisation
PPVAWG	Play for Prevention of Violence Against Women and Girls, Pakistan
PKN	Pamodzi Kuthetsa Nkhanza (Together Ending Violence) project, Malawi
SRHR	Sexual and reproductive health and rights
ToC	Theory of Change
VAC	Violence against children
VAWG	Violence against women and girls
What Works II	What Works II initiative
WOLREC	Women's Legal Resources Centre, Malawi
WRO	Women's rights organisation

Introduction

Ground-breaking evidence from What Works I¹ and other initiatives shows that violence against women and girls (VAWG) can be effectively prevented through well-designed and carefully implemented interventions in limited settings. To date, little is known about how to scale these approaches while maintaining quality, fidelity, accountability and effectiveness. The What Works II Initiative explores how effective approaches can be adapted, sustained and ethically scaled.

Let's take a look

This brief offers a unique contribution to the understanding of 'readiness for scale' by reflecting on What Works II's grantee partners'² experiences of scaling different approaches to prevent VAWG. As projects are still underway, the paper does not assess intervention impact, but instead captures practice-based learning on what civil society organisations (CSOs), women's rights organisations (WROs), researchers, donors and governments need to consider when preparing for scale.

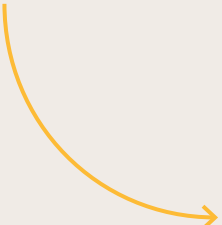
We focus on three interrelated conditions of readiness – intervention, organisational and government readiness – as the critical building blocks for scaling effective approaches to preventing VAWG. Drawing primarily on in-depth interviews with grantee partners, complemented by a review of the wider literature, this brief identifies the emerging factors that may enable or constrain whether a promising intervention can be sustainably expanded beyond its original context to achieve lasting, systems-level change. The analysis distils these insights into a set of key lessons and practical recommendations tailored for practitioners, researchers, donors and governments.

¹ The What Works I initiative (2014–2020) was a UK Department for International Development (DfID) programme implemented in 16 countries across the world. It funded and rigorously evaluated 15 approaches to test new innovative approaches to VAWG prevention across 12 countries and conducted research on VAWG in conflict and emergencies, as well as on the social and economic costs of VAWG.

² 'Grantee partners' refers to the NGOs and WROs funded by the What Works II initiative to implement VAWG prevention projects. All projects have an external evaluation and as of July 2026, 14 projects were being funded in 12 countries.

Grantee partners

The four grantee
partners interviewed
for this paper are:



Pamodzi Kuthetsa Nkhanza (PKN), implemented by the Women's Legal Resources Centre (WOLREC), Girls Empowerment Network and Human Rights for Women and Girls with Disabilities in Lilongwe and Balaka, Malawi. The project focuses on VAWG prevention and response and works through four components: SASA! Together in communities; Moyo Olemekezeka social and economic empowerment in households; a gender transformative curriculum for frontline health and security workers; and a survivor support fund.

Familia Imara, implemented by Global Communities and Kivulini. Working across 15 councils in four regions of Tanzania, the project adapts the Effective Child Nutrition and Development in Tanzania (EFFECTS) parenting and nutrition curriculum for parents of children aged 0- to two years old to include sessions on reducing VAWG and violence against children (VAC), delivered by trained government community health workers.

Play for Prevention of Violence Against Women and Girls (PPVAWG), implemented by Right to Play and Aahung in Sindh province, Pakistan. It combines Right to Play's play-based education curriculum with Aahung's sexual and reproductive health and rights (SRHR) sessions, shifting delivery from Right to Play facilitators to trained teachers.

Shay'indlela, implemented by Soul City in Ekurhuleni, South Africa. It is a multi-component intervention combining a 13-part national TV drama series, RISE clubs for girls in 30 schools, parenting sessions and watch parties engaging boys and men, building on Soul City's long-standing social and behaviour change communication work and adapting it with specific VAWG prevention elements.

Understanding pathways to ethical scale

Over the last three decades, 'scaling science' has emerged across the fields of business, global health and international development, **asking how successful pilot projects can be expanded to reach more people and to generate greater impact in ways that are equitable, sustainable and cost-effective**. Government-led scale is often viewed as essential because governments can operate across local and national levels and have delivery systems able to reach target groups efficiently.

Let's take a look

However, it also presents challenges, including shifting political priorities, uneven capacity and pressure to simplify interventions. Consortia such as ExpandNet and the Community for Understanding Scaling Processes (CUSP) have argued against a linear or purely technical understanding of scale, emphasising that in VAWG prevention, scale is inherently political and transformative, and recognising the role of women's movements and civil society in enabling long-term change at scale.

Within What Works II, scale is understood as expanding and/or deepening prevention programming and policy and the evidence base through partnerships committed to sustainable change. Four potential types of scale are identified:

quantitative – increases reach across locations or populations; **functional** – deepens impact through more comprehensive multi-sectoral packages; **organisational** – involves new organisations, partnerships and delivery systems; and **political** – works with or influences government systems so that interventions can be sustained. These types of scale may overlap within a single project and are shaped by feminist scale principles³, including community accountability, fidelity to core values and elements, meaningful involvement of originators, adequate time and funding, and careful reflection on the role of governments, international non-governmental organisations (NGOs) and WROs.

Scaling VAWG prevention without adequate readiness risks ineffective programming, loss of fidelity, staff burnout, and potential harm to women and girls and communities. Readiness therefore demands deliberate preparation before implementation, continuous learning during scale, and a commitment to balancing reach with depth, quality, safety and transformative impact.

⁴ Including from CUSP, ExpandNet and other literature.

³ Feminist principles including accountability to women and girls, power sharing, inclusivity and respect for local knowledge and context.

In the wider literature⁴, readiness for scale is understood as a set of interrelated conditions that need to be in place for prevention interventions to be expanded safely, ethically and sustainably, including:

- **Intervention readiness:** An intervention model has a clear theory of change, defined core components, practical guidance, evidence of promise or effectiveness, and a realistic plan for adaptation, supervision and quality assurance.
- **Organisational and capacity readiness:** Implementers and partners have the people, systems, skills, tools, safeguarding arrangements and learning processes needed to deliver at scale without weakening quality or accountability.
- **Partnership and ecosystem readiness:** Key actors including civil society organisations, governments, communities, originators, funders, researchers and coordination spaces are prepared to work together to implement the project, and trust is built between them. There is shared accountability, equitable collaboration, system alignment and the wider enabling environment needed to sustain change.
- **Financial readiness:** Sufficient, flexible and realistic funding is available to support quality implementation, respond to emerging needs and lessons, and avoid expanding beyond what organisations or systems can safely deliver.

Ready for scale?

Learning from practice

The following section presents the conditions needed for readiness to scale identified by the four grantee partners during the interviews.



Let's take a look

Intervention readiness for scale

i) Core elements and originators

“Programmes must be purposeful so that every component is necessary⁵.” All four projects entered What Works II with strong foundations: they drew on models and curricula that had already shown promise or effectiveness in earlier contexts. Readiness was strengthened because original implementers of projects remained involved. Right to Play, Global Communities and Soul City brought direct experience as originators of their models, while PKN was supported by the originators of the project’s four components. Curricula were piloted with small groups before being rolled out.

Readiness depends on knowing which core elements must be protected, including working with originators to identify these.

ii) Adapting and combining with new components to strengthen potential impact

Adaptation focused on strengthening models so they could work in new delivery contexts⁶. In Pakistan, the PPVAWG team combined a play-based curriculum with SRHR content and reduced 120 sessions to 60 over two years based on What Works I evidence on dose and delivery period. They also considered how it could be delivered by teachers and potentially have a stronger impact on VAWG reduction. **“We didn’t pick activities just because they were easy to deliver. Instead, we focused on what actually creates change in the classroom and then figured out how those same activities**

could realistically work when taken to scale⁷.” In Tanzania, the Familia Imara project team streamlined and strengthened the original curriculum to focus more explicitly on intimate partner violence (IPV) and VAC prevention, reduced sessions from 24 to 20, simplified language and activities, and ensured that the curriculum could be delivered through a cadre of community health workers. Soul City adapted programming to strengthen mental health support when identified as a need at baseline. For all grantee partners, adaptation continued throughout implementation to respond to practice-based learning and contextual needs.

Combine complementary components with essential elements to potentially make projects more gender transformative and strengthen impact.

iii) Risk taking to find the sweet spot between adequate duration, intensity and effect

Scaling is not an exact science and grantee partners demonstrated willingness to take calculated risks to identify the sweet spot between adequate duration and intensity, effect, feasibility and reach. **“Scale requires thinking carefully about the delivery agent – facilitators who already exist in communities – and finding the ‘sweet spot’ between the minimum effective dose and cost/effort⁸.”** Familia Imara and PKN expanded their geographical reach and both PPVAWG and Familia Imara shifted delivery from NGO facilitators to government workers. These choices created trade-offs with grantee partners having to balance what they saw as the ideal conditions for implementation with what

⁵ Familia Imara interview.

⁶ More information on how models were adapted in What Works II is available in our adaptation brief, Geare, P. and Massawe, D. (2026).

⁷ PPVAWG interview.

⁸ Familia Imara interview

government systems, schools, communities and budgets could realistically and safely sustain. PPVAWG and Familia Imara both had to package interventions so that teachers and community health workers could deliver them within their existing roles, while maintaining training, mentoring and supervision to protect quality and essential elements.

Continue to adapt throughout project implementation to respond to changing environments.

Organisational readiness for scale

i) Building partnerships to take projects to scale:

Grantee partners stressed that scale requires deliberate decisions about the skills and organisations needed to complement existing organisational capacity. In Pakistan, Right to Play and Aahung combined strong organisational systems with Aahung's SRHR expertise to strengthen the adapted model. In PKN, lead organisation WOLREC formed a consortium to expand reach and deepen impact, investing in joint learning, trust, shared decision-making and clear roles, including **"a whole organogram of how we wanted to operate as a consortium"**.

This helped partners manage **"different capacities, skills and ways of working"** through consistent engagement, joint planning and shared problem solving. Global Communities joined forces with Kivulini to strengthen their work on VAWG prevention and referral expertise. Soul City's long-standing relationship with the South African

Broadcasting Company and its experience in edutainment provided a durable platform for adapting Shay'indlela. Each of the What Works II projects are led or co-led by WROs, based on the understanding that these organisations are deeply rooted in communities and best positioned to sustain gender-transformative projects beyond initial funding cycles. While the full impact on project outcomes remains to be seen, grantee partners highlighted that WROs are able to anticipate obstacles to transformation and adapt accordingly.

Partnerships between CSOs and with government can ensure the necessary expertise for scale. Partnerships with WROs can drive transformation and ensure sustainability.

ii) Localisation and community ownership

Grantee partners noted the importance of engaging with communities to ensure that change is driven from within through culturally relevant programming. Familia Imara and PPVAWG staff noted that they will leave strengthened capacity and knowledge as well as relevant materials in local languages to ensure community sustainability. Partnership with communities can strengthen the ecosystem to create an enabling environment to support safe and ethical VAWG programme delivery, while also building community ownership, which grantee partners identified as important when scale is considered from the onset. It is critical to engage communities in the design and adaptation of the intervention as this fosters community ownership that contributes to sustainable outcomes.

Partnerships with communities from the onset allows for the strengthening of the ecosystem that promotes an enabling environment and community ownership of projects, leading to long-term sustainability.

iii) Rethinking organisational capacity for scale

Scale continuously tests an organisation's internal systems as projects grow and strengthening them is an ongoing investment. Grantee partners described technical assistance from originators and the What Works II team as important contributors to ensuring organisational readiness to scale. Across projects, technical assistance played a critical role in strengthening design, supporting adaptation without losing core feminist and survivor-centred principles, and helping organisations navigate tensions between fidelity, feasibility and institutional requirements. Partners also emphasised the relational value of the technical support, noting that regular engagement, shared reflection and mutual accountability strengthened trust, solidarity and the people-centred approach needed for effective VAWG prevention at scale. Capacity was also built internally – for example, the PPVAWG team collaboration highlighted how internal systems had to be reinforced at the consortium level; whereas the Shay'indlela team highlighted how they needed to rehire former staff with the required skills to deliver the intended outcomes.

Scale requires organisations to rethink and build the skills and internal systems they need to scale, and to invest in continuous capacity strengthening including

through external technical support.

iv) Intentional planning and co-design

Grantee partners **“designed with scale in mind”**, thinking early about core components, Theory of Change (ToC), strategic partners, adaptations, budgets and the full implementation cycle. Inception and co-design phases allowed CSOs, research partners and government partners to co-design interventions and evaluations, clarify theories of change, refine adaptations and assess feasibility of the model. One partner described co-design as enabling them to make key decisions **“envisioning the scale story we hoped for”**, while matching complex realities with organisational capacity, funding and research ambitions. For Shay'indlela, an extended design phase, formative research and a shared ‘message bible’ meant the project launched with clearer systems and a research agenda aligned with the context.

Scaling requires intentional planning around resources and partnerships from the outset.

v) Continuous learning

All grantee partners gave examples of occasions when learning from practice or research required them to adapt their programming. After the baselines, PKN built new ways of engaging with polygamous relationships, rethinking their original plan of working with monogamous couples. This on-the-ground adjustment was facilitated by a close partnership between researchers and implementers, who interrogated the results and collaborated on

solutions, and the willingness of the implementing organisations to invest in learning and adaptation.

Organisations need to adopt a learning agenda throughout the scale journey.

vi) Flexible funding arrangements

Flexible and realistic funding was central to organisational readiness because scale exposed needs that could not be fully anticipated during design. Grantee partners said that due to the complexity of scale, there were often new areas of need emerging. PKN had to adapt delivery to rising fuel costs by combining activities **“rather than travel back and forth”**, and when Shay’indlela’s baseline showed unexpectedly high psychosocial support needs among adolescent girls, they increased the support from social workers.

Scale requires sufficient and flexible funding to respond to unforeseen needs.

Government readiness for scale

i) Government buy-in through relationship building, aligning with government priorities and co-creation

All grantee partners had long-standing relationships with government actors which enabled projects to be embedded in existing systems from the outset. Partners emphasised that governments need to be co-creators, not just recipients of externally designed interventions. Ownership deepened when government roles were clear

and decision-making was meaningful, supported through joint planning, technical working groups, inception workshops and memoranda of understanding. **“Scaling was not about doing less; it was about protecting what mattered most while making implementation feasible within government systems⁹.”**

In Tanzania, government representatives shaped Familia Imara to align with parenting, nutrition and implementation structures and in Malawi, PKN worked with the Ministry of Gender on the National Action Plan on Gender-Based Violence. In Pakistan, the PPVAWG project is integrated into the school curriculum and delivered in the classroom by trained teachers, requiring close collaboration with the education department to develop curriculum content and teacher training materials. Teachers also require refresher training and supervision to deliver at scale, requiring the involvement of the PPVAWG team to define roles and responsibilities, as well as to provide mentoring support.

Government ownership and buy-in grows from trust, relationships and shared design. Where possible, align with government policies to ensure long-term buy-in and sustainability.

ii) Balancing government and CSO strengths and roles

Partners understood sustainability as a gradual process of embedding evidence-based models into routine systems, not a simple handover. Government may be able to sustain core activities through school, police, health or child protection structures, but civil society may still need to lead innovation and adaptation. As one Shay’indlela team member put

it, **“Government may not innovate in the same way as civil society, but existing school structures can sustain core activities when supported with the right facilitators, guidance and ongoing engagement.”** A PPVAWG reflection underlined the importance of strategic framing: **“Critically framing the issues is key; if sensitive topics are presented in ways that create unnecessary difficulties for government partners, support can be lost.”**

Grantee partners cautioned against governments taking on projects wholesale. There is a need to identify which aspects of a model can be taken on by government and what aspects should continue to be implemented by CSOs due to their agility and ability to continually innovate. Accountability also sits across government and civil society. Governments are formally accountable for leadership, budgets and service delivery, while civil society groups are accountable to the local communities, women and girls that they represent. Grantee partners considered institutionalisation a gradual process that needs to be accompanied by system strengthening and ongoing political commitment. It requires ongoing deliberate engagement and skills transfer.

Ensure there is clarity between what governments can take up and where civil society needs to continue to lead. Institutionalisation is a gradual process of strengthening systems, not a simple handover.

iii) Providing evidence to drive government confidence

Robust evidence helped governments trust, approve and

invest in scale. Partnerships between grantee partners and research partners were considered important to build a credible evidence base. In Pakistan, Right to Play’s evidence from What Works I allowed the Sindh provincial government to have confidence in the model and a credible basis for investing in approvals, teacher training and systems integration. They noted that the researchers are **“needed in the framing of the evidence”**, suggesting that working together to understand and use the evidence strategically is a joint responsibility.

Implementers and researchers need to work together to make the evidence accessible and tailored for governments so it can serve as a foundation for scale.

iv) Transformation at the heart of VAWG scale

Partners also stressed that scaling is complex and that government systems needed sustained support to deliver work that addresses gender norms, power and VAWG, and to cope with high staff turnover, competing priorities, uneven facilitator capacity and discomfort with sensitive topics. They also emphasised that governments themselves are often hierarchical or patriarchal institutions.

In partnerships between governments, WROs and CSOs, there is a need for sustained values clarification, reflective practice and mentoring to be able to deliver transformative VAWG prevention safely and effectively at scale.

Recommendations

for scaling VAWG

prevention approaches



Practitioners

- **Build strategic alliances early between WROs and CSOs** with complementary skills to achieve the desired pathway to scale. Work with originators to select and protect essential elements. Clarify roles and ways of working.
- **Embed learning at every stage of scale implementation.** Stay alert to what implementation reveals, course correct and adapt as needed during the project. Establish a clear learning agenda with a dedicated budget.
- **Contribute to the global conversation** on conditions and pathways to scaling VAWG prevention interventions through documenting learning from practice and to ensure that it is grounded in local contexts and priorities.
- **Engage with governments from the design stage.** Build on prior relationships and align with government policy to establish trust and institutional buy-in. Nuance language to fit the political context, while keeping the core substance of VAWG prevention intact.



Researchers

- **Collaborate with practitioners early in the design phase of a project.** Build partnerships between research and implementation teams to develop a common vision of the project goals, as well as the type of evidence a project can generate.
- **Combine research expertise with practitioners contextual and implementation knowledge** to strengthen ongoing delivery, support continuous improvement and generate learning for longer term impact at scale
- **Work collaboratively with practitioners once research findings have been generated** to package evidence from research in a meaningful way and tell a joint story about scale that takes into account the nuances of the context.



Government policymakers

- **Demonstrate long-term political commitment with clearly assigned leadership**, accountability and ownership. Ensure there are mandated personnel to make decisions so that momentum on scale does not rest with one individual/ally.
- **Demonstrate the political will and leadership to champion VAWG prevention** through policy alignment. Take budgets for VAWG prevention and response activities across departments to other different sectors and protect funding through annual budget cycles.
- **Engage with WROs as strategic partners**, innovators, knowledge holders and accountability actors for transformative VAWG programming at scale to assist in the identification of which functions need to sit with government-led scale and which could be outsourced to CSOs or other partners.
- **Work alongside the WROs and CSOs implementing** or that originated or adapted evidence-based models to protect core components, support safe adaptation and maintain survivor centred, quality practice as projects scale.
- **Strengthen regional and global policy commitments** to VAWG prevention through sharing practical learning at convenings on the conditions needed to scale and institutionalise promising interventions.



Donors

- **Adopt a broad understanding of scale** that goes beyond numbers. Support multiple pathways to scale, including approaches that prioritise depth, quality, adaptation, institutionalisation and new forms of partnership.
- **Invest in the partnerships and relationships** needed for responsible scaling. Recognise that government uptake may be partial, and **continue investing in more agile civil society organisations**, including WROs.
- **Recognise that government priorities shape whether and how scale projects** are adopted, and that evidence alone is rarely sufficient to secure government uptake or funding. Support civil society to align VAWG prevention with relevant government agendas.
- **Make contingency funding accessible for large, multi-year scale projects**, particularly those operating across multiple partners or in complex contexts to address unforeseen needs
- **Coordinate with other donors** to share knowledge about pathways to scale and to ensure that funding of projects and research is complementary rather than duplicative.
- **Intentionally invest in building the evidence** on effective pathways to scale and test interventions that have been proven to reduce VAWG at scale with new contexts and populations.

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